MICHIGAN DE	PARTMENT OF STATE			FILED				
BUREAU C	OF ELECTIONS			25 JUL 2023 PM	03:21			
	TE COMMITTE			MACOMB COUNTY C MT. CLEMENS, MICH	IIGAN	FOR OFFICIAL USE ONLY		
Report must be legible, type the treasurer (or designated	d or printed in ink and si record keeper) and can	igned by didate.	3. This Statement covers From: 01/01/2023 to 07/20/2023					
1. Committee I.D. Number				Candidate Last Name		First Name M.I.		
139377			RADTKE MICHAEL V					
				4a. Office Sought Including District # or Community Served (If applicable)				
2. Committee Name			СС	COUNCIL, STERLING HEIGHTS				
CITIZENS FOR		DTKE	4b.	County of Residence MA	СОМВ	COUNTY		
5. Committee's Mailing Addre	ess		6	Treasurer's Name & Reside	ntial Add	ress		
34205 BARRETT STERLING HEIGHT	FS, MI 48312		13	RGINIA LA ROSA 515 PARKRIDGE HELBY TWP, MI 4				
Area Code and Phone (586) 873-8427 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.				a Code & Phone <u>(586)</u>	739-88	385		
7. Treasurer's Business Addr	ess		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)					
13515 PARKRIDGE SHELBY TWP, MI 4			De	signaled Necord keeper)				
Area Code and Phone (58	6) 739-8885		Are	ea Code and Phone <u>()</u> -				
9. TYPE OF STATEMENT					9e. Dis	ssolution of Candidate Committee		
9a. Pre-Election OR		is not on the b	NLY if candidate e ballot for the			checking this item I/We certify any outstanding d		
Pre-Election or Post-Election		current year:				committee to the candidate or his or her spouse is narged and forgiven, and no longer collectible from		
		July Quarte	erly the committee. The co		nmittee. The committee has no oustanding asset			
Primary	Г	October Qu	iarte	eriv	owes no	o lates fees or has any oustanding debt.		
General			Further			if the dissolution cannot be granted, that this be red a request for the Reporting Waiver.		
Convention					consider	red a request for the Reporting Walver.		
Special	9	c. 🗌 Annual	l Sta	atement (<u>2023</u>)		Effective date of dissolution		
School		_		Coverage Year				
Caucus	9	(Comple	ndment to Campaign Statement plete Item 9a, 9b , 9c or 9e to te which Statement is being ded.)			Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
Date of Election, Convention	on or Caucus							
					<u> </u>			
10. Verification: I\We certify th my\our knowledge and belief					ent and a	attached schedules (if any) and to the best of		
Current Treasurer or						Submitted electronically, signature on file 07/25/2023		
Designated Record keeper _	Type or Print Name	,	/	Signature		signature on file 07/25/2023		
				Cignaturo	c	Submitted electronically,		
Candidate			/			signature on file Date 07/25/2023		
	Type or Print Name			Signature				



1. Committee I.D. Number 139377 SUMMARY PAGE 2. Committee Name CITIZENS FOR MICHAEL RADTKE **CANDIDATE COMMITTEE** RECEIPTS Column I Column II This Period Cumulative this election cycle 3. Contributions (3a.) \$ 0.00 a. Itemized (Schedule 1A - Column 6) b. Unitemized (less than \$20.01 each - no Schedule) (3b.) \$ NOT APPLICABLE (3c.) \$_0.00 (18.) \$_11,640.00 c. Subtotal of "Contributions" (4.) \$_0.00 (19.) 0.004. Other Receipts (Schedule 1A -1, Column 6) (20.) \$ 11,640.00 (5.) \$ 0.00 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** (6.) \$ 629.00 (21.) \$ 2,871.93 6. In-Kind Contributions (Schedule 1-IK, Column 7) (22.) \$ 0.00 (7.) \$ 0.00 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) **EXPENDITURES** 8. Expenditures _{(8a.) \$} 1,738.68 a. Itemized (Schedule 1B, Column 6) (8b.) \$ 0.00 b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8c.) \$ _0.00 c. Unitemized (less than \$50.01 each - no Schedule) (9.) **\$** 1,738.68 (23.) \$ 11,839.24 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements (10a.) \$ 0.00 a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) (10b.) \$ 0.00 **11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS** (Add Line 10a + Line 10b) (24.) \$_0.00 (11.) \$ 0.00 DEBTS AND OBLIGATIONS 12. Debts and Obligations (12a.) \$ 28,643.32 a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12b.) \$ 0.00 **BALANCE STATEMENT** (13.) \$ 14,405.48 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) (14.) + \$ 0.00 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ 14,405.48 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (16.) - \$ 1,738.68 (Add lines 9 and 11) 17. ENDING BALANCE (17.) \$ 12,666.80 (Subtract line 16 from line 15)

ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-IK						
CANDIDATE COMM	IITTEE 2. Committee Name CITIZENS F	FOR	MICHAE	:L	RADIKE	
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services of purchased	were	7. Amount or Fair Market Value		8. Cumulative for Election Cycle (Through date in Item 5)	
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHEL BY TWP. MI 48315	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LC Description EMAIL 5. Date Of Receipt: 01/02/2023 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, 		6.00	\$_	2,248.93	
SHELBY TWP, MI 48315	MOUNTAIN VIEW, CA 94043					
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- L Description MEETING 5. Date Of Receipt: 02/01/2023 6. Vendor Name & Address: ART & JAKES 		9.00	\$	2,297.93	
SHELBY TWP, MI 48315	44829 MOUND RD, STERLING HEIGHTS, MI 48314					
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide:	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LO Description EMAIL 	\$ <u>6.</u> 0an	00	\$	2,303.93	
Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	5. Date Of Receipt: 02/02/2023 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043					
Fund Raiser Contribution					• • •	
	Page S	Subtotal	61.00		0.00	
	Grand Total of all Schedul (Complete on last page of Sch					
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Page 1 of 9

ITEMIZED IN-KIND CONTE	ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-I							
CANDIDATE COMM	AITTEE 2. Committee Name CITIZENS F	OR	MICHAE	L RADIKE			
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services we purchased		7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)			
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LOA Description MEETING 5. Date Of Receipt: 02/15/2023 6. Vendor Name & Address: CENTURY BANQUET CENTER 33204 MAPLE LN DR, STERLING HEIGHTS, MI 48312 	*	80.00	<u></u> \$2,333.93			
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- LO Description MEETING 5. Date Of Receipt: 02/15/2023 6. Vendor Name & Address: CENTURY BANQUET CENTER 33204 MAPLE LN DR, STERLING HEIGHTS, MI 48312 		3.00	\$ 2,356.93			
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOV Description EMAIL 5. Date Of Receipt: 03/02/2023 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043 	<u>\$</u> 6.(an	00	\$ 2,362.93			
		htat-1		0.00			
	Page Sut Grand Total of all Schedule: (Complete on last page of Sche	es 1-IK	59.00 Enter this tota on line 6 of Su				

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Page 2 of 9

ITEMIZED IN-KIND CONTF	ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-IM							
CANDIDATE COMM	11TTEE 2. Committee Name CITIZENS FOR	{ MICHAE	LRADIKE				
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)				
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	!					
Name & Address: MICHAEL RADTKE JR.	Goods Donated or Loaned Services Donated	5.78	_s 2,368.71				
34205 BARRETT DR	Goods or Services Purchased by Candidate or Others		*				
STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or Others- LOAN						
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT							
Employer Name & Business Address:	5. Date Of Receipt: 03/17/2023						
WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	6. Vendor Name & Address: STARBUCKS						
SHELBY TWP, MI 48315	36350 VAN DYKE AVE,						
Fund Raiser Contribution	STERLING HEIGHTS, MI 48312						
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LOAN Description EMAIL 5. Date Of Receipt: 04/02/2023 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043 	6.00	\$ <u>2,374.71</u>				
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	.00	_{\$} 2,380.71				
MICHAEL RADTKE JR.		.00	\$ <u>,00017 1</u>				
34205 BARRETT DR	Goods or Services Purchased by Candidate or Others						
STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Candidate or Others- LOAN Description EMAIL						
	5. Date Of Receipt: 05/02/2023						
Employer Name & Address:	6. Vendor Name & Address:						
WOLVERINE STRATEGIES	G SUITE						
13515 PARKRIDGE DR, SHELBY TWP, MI 48315	1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043						
Fund Raiser Contribution							
	Page Subtota	17.78	0.00				
	Grand Total of all Schedules 1-I]				
	(Complete on last page of Schedule		_				
		Enter this total					

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ITEMIZED IN-KIND CONTF	120277		
SCHEDULE 1-IM	1. Committee I. D. Number 139377		
CANDIDATE COMM	IITTEE 2. Committee Name CITIZENS FOR	4 MICHAEL	RADIKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan		
Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others \$ ✓ Goods or Services Purchased by Candidate or Others- LOAN Description SUPPLIES 5. Date Of Receipt: 05/20/2023 6. Vendor Name & Address: SHELL STATION	52.99	_{\$} 2,433.70
SHELBY TWP, MI 48315	11541 15 MILE RD, STERLING HEIGHTS, MI 48312		
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN 	16.29 🛛	2,449.99
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	Description MEETING 5. Date Of Receipt: 05/27/2023 6. Vendor Name & Address: SHIFT BAR 117 WILLITS ST, BIRMINGHAM, MI 48009		
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated \$<u>5</u> Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LOAN Description MEETING 5. Date Of Receipt: 05/27/2023 6. Vendor Name & Address: SHIFT BAR 117 WILLITS ST, BIRMINGHAM, MI 48009 	1.86 \$	2,501.85
	Page Subtota	121.14	0.00
	Grand Total of all Schedules 1-I (Complete on last page of Schedule	к	0.00
		Enter this total	l

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ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-I	1. Committee I. D. Number 139377					
CANDIDATE COMM	11TTEE 2. Committee Name CITIZENS F	-0R	MICHAE	LRADIKE		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services w purchased	were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)		
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	·,				
Name & Address: MICHAEL RADTKE JR.	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	\$	07.17	_{\$} 2,609.02		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or Others	λ				
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT						
Employer Name & Business Address: WOLVERINE STRATEGIES	5. Date Of Receipt: 05/27/2023 6. Vendor Name & Address:					
13515 PARKRIDGE DR, SHELBY TWP, MI 48315	SHIFT BAR 117 WILLITS ST,					
Fund Raiser Contribution	BIRMINGHAM, MI 48009			_		
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	\$ 6	.00	\$ 2,615.02		
STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or Others- LC	OAN				
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT	Description EMAIL 5. Date Of Receipt: 06/02/2023					
Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	6. Vendor Name & Address: G SUITE					
SHELBY TWP, MI 48315	1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043					
Fund Raiser Contribution						
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan	_{\$} 7.0	00	_{\$} 2,622.02		
MICHAEL RADTKE JR. 34205 BARRETT DR	Goods or Services Purchased by Candidate or Others					
STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or Others- LO	DAN				
If over \$100.00 cumulative, please provide:	Description MUSIC IN THE PARK					
Occupation: CONSULTANT	5. Date Of Receipt: 06/08/2023					
Employer Name & Address: WOLVERINE STRATEGIES	6. Vendor Name & Address:					
13515 PARKRIDGE DR,	STERLING HEIGHTS CHAMBER OF COMMERCE					
SHELBY TWP, MI 48315	12900 HALL RD,					
Fund Raiser Contribution	STERLING HEIGHTS, MI 48313					
	Page Su	ubtotal	120.17	0.00		
	Grand Total of all Schedule	es 1-IK				
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ITEMIZED IN-KIND CONTF	ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-IK							
CANDIDATE COMM	ITTEE 2. Committee Name CITIZENS FC		L RADTKE				
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services we purchased	7. Amount or Fair Market Value re	8. Cumulative for Election Cycle (Through date in Item 5)				
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOA Description MEETING 5. Date Of Receipt: 06/14/2023 6. Vendor Name & Address: JOHNNY BLACKS PUBLIC HOUSE 35000 MORAVIAN DR, 	<u></u> \$43.10 N	<u></u> \$2,665.12				
Fund Raiser Contribution	STERLING HEIGHTS, MI 48312						
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide:	☐ Goods of Services Functiased by Candidate of Others ☐ Goods or Services Purchased by Candidate or Others- LOA Description MUSIC IN THE PARK	\$ 13.00 an	\$ <u>2,678.12</u>				
Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	5. Date Of Receipt: 06/22/2023 6. Vendor Name & Address: LITTLE LOU'S HOT CHICKEN TRAILER 40620 UTICA RD, STERLING HEIGHTS, MI 48313						
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOA Description MUSIC IN THE PARK 5. Date Of Receipt: 06/23/2023 6. Vendor Name & Address: STERLING HEIGHTS CHAMBER OF COMMERCE 	7.00 N	_{\$} 2,685.12				
SHELBY TWP, MI 48315	12900 HALL RD, STERLING HEIGHTS, MI 48313						
	Page Sub	total 63.10	0.00				
	Grand Total of all Schedules (Complete on last page of Schedules)	1-IK					
		Enter this tot	al				

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ITEMIZED IN-KIND CONTRIBUTIONS					
SCHEDULE 1-I	1. Committee I. D. Number 139377				
CANDIDATE COMM	TTEE 2. Committee Name CITIZENS FOF		RADIKE		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	 Type of In-Kind Contribution (Check applicable box) Date of Receipt Name & Address of Vendor from whom goods or services were burchased 	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)		
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or Others	<u>69.51</u>	_₅ 2,754.63		
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	WEBSITE 5. Date Of Receipt: 06/24/2023 6. Vendor Name & Address: GO DADDY 14455 N HAYDEN RD, SCOTTSDALE, AZ 85260				
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide:	Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description WEBSITE	§3.51 \$	2,818.14		
Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	5. Date Of Receipt: 06/25/2023 6. Vendor Name & Address: GO DADDY 4455 N HAYDEN RD, SCOTTSDALE, AZ 85260				
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	4. I Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$_1 Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description MEETING SUPPLIES Date Of Receipt: 06/26/2023 Vendor Name & Address: GRAPEVINE WINE SHOPPE 3230 15 MILE RD, STERLING HEIGHTS, MI 48312	<u>4.37</u> \$	2,832.51		
	Page Subtotal	147.39	0.00		
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule	<	0.00		

Enter this total on line 6 of Summary Page

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ITEMIZED IN-KIND CONTR	ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-IK	K	1. Committee I. D. N					
CANDIDATE COMM	IITTEE	2. Committee Name	CITIZENS	FOR		L	RADIKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	5. Date of Recei	nd Contribution (Checl pt ress of Vendor from w		s were	7. Amount or Fair Market Value		8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorse	ment or Guarantee of	Bank Loan				
Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR	Goods or Se	ated or Loaned		·	7.42	\$	2,839.93
STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address:	Description M	ervices Purchased by 6	PARK	LOAN			
WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	6. Vendor Nam ARUBA FF 28165 S H	e & Address:					
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	Goods Don Goods or S	ment or Guarantee of lated or Loaned ervices Purchased by ervices Purchased by	Services Donated Candidate or Others		7.00	\$	2,846.93
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	5. Date Of Rec 6. Vendor Nar STERLING H COMMERCE 12900 HALL	HEIGHTS CHAM E RD,	23 BER OF				
Fund Raiser Contribution	STENLING	HEIGHTS, MI 483	515				
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	Goods Dona Goods or Se Coods or Se Description 5. Date Of Rece 6. Vendor Nam G SUITE 1600 AMP	ervices Purchased by ervices Purchased by MAIL eipt: 07/03/202	Services Donated Candidate or Others Candidate or Others- 3 KWY,	\$ <u>6.</u> loan	00	\$	2,852.93
			Page	Subtotal	20.42		0.00
			and Total of all Sched	lules 1-IK	<		0.00
					Enter this total		

Enter this total on line 6 of Summary Page

Page 8 of 9

ITEMIZED IN-KIND CONTF	100077		
SCHEDULE 1-IM	1. Committee I. D. Number 139377		
CANDIDATE COMN	2. Committee Name CITIZENS FOR	1 MICHAEL	RADIKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description MUSIC IN THE PARK Description 07/20/2023 Contender Name & Address: GREAT GREEK MEDITERRANEAN GRILL 12433 23 MILE RD, SHELBY TWP, MI 48315 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others	<u>19.00</u> \$	<u>,</u> 2,871.93
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Cl	ick Here for Memo Ite	emization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description S. Date Of Receipt: G. Vendor Name & Address: C	lick Here for Memo Ite	emization
Fund Raiser Contribution	Page Subtota	19.00	2,871.93
	Grand Total of all Schedules 1-I (Complete on last page of Schedule	^K 629 00	

ITEMIZED EXPENDITURES	139377		
SCREDULE ID			
	ommittee Name CITIZENS FOR N	IICHAEL	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name PRINTMASTERS PRINTING		02/10/2023	\$ <u>420.36</u>
Address 26039 DEQUINDRE RD	Purpose: MAILING AND POSTAGE	Date	
MADISON HEIGHTS, MI 48071			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name DIGITAL COLOR TECHNOLOGIES		02/10/2023	\$ 712.32
Address	Purpose: PRINTING	Date	
PO BOX 930174			
Wixom, MI 48393			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name FRIENDS OF PATRICK GREEN		03/16/2023	100.00
Address	Purpose: FUNDRAISER TICKET	Date	\$ <u>100.00</u>
3929 MARLENE DR	1 uipose		
WARREN, MI 48092	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name MELODY MAGEE FOR CITY COUNCIL		04/21/2023	
Address	Purpose: FUNDRAISER TICKET	Date	\$ <u>50.00</u>
25800 TIMBERLINE DR	Fuipose		
WARREN, MI 48091			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Name WARREN STERLING HEIGHTS PAC		05/07/2023	\$ 100.00
Address 31428 SARATOGA AVE	Purpose: FUNDRAISER TICKET	Date	
WARREN, MI 48093			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	tal this pass	1 000 00
		tal this page	1,382.68
	Grand Total of all (Complete on last page)		

Page 1 of 2

ITEMIZED EXPENDITURES	Committee I. D. Number 139377		
	CITIZENS FOR M	1ICHAEL	RADTKE
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ELKS MACOMB MI NO. 2292 Address	Purpose: ANNUAL DUES 2023	05/12/2023 Date	\$ <u>106.00</u>
25950 SCHOENHERR RD WARREN, MI 48089	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name FRIENDS OF NATE SHANNON		06/08/2023	\$ 100.00
Address 43313 INTERLAKEN DR STERLING HEIGHTS, MI 48313	Purpose: FUNDRAISER TICKET	Date	* <u>100.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name OFFICIAL DEMOCRATIC BLACK CAUCUS OF MACOMB		06/11/2023	\$ 50.00
Address PO BOX 706 WARREN, MI 48090	Purpose: FUNDRAISER TICKET	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Address	Purpose: FESTIVAL BANNER	06/19/2023 Date	\$ <u>100.00</u>
33204 MAPLE LN DR STERLING HEIGHTS, MI 48312			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
Fund Raiser	Click I Check box if this expenditure is payment of debt or obligation reported on previous statement	Here for Memo I	Itemization Type
	Subto	otal this page	356.00
	Grand Total of all (Complete on last page		1,738.68
			Enter this total

Page 2 of 2

on line 8a of Summary Page

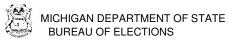


SCHEDULE 1E CANDIDATE COMMITTEE 2. This Schedule itemizes:		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 Type of Obligation (Description) Indicate date debt was incurred Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: LOAN 5. Date Debt Was Incurred: 06/27/2018 6. Original Amount of Debt: \$_700.00 4. Type: IN-KIND 5. Date Debt Was Incurred: 08/24/2018 6. Original Amount of Debt: \$_650.00	\$ \$ \$ \$	\$ <u>656.99</u> bunt Endorsed: \$ <u>0</u> \$ <u>0.00</u>	\$_43.01 FORGIVEN \$_650.00
If bank loan, name of endorser or guarantor:		\$Am	nount Endorsed: \$)
Debt #3 Corp? Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>12/24/2018</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 485.17	11/20/19 _{\$} 334.73 <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> An	\$ <u>334.73</u>	\$ <u>150.44</u>
			(Outstanding debt)	843.45
			ļ	

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

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

Page 1 of 8



SCHEDULE 1E 2 CANDIDATE COMMITTEE 2 This Schedule itemizes: 2 Debts and obligations owed by or forgiven the comparison of the second		IS FOR MICH		
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>01/23/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 497.50	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$_497.50 forgiven
Debt #2 Corp? Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 01/24/2019 6. <u>Original Amount of Debt</u> : § 746.25	\$ \$ \$ \$	\$ 0.00	\$_746.25 FORGIVEN
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 04/03/2019 6. <u>Original Amount of Debt</u> : \$_1,000.00	\$ \$ \$ \$	mount Endorsed: \$ \$0.00 mount Endorsed: \$	\$_1,000.00 FORGIVEN
			(Outstanding debt)	2,243.75

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

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

Page 2 of 8



SCHEDULE 1E CANDIDATE COMMITTEE ^{2.} This Schedule itemizes:		IS FOR MICH		
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	 Type of Obligation (Description) Indicate date debt was incurred 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 09/20/2019 6. <u>Original Amount of Debt</u> : \$386.96	\$\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>386.96</u>
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 10/18/2019 6. <u>Original Amount of Debt</u> : \$_2,500.00	\$ \$ \$ \$	\$ 0.00	\$_2,500.00
If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: <u>IN-KIND</u> 5. <u>Date Debt Was Incurred</u> : <u>10/19/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 3,473.24	\$\$ \$ \$ \$	mount Endorsed: \$ \$0.00 mount Endorsed: \$	3,473.24 FORGIVEN
			l (Outstanding debt)	6,360.20

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

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

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SCHEDULE 1E CANDIDATE COMMITTEE 2. (This Schedule itemizes:		IS FOR MICH		
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	 Type of Obligation (Description) Indicate date debt was incurred Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND 5. <u>Date Debt Was Incurred:</u> <u>11/25/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 2,058.96 4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> :	\$\$ \$ \$ Amc	\$ _0.00	\$2,058.96
34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	07/20/2020 6. <u>Original Amount of Debt</u> : <u>\$ 836.48</u>	\$\$ \$ \$ An	\$ 0.00	\$ <u>836.48</u>
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>10/20/2020</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 322.97	\$\$ \$ \$ \$	\$ 0.00	\$ <u>322.97</u>
			(Outstanding debt)	3,218.41

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.

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

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SCHEDULE 1E CANDIDATE COMMITTEE 2. (This Schedule itemizes: a Debts and obligations owed by or forgiven the cor (Chr		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>12/31/2020</u> 6. <u>Original Amount of Debt</u> : <u>\$618.61</u>	\$ \$ \$ \$ Amc	\$ <u>0.00</u>	\$_618.61 Forgiven
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 07/18/2021 6. <u>Original Amount of Debt</u> : \$_3,625.96	\$ \$ \$ \$ \$	\$ 0.00	\$_3,625.96 Forgiven
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 08/23/2021 6. <u>Original Amount of Debt</u> : § 1,227.48	\$\$ \$ \$ \$	s_0.00	\$_1,227.48 FORGIVEN
			(Outstanding debt)	5,472.05

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

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

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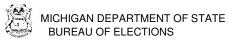
SCHEDULE 1E CANDIDATE COMMITTEE 2. C This Schedule itemizes:		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. Date Debt Was Incurred: 10/17/2021 6. Original Amount of Debt: \$ 4,618.98 4. Type: IN-KIND 5. Date Debt Was Incurred: 11/02/2021 6. Original Amount of Debt: \$ 3,362.54	\$ \$ \$ \$	\$ <u>0.00</u> <u>ount Endorsed:</u> \$ <u>0</u> \$ <u>0.00</u>	\$
If bank loan, name of endorser or guarantor:		\$Am	nount Endorsed: \$)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 07/20/2022 6. <u>Original Amount of Debt</u> : \$ 408.79	\$\$ \$ \$ \$ \$	\$ \$ nount Endorsed: \$	\$_408.79
			(Outstanding debt)	8,390.31

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

Summary Page

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

Page 6 of 8



SCHEDULE 1E CANDIDATE COMMITTEE 2. C This Schedule itemizes:		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. Date Debt Was Incurred: 10/20/2022 6. Original Amount of Debt: \$ 821.54 4. Type: IN-KIND 5. Date Debt Was Incurred: 12/31/2022 6. Original Amount of Debt: \$ 559.16	\$ \$ \$ \$ \$ \$ Amo \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ <u>0.00</u> unt Endorsed: \$ <u>0</u> \$ <u>0.00</u>	\$ <u>821.54</u> Forgiven \$ <u>559.16</u> Forgiven
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #3 Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>12/31/2022</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 105.45	\$ \$ \$ \$ \$	\$_0.00	\$_105.45
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	1 100 15
		Page Subtotal	(Outstanding debt)	1,486.15

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

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

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	committee I.D. Number	377		
SCHEDULE 1E		IS FOR MICH	AFI RAD	TKF
CANDIDATE COMMITTEE	committee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debtack either a or b. Use only for the pu	s and obligations owed <u>to</u> or Irpose checked.)	forgiven <u>by</u> the cor	nmittee.
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: <u>IN-KIND</u> 5. <u>Date Debt Was Incurred</u> : <u>07/20/2023</u> 6. <u>Original Amount of Debt</u> : <u>\$ 629.00</u>	\$ \$ \$ \$	\$ <u>0.00</u>	\$_629.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$ \$	\$	\$ Forgiven
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. Original Amount of Debt:	\$\$ \$	•	\$
If bank loan, name of endorser or guarantor:	\$	\$\$An	• \$ nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	629.00
(C	omplete on last page of Schedule s	Grand Total showing amounts owed by o	of all Schedules 1E r to the committee)	28,643.32

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.

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

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