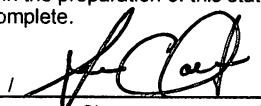
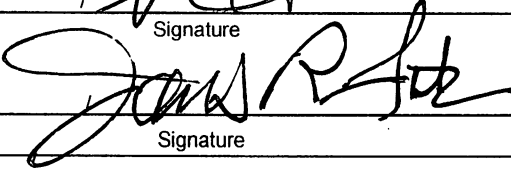




**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1. Committee I.D. Number</b><br>137953                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <b>3. This Statement covers From:</b> 01/01/23 to 07/20/23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <b>2. Committee Name</b><br>CTE Jim Fouts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <b>4. Candidate Last Name</b> Fouts <b>First Name</b> James <b>M.I.</b> R.<br><b>4a. Office Sought Including District # or Community Served (If applicable)</b><br>Mayor - Warren<br><b>4b. County of Residence</b> MACOMB                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <b>5. Committee's Mailing Address</b><br>CTE Jim Fouts<br>28107 St. Louise<br>Warren, MI 48092<br><br>Area Code and Phone (586) 573-8058<br>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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <b>6. Treasurer's Name &amp; Residential Address</b><br>James R. Fouts<br>28107 St. Louise<br>Warren, MI 48092<br><br>Area Code & Phone (586) 573-8058                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| <b>7. Treasurer's Business Address</b><br><br><br>Area Code and Phone _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <b>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</b><br>Sean Clark<br>28047 Los Olas Drive<br>Warren, MI 48093<br><br>Area Code and Phone (248) 506-0080                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| <b>9. TYPE OF STATEMENT</b><br>9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election<br><br>Pre-Election or Post-Election Statement relates to:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Convention<br><input type="checkbox"/> Special<br><input type="checkbox"/> School<br><input type="checkbox"/> Caucus<br><br>Date of Election, Convention or Caucus<br>_____<br><br><b>Required ONLY if candidate is not on the ballot for the current year:</b><br><input checked="" type="checkbox"/> July Quarterly<br><input type="checkbox"/> October Quarterly<br><br>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year<br><br>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) |  | <b>9e. Dissolution of Candidate Committee</b><br><input type="checkbox"/> 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.<br><br>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.<br><br>Effective date of dissolution<br>_____<br><br>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. |  |
| <b>10. Verification:</b> 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 <b>Sean Clark</b><br>Type or Print Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Signature  Date 7/24/23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| Candidate <b>James R. Fouts</b><br>Type or Print Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Signature  Date 7/24/23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 137953

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name CTE James Fouts

| RECEIPTS                                                                                        | Column I<br>This Period        | Column II<br>Cumulative this election cycle |
|-------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------|
| 3. Contributions                                                                                |                                |                                             |
| a. Itemized (Schedule 1A - Column 6)                                                            | (3a.) \$ <u>17,100.00</u>      |                                             |
| b. Unitemized (less than \$20.01 each - no Schedule)                                            | (3b.) \$ <u>NOT APPLICABLE</u> |                                             |
| c. Subtotal of "Contributions"                                                                  | (3c.) \$ <u>17,100.00</u>      | (18.) \$ <u>\$0.00</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>\$17,100.00</u>     | (20.) \$ <u>\$89,375.00</u>                 |
| <b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>                                                 |                                |                                             |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7)                                              | (6.) \$ <u>\$1,600.00</u>      | (21.) \$ <u>\$3,890.59</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>\$2,883.90</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>\$2,883.90</u>      | (23.) \$ <u>\$58,334.02</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>\$162,807.00</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>\$28,368.50</u>    |                                             |
| 14. Amount received during reporting period<br>(Line 5, Total Contributions & Other Receipts)   | (14.) + \$ <u>\$17,100.00</u>  |                                             |
| 15. SUBTOTAL Add lines 13 and 14                                                                | (15.) = \$ <u>\$45,468.50</u>  |                                             |
| 16. Amount expended during reporting period<br>(Add lines 9 and 11)                             | (16.) - \$ <u>\$2,883.90</u>   |                                             |
| 17. ENDING BALANCE<br>(Subtract line 16 from line 15)                                           | (17.) \$ <u>\$42,584.60</u> *  |                                             |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

| 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>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Monte Abdulnoor</b><br>6958 Golden Court<br>West Bloomfield, MI 48322                                                                                                                                                                                                                                                    |                                           | \$ <u>1000</u>                     | \$ <u>1000</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Agent</u> Employer <u>Thrive Hospitality Group</u><br>Business Address <u>6958 Golden Ct., West Bloomfield, MI 48322</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>John Axe</b><br>481 Kercheval Ave.<br>Grosse Pointe Farms, MI 48236                                                                                                                                                                                                                                                      |                                           | \$ <u>125</u>                      | \$ <u>725</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Attorney</u> Employer <u>Clark Hill</u><br>Business Address <u>500 Woodward Ave., Ste. 3500, 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       |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Mike Bahoura</b><br>1106 Cherokee Ave.<br>Royal Oak, MI 48067                                                                                                                                                                                                                                                            |                                           | \$ <u>1250</u>                     | \$ <u>1250</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Attorney</u> Employer <u>Bahoura Law</u><br>Business Address <u>77 E. Long Lake Dr., 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      |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Jeffery Bianchini</b><br>11465 Bruce North Ln.<br>Bruce Twp, MI 48065                                                                                                                                                                                                                                                    |                                           | \$ <u>250</u>                      | \$ <u>550</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>President</u> Employer <u>Bison Plumbing</u><br>Business Address <u>25780 Ryan Road, Warren, MI 48091</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                |                                           | Click Here for Memo Itemization    |                                                                                 |

Page Subtotal \$2,625.00

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 137953  
2. Committee Name CTE Jim Fouts

| 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>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Gary Boike</b><br>14139 Lowe Dr.<br>Warren, MI 48088                                                                                                                                                                                                                                                                         |                                           | \$ <u>200</u>                      | \$ <u>200</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>District Supervisor</u> Employer <u>Walden Security</u><br>Business Address <u>231 W. Lafayette Blvd., 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 |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Christian Bonett</b><br>8381 McKinley<br>Clay, MI 48001                                                                                                                                                                                                                                                                      |                                           | \$ <u>250</u>                      | \$ <u>375</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Captain</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                      |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Daniel Bozek</b><br>8708 Edgewater Ln.<br>Warren, MI 48093                                                                                                                                                                                                                                                                   |                                           | \$ <u>125</u>                      | \$ <u>125</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Sergeant</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                     |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Vito Castellana</b><br>52188 Van Dyke Ave., Ste. 105<br>Shelby Township, MI 48316                                                                                                                                                                                                                                            |                                           | \$ <u>500</u>                      | \$ <u>500</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Member</u> Employer <u>V.S.V. LLC</u><br>Business Address <u>52188 Van Dyke Ave, Ste. 105, 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         |                                           | Click Here for Memo Itemization    |                                                                                 |

Page Subtotal \$1,075.00

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 137953

2. Committee Name CTE Jim Fouts

| 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>01/25/23</u><br>Name & Address:<br><b>Clarissa Cayton</b><br>2075 Elmhurst Cir., #205<br>Orion, MI 48359                                                                                                                                        |  | \$ <u>125</u>                   | \$ <u>550</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Communications Director</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Mallory Clark</b><br>28047 Los Olas Dr.<br>Warren, MI 48093                                                                                                                                                |  | \$ <u>500</u>                   | \$ <u>1250</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Barber</u> Employer <u>The Brand</u><br>Business Address <u>42 14 Mile Rd., Clawson, MI 48017</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                       |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Jennifer Czeiszperger</b><br>39249 Wilmarth<br>Harrison Twp, MI 48045                                                                                                                                     |  | \$ <u>250</u>                   | \$ <u>1050</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Assessor</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Gail Dietz</b><br>15632 Flanagan<br>Roseville, MI 48066                                                                                                                                                   |  | \$ <u>250</u>                   | \$ <u>975</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Administrative Clerk</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |  | Click Here for Memo Itemization |                                                                                 |

Page Subtotal **\$1,125.00**

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 137953  
2. Committee Name CTE Jim Fouts

| 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>01/25/23</u> |                                                                                 |
| Name & Address:<br>Paul Doppke<br>21646 Erben St.<br>St. Clair Shores, MI 48081                                                                                                                                                                                                                                                           |                                           | \$ <u>625</u>                      | \$ <u>1125</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Landscape Services</u> Employer <u>Partner</u><br>Business Address <u>22932 Rasch Dr., Clinton Twp., MI 48305</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br>Thomas Dugan<br>6629 Powers Ct.<br>Shelby Twp., MI 48317                                                                                                                                                                                                                                                               |                                           | \$ <u>100</u>                      | \$ <u>225</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Inspector</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser           |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br>William Dwyer<br>35862 Lone Pine Dr.<br>Farmington Hills, MI 48335                                                                                                                                                                                                                                                     |                                           | \$ <u>200</u>                      | \$ <u>975</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Police Commissioner</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br>Joyce Fouts<br>20039 Carriage Ln.<br>Beverly Hills, MI 48025                                                                                                                                                                                                                                                           |                                           | \$ <u>125</u>                      | \$ <u>125</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                                                       |                                           | Click Here for Memo Itemization    |                                                                                 |

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.



1. Committee I.D. Number 137953  
2. Committee Name CTE Jim Fouts

|                                                                        |                                                    |
|------------------------------------------------------------------------|----------------------------------------------------|
| Page Subtotal                                                          | \$750.00                                           |
| Grand Total of All Schedules 1A<br>(Complete on last page of Schedule) | Enter this total on<br>line 3a of Summary<br>Page. |



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

| 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>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Nicholas Hannawa</b><br>5420 Wing Lake Rd.<br>Bloomfield Hills, MI 48320                                                                                                                                                                                                                                                |                                           | \$ <u>1000</u>                     | \$ <u>1500</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Partner</u> Employer <u>Hannawa Hirmiz Law, PLLC</u><br>Business Address <u>29009 E. Big Beaver 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 |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Scott Issacson</b><br>6101 Lanake Ln.<br>Imlay City, MI 48444                                                                                                                                                                                                                                                           |                                           | \$ <u>125</u>                      | \$ <u>125</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Police Officer</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser          |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>James Kaiser</b><br>2089 Camel<br>Sterling Heights, MI 48310                                                                                                                                                                                                                                                            |                                           | \$ <u>500</u>                      | \$ <u>1700</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Inspector</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser               |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Mark Knapp</b><br>21763 Curie Ave.<br>Warren, MI 48091                                                                                                                                                                                                                                                                  |                                           | \$ <u>500</u>                      | \$ <u>500</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Assistant Controller</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser     |                                           | Click Here for Memo Itemization    |                                                                                 |

Page Subtotal **\$2,125.00**

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

| 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) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|---------------------------------------------------------------------------------|
| <p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p>Joseph Kovalcik<br/>31990 Aline Dr.<br/>Warren, MI 48093</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Operations Manager</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>            |  | \$ <u>125</u> | \$ <u>550</u>                                                                   |
| <p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p>Wilburt McAdams<br/>1235 Dufrain Ave.<br/>Pontiac, MI 48342</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Fire Commissioner</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>           |  | \$ <u>250</u> | \$ <u>800</u>                                                                   |
| <p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p>Mary Michaels<br/>17020 Maumee<br/>Grosse Pointe, MI 48230</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Assistant City Attorney</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>     |  | \$ <u>500</u> | \$ <u>1400</u>                                                                  |
| <p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p>David Muzzarelli<br/>13311 Teak Ct.<br/>Sterling Heights, MI 48312</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Maintenance Director</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p> |  | \$ <u>125</u> | \$ <u>1125</u>                                                                  |

Page Subtotal \$1,000.00

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 137953

2. Committee Name CTE Jim Fouts

| 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>01/25/23</u><br>Name & Address:<br><b>Mark O'Kray</b><br>49639 Shelby Creek Dr.<br>Shelby Twp., MI 48317                                                                                                                                |  | \$ <u>125</u>                   | \$ <u>275</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Police Officer</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser  |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Randy Owen</b><br>205 N. Lake George Rd.<br>Attica, MI 48412                                                                                                                                       |  | \$ <u>1000</u>                  | \$ <u>2000</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Owner</u> Employer <u>Owen Tree Service</u><br>Business Address <u>205 N. Lake George Rd., Attica, MI 48412</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Richard Palmer</b><br>11295 Tara Dr.<br>Warren, MI 48093                                                                                                                                          |  | \$ <u>100</u>                   | \$ <u>250</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                                                   |  | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><b>Thomas Pawlekowski</b><br>11272 River Dr.<br>Warren, MI 48093                                                                                                                                     |  | \$ <u>125</u>                   | \$ <u>550</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Water Director</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |  | Click Here for Memo Itemization |                                                                                 |

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 137953

2. Committee Name CTE Jim Fouts

| 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) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|---------------------------------------------------------------------------------|
| <p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Angela Randazzo</b><br/>37180 Willow Ln.<br/>Clinton Twp., MI 48036</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Retired</u>      Employer <u>Retired</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>                                                          |  | \$ <u>1000</u> | \$ <u>1000</u>                                                                  |
| <p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Salama Dhafer</b><br/>3520 Wards Point Dr.<br/>Orchard Lake, MI 48324</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Doctor</u>      Employer <u>Self</u></p> <p>Business Address <u>11446 E. 13 Mile Rd., Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>                     |  | \$ <u>100</u>  | \$ <u>100</u>                                                                   |
| <p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Stephan Saph</b><br/>44 Macomb Pl.<br/>Mt. Clemens, MI 48046</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Partner</u>      Employer <u>Nickle &amp; Saph, Inc.</u></p> <p>Business Address <u>44 Macomb Pl., Mt. Clemens MI 48046</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>            |  | \$ <u>500</u>  | \$ <u>1400</u>                                                                  |
| <p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Leonard Schafer</b><br/>48685 Hidden Oaks Lane<br/>Shelby Twp., MI 48317</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Partner</u>      Employer <u>Landscape Services</u></p> <p>Business Address <u>22932 Rasch Dr., Clinton Twp., MI 48305</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p> |  | \$ <u>650</u>  | \$ <u>1150</u>                                                                  |

Page Subtotal **\$2,250.00**

Grand Total of All Schedules 1A  
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Page.



**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

| 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>01/25/23</u><br>Name & Address:<br><u>Gary Sikora</u><br><u>32605 Pine Ridge</u><br><u>Warren, MI 48093</u>                                                                                                                                  |  | \$ <u>125</u>                                   | \$ <u>550</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Sanitation Director</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser  |  | <a href="#">Click Here for Memo Itemization</a> |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><u>Cecil St. Pierre, Jr.</u><br><u>32595 Sabrina Ct.</u><br><u>Warren, MI 48093</u>                                                                                                                        |  | \$ <u>625</u>                                   | \$ <u>725</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Attorney</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser             |  | <a href="#">Click Here for Memo Itemization</a> |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><u>Marilyn Tremberth</u><br><u>7241 Helen</u><br><u>Center Line, MI 48015</u>                                                                                                                             |  | \$ <u>125</u>                                   | \$ <u>400</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Administrative Clerk</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  | <a href="#">Click Here for Memo Itemization</a> |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u><br>Name & Address:<br><u>Oksana Urban</u><br><u>13175 Ironwood Dr.</u><br><u>Shelby Twp., MI 48315</u>                                                                                                                          |  | \$ <u>250</u>                                   | \$ <u>250</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Librarian</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser            |  | <a href="#">Click Here for Memo Itemization</a> |                                                                                 |

Page Subtotal \$1,125.00

Grand Total of All Schedules 1A  
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Enter this total on  
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Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

| 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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|---------------------------------------------------------------------------------|
| <p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>James VanHavermaat</b><br/>11341 Meadowbrook Dr.<br/>Warren, MI 48093</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Retired</u>      Employer <u>Retired</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>                                             |  | \$ <u>125</u> | \$ <u>550</u>                                                                   |
| <p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Ethan Vinson</b><br/>3440 Sherborne Rd.<br/>Detroit, MI 48221</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>City Attorney</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>      |  | \$ <u>125</u> | \$ <u>550</u>                                                                   |
| <p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Marilyn Warren</b><br/>18536 Woodbine<br/>Fraser, MI 48026</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Benefits Coordinator</u>      Employer <u>City of Warren</u></p> <p>Business Address <u>One City Square, Warren, MI 48093</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p> |  | \$ <u>125</u> | \$ <u>550</u>                                                                   |
| <p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:</p> <p><b>Martin Wicker</b><br/>14521 Fina Dr.<br/>Warren, MI 48088</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation <u>Retired</u>      Employer <u>Retired</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>                                                         |  | \$ <u>250</u> | \$ <u>375</u>                                                                   |

Page Subtotal **\$625.00**

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

Enter this total on  
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Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 137953  
2. Committee Name CTE Jim Fouts

| 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>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>James Wolfe</b><br>56384 Tournament<br>Macomb, MI 48042                                                                                                                                                                                                                                                                      |                                           | \$ <u>125</u>                      | \$ <u>275</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Lieutenant</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                   |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Randolph Wright</b><br>255 E. Brown Street<br>Birmingham, MI 48009                                                                                                                                                                                                                                                           |                                           | \$ <u>250</u>                      | \$ <u>1125</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Attorney</u> Employer <u>Berry Moorman PC</u><br>Business Address <u>535 Griswold St., Ste. 1900, 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      |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Ronald Wuerth</b><br>25481 Billette Dr.<br>Warren, MI 48091                                                                                                                                                                                                                                                                  |                                           | \$ <u>125</u>                      | \$ <u>675</u>                                                                   |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>City Planner</u> Employer <u>City of Warren</u><br>Business Address <u>One City Square, Warren, MI 48093</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |                                           | Click Here for Memo Itemization    |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/25/23</u> |                                                                                 |
| Name & Address:<br><b>Douglas Young</b><br>117 W. 4th Street, Ste. 201<br>Royal Oak, MI 48067                                                                                                                                                                                                                                                      |                                           | \$ <u>250</u>                      | \$ <u>1100</u>                                                                  |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Attorney</u> Employer <u>Young Insurance Law</u><br>Business Address <u>117 W. 4th Street, Ste. 201, 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 |                                           | Click Here for Memo Itemization    |                                                                                 |

Page Subtotal \$750.00

Grand Total of All Schedules 1A  
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Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953  
2. Committee Name CTE Jim Fouts

| 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) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|---------------------------------------------------------------------------------|
| <p>3. Contribution #1      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:<br/>Clark Hill PAC<br/>500 Woodward Ave., Ste. 3500<br/>Detroit, MI 48226</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation _____ 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</p>                 |  | \$ <u>250</u> | \$ <u>1800</u>                                                                  |
| <p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:<br/>Pipefitters Local 636 PAC<br/>700 Tower Dr., Ste. 300<br/>Troy, MI 48098</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation _____ 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</p>                         |  | \$ <u>500</u> | \$ <u>500</u>                                                                   |
| <p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>01/25/23</u></p> <p>Name &amp; Address:<br/>Warren Police Command Officers Association PAC<br/>29900 Civic Center Blvd.<br/>Warren, MI 48093</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation _____ 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</p> |  | \$ <u>500</u> | \$ <u>2000</u>                                                                  |
| <p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address:</p> <p>5. If over \$100.00 cumulative, please provide:<br/>Occupation _____ Employer _____<br/>Business Address _____<br/>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>                                                                                                                           |  | \$ _____      | \$ _____                                                                        |

Page Subtotal \$1,250.00

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

\$17,100.00

Enter this total on  
line 3a of Summary  
Page.



## ITEMIZED IN-KIND CONTRIBUTIONS

### SCHEDULE 1-IK

1. Committee I. D. Number 137953

### CANDIDATE COMMITTEE

2. Committee Name CTE Jim Fouts

| 3. Name and Address from whom received<br>If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.                                                                                                                                                                                                       | 4. Type of In-Kind Contribution (Check applicable box)<br>5. Date of Receipt<br>6. Name & Address of Vendor from whom goods or services were purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 7. Amount or Fair Market Value | 8. Cumulative for Election Cycle (Through date in Item 5) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------|
| <div>Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes</div> <div>Name &amp; Address:<br/>Hatem Hannawa<br/>30834 Club House Ln.<br/>Farmington Hills, MI 48334</div> <div>If over \$100.00 cumulative, please provide:<br/>Occupation: <u>Owner</u><br/>Employer Name &amp; Business Address:<br/>BD&amp;E Group, LLC<br/>30095 Northwestern Hwy., Ste. 105<br/>Farmington Hills, MI 48334</div> <div><input checked="" type="checkbox"/> Fund Raiser Contribution</div> | <div>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br/><input type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated<br/><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others<br/><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b></div> <div>Description <u>Dinner</u></div> <div>5. Date Of Receipt: <u>01/25/23</u></div> <div>6. Vendor Name &amp; Address:<br/>Andiamo<br/>7096 E. 14 Mile Rd.<br/>Warren, MI 48092</div> <div style="text-align: right;"><a href="#">Click Here for Memo Itemization</a></div> | \$ <u>1600</u>                 | \$ <u>1600</u>                                            |
| <div>Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes</div> <div>Name &amp; Address:</div> <div>If over \$100.00 cumulative, please provide:<br/>Occupation:<br/>Employer Name &amp; Address:</div> <div><input type="checkbox"/> Fund Raiser Contribution</div>                                                                                                                                                                                                         | <div>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br/><input type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated<br/><input type="checkbox"/> Goods or Services Purchased by Candidate or Others    \$ _____<br/><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b></div> <div>Description _____</div> <div>5. Date Of Receipt: _____</div> <div>6. Vendor Name &amp; Address:</div> <div style="text-align: right;"><a href="#">Click Here for Memo Itemization</a></div>                                                                           | \$ _____                       | \$ _____                                                  |
| <div>Contribution #3      PAC Receipt? <input type="checkbox"/> Yes</div> <div>Name &amp; Address:</div> <div>If over \$100.00 cumulative, please provide:<br/>Occupation:<br/>Employer Name &amp; Address:</div> <div><input type="checkbox"/> Fund Raiser Contribution</div>                                                                                                                                                                                                          | <div>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br/><input type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated    \$ _____<br/><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br/><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b></div> <div>Description _____</div> <div>5. Date Of Receipt: _____</div> <div>6. Vendor Name &amp; Address:</div> <div style="text-align: right;"><a href="#">Click Here for Memo Itemization</a></div>                                                                           | \$ _____                       | \$ _____                                                  |

|               |            |            |
|---------------|------------|------------|
| Page Subtotal | \$1,600.00 | \$1,600.00 |
|---------------|------------|------------|

|                                                                          |            |
|--------------------------------------------------------------------------|------------|
| Grand Total of all Schedules 1-IK<br>(Complete on last page of Schedule) | \$1,600.00 |
|--------------------------------------------------------------------------|------------|

Enter this total  
on line 6 of Summary  
Page



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

1. Committee I. D. Number 137953  
2. Committee Name CTE Jim Fouts

| 3. Name and address of person or vendor to whom paid                                                                                                                              | 4. Purpose (Required Information)                                                                                                                                 | 5. Date                 | 6. Amount         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------|
| Expenditure #1<br>Name <b>REM Printing</b><br><br>Address<br>15632 Flanagan<br>Roseville, MI 48066<br><br><input type="checkbox"/> Fund Raiser                                    | Purpose: <u>Printing</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement            | <u>02/17/23</u><br>Date | \$ <u>441</u>     |
| Expenditure #2<br>Name <b>York, Dolan &amp; Tomlison</b><br><br>Address<br>26600 Hall Road<br>Suite 205<br>Clinton Township, MI 48036<br><br><input type="checkbox"/> Fund Raiser | Purpose: <u>Attorney</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement            | <u>03/10/23</u><br>Date | \$ <u>375</u>     |
| Expenditure #3<br>Name <b>MG Photography &amp; Design</b><br><br>Address<br>6120 N. Rochester Rd.<br>Rochester Hills, MI 48306<br><br><input type="checkbox"/> Fund Raiser        | Purpose: <u>Photography</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement         | <u>03/17/23</u><br>Date | \$ <u>1478.70</u> |
| Expenditure #4<br>Name <b>ABC Mailing</b><br><br>Address<br>33510 Groesbeck Hwy.<br>Fraser, MI 48026<br><br><input type="checkbox"/> Fund Raiser                                  | Purpose: <u>Mail</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                | <u>04/10/23</u><br>Date | \$ <u>148.20</u>  |
| Expenditure #5<br>Name <b>REM Printing</b><br><br>Address<br>15632 Flanagan<br>Roseville, MI 48066<br><br><input type="checkbox"/> Fund Raiser                                    | Purpose: <u>Printing</u><br><br><input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>04/15/23</u><br>Date | \$ <u>441.00</u>  |

|                                                                        |            |
|------------------------------------------------------------------------|------------|
| Subtotal this page                                                     | \$2,883.90 |
| Grand Total of all Schedules 1B<br>(Complete on last page of Schedule) | \$2,883.90 |

Enter this total  
on line 8a of  
Summary Page



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953  
2. Committee Name CTE Jim Fouts

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

| 3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.<br><br>Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any. | 4. Type of Obligation (Description)<br>5. Indicate date debt was incurred<br>6. Indicate original amount of debt                           | 7. Date and amount of each payment | 8. Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------|----------------------------------------------------------------------|
| Debt #1 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>06/01/07</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 139,307.00</u> | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>139,307.00</u><br><input type="checkbox"/> FORGIVEN            |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                            |                                    |                                       |                                                                      |
| Debt #2 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>11/28/11</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 5,500.00</u>   | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>5,500.00</u><br><input type="checkbox"/> FORGIVEN              |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                            |                                    |                                       |                                                                      |
| Debt #3 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>5/23/19</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 4,000.00</u>    | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>4,000.00</u><br><input type="checkbox"/> FORGIVEN              |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                            |                                    |                                       |                                                                      |

Page Subtotal (Outstanding debt) **\$148,807.00**

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

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

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



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953  
2. Committee Name CTE Jim Fouts

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

| 3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.<br><br>Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any. | 4. Type of Obligation (Description)<br>5. Indicate date debt was incurred<br>6. Indicate original amount of debt                         | 7. Date and amount of each payment | 8. Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------|----------------------------------------------------------------------|
| Debt #1 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>07/05/19</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 2,000.00</u> | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>2,000.00</u><br><input type="checkbox"/> FORGIVEN              |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                          |                                    |                                       |                                                                      |
| Debt #2 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>10/25/19</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 6,000.00</u> | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>6,000.00</u><br><input type="checkbox"/> FORGIVEN              |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                          |                                    |                                       |                                                                      |
| Debt #3 Corp? <input type="checkbox"/> Yes<br>Owed to or by:<br><b>James R. Fouts</b><br><b>28107 St. Louise</b><br><b>Warren, MI 48092</b>                                                                                                                                  | 4. Type: <u>Loan</u><br>5. <u>Date Debt Was Incurred:</u><br><u>10/31/19</u><br>6. <u>Original Amount of Debt:</u><br><u>\$ 6,000.00</u> | \$<br>\$<br>\$<br>\$<br>\$         | \$                                    | \$ <u>6,000.00</u><br><input type="checkbox"/> FORGIVEN              |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____                                                                                                                                                                                                 |                                                                                                                                          |                                    |                                       |                                                                      |

Page Subtotal (Outstanding debt) **\$14,000.00**  
Grand Total of all Schedules 1E **\$162,807.00**  
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137953

2. Committee Name CTE Jim Fouts

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

|                                               |                                                                                                   |                                                       |                                                                                                                                                                                                         |
|-----------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3. Date Event Was Held<br><br><u>01/25/23</u> | 4. Number of Individuals Attending<br>or Participating (whichever is<br>greater)<br><br><u>40</u> | 5. Type of Fund Raising Activity<br><br><u>Dinner</u> | 6. Address and Name (If any) of the<br>place where the activity was held.<br><br><u>Andiamo</u><br><u>7096 E. 14 Mile Road</u><br><u>Warren, MI 48092</u><br><input type="checkbox"/> Private Residence |
|-----------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

7. Total Contributions \$17,100.00

8. Other Receipts \_\_\_\_\_

9. Gross Receipts (Add lines 7 and 8) \$17,100.00

10. Total Cost of Event \$1,600.00

(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<br>(%) | Expenditure Split<br>(%) |
|---------------|---------------------------|--------------------------|
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |
| _____         | _____                     | _____                    |

- 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.