



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED 2023 OCT 25 AM 7:54
MACOMB COUNTY CLERK

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.

1. Committee I.D. Number 139783		3. This Statement covers From: 08/23/23 to 10/22/23	
2. Committee Name CTE Angela Rogensues		4. Candidate Last Name First Name M.I. Rogensues Angela J 4a. Office Sought Including District # or Community Served (If applicable) Warren - council at large 4b. County of Residence MACOMB	
5. Committee's Mailing Address 13254 Common Warren, MI 48088 Area Code and Phone 7734999935 if the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address Mary K. Birmingham 784 Knollwood Ct. Saline, MI 48176 Area Code & Phone 7343200777	
7. Treasurer's Business Address n/a Area Code and Phone		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) n/a Area Code and Phone	
9. TYPE OF STATEMENT 9a. ☒ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☐ Primary ☒ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus 11/07/23		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement () Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		9e. Dissolution of Candidate Committee ☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper Mary K. Birmingham Type or Print Name		Signature Date 10/24/23	
Candidate Angela Rogensues Type or Print Name		Signature Date 10/24/23	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139783

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Angela Rogensues

RECEIPTS		Column I This Period	Column II Cumulative This election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>41,349.50</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$41,349.50</u>	(18.) \$ <u>\$142,917.50</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>\$10.79</u>	(19.) \$ <u>\$346.58</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$41,360.29</u>	(20.) \$ <u>\$143,264.08</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$0.00</u>	(21.) \$ <u>\$3,221.90</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$36,722.01</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$36,722.01</u>	(23.) \$ <u>\$119,206.45</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$833.81</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$24,292.44</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$18,678.16</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$41,360.29</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$60,038.45</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$36,722.01</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$23,316.44</u>	*



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/30/23</u> Name & Address: <u>Appleton, Betsy</u> <u>4200 Carey Lane</u> <u>Bloomfield Hills, MI 48301</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/31/23</u> Name & Address: <u>Matthews, Matt</u> <u>63829 Indian Trail</u> <u>Ray, MI 48096</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/23</u> Name & Address: <u>Nielson, Jeff</u> <u>7554 Trophy Ct</u> <u>Grass Lake, MI 49240</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/02/23</u> Name & Address: <u>Haddad, Steven</u> <u>1471 W Nine Mile Rd</u> <u>Hazel Park, MI 48030</u>		\$ <u>1452.00</u>	\$ <u>2450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>self employed</u> Employer <u>Capital Sales Company</u> Business Address <u>1471 E Nine Mile Rd, Hazel Park, MI 48030</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 1,677.00

Grand Total of All Schedules 1A
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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 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/23</u> Name & Address: Keffer, Sue 32757 McConnell Court Warren, MI 48092		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/23</u> Name & Address: Stephanie Chang for Senate PO Box 32317 Detroit, MI 48232		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/23</u> Name & Address: Mancini, Charles 28225 Mound Rd Warren, MI 48092		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>Mancini Schreuder Kline PC</u> Business Address <u>28225 Mound Rd, Warren, MI 48092</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/01/23</u> Name & Address: IUPAT Political Action Together Political Committee 7234 Parkway Dr Hanover, MD 21076		\$ <u>1000.00</u>	\$ <u>1500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,625.00

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

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/03/23</u> Name & Address: Toth, George 2427 Cromie Dr. Warren, MI 48092		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/05/23</u> Name & Address: DeWald, Trish 701 Orchard View Drive Royal Oak, MI 48973		\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Advisor</u> Employer <u>Mondo</u> Business Address <u>701 Orchard View Drive, Royal Oak, MI 48973</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/07/23</u> Name & Address: Grier, Brandon 17196 Fairway Detroit, MI 48221		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Athlete Management Group</u> Business Address <u>17196 Fairway, Detroit, MI 48221</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/23</u> Name & Address: Burns, Elizabeth 7879 Shepherds Glen Rd Kalamazoo, MI 49009		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$785.00**

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/23</u>		
Name & Address: Marlinga, Carl 5228 Caraway Sterling Heights, MI 48314			\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Judge</u> Employer <u>Macomb County</u> Business Address <u>10 North Main, Mt. Clemens, MI 48314</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/23</u>		
Name & Address: Guzman, Evangelina 27027 Broadmoor Dr. Warren, MI 48088			\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/23</u>		
Name & Address: Eubanks, Conor 327 N White Dr. Lawrence , KS 66049			\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/23</u>		
Name & Address: McBroom, Diana 2806 Cambridge Ave Detroit, MI 48221			\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>self</u> Business Address <u>155 W. Congress, Suite 600, Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	

Page Subtotal \$725.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Pollack, William 2117 Chicago Road Warren, MI 48092 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>not employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>300.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/11/23</u> Name & Address: Artz, Laura 3069 Tuxedo Dr Warren, MI 48092 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>50.00</u>	\$ <u>100.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/11/23</u> Name & Address: Young, Diane 13250 Irvington Drive Warren, MI 48093 5. If over \$100.00 cumulative, please provide: Occupation <u>financial planner</u> Employer <u>Arrowroot Family</u> Business Address <u>705 Barclay Circle, Suite 125. Rochester Hills, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>40.00</u>	\$ <u>140.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/11/23</u> Name & Address: Birmingham, Mary 784 Knollwood Ct Saline, MI 48176 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>not employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>

Page Subtotal \$1,190.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/12/23</u> Name & Address: Koch, Linda 30563 Ridgfield Ave Warren, MI 48088		\$ <u>50.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>not employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/12/23</u> Name & Address: Blumenfield, Bob 5914 Nita Ave Woodland Hills, CA 91367		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>City Councilmember</u> Employer <u>City of Los Angeles</u> Business Address <u>200 N. Spring Street. Los Angeles, CA 90012</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/12/23</u> Name & Address: Kelley, Rochelle 5685 Arden Ave Warren, MI 48092		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Rochelle J. Kelley CPA PC</u> Business Address <u>5685 Arden Ave, Warren, MI 48092</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/13/23</u> Name & Address: Kronner, Kenneth 30343 Merrick Warren, MI 48092		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$425.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/13/23</u> Name & Address: Chapp, George 4753 Stilwell Drive Warren, MI 48092 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>50.00</u>	\$ <u>80.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/13/23</u> Name & Address: Stroh, John 118 Cloverly Road Grosse Pointe Farms, MI 48236 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>The Stroh Companies Inc.</u> Business Address <u>118 Cloverly Road, Grosse Pointe Farms, MI 48236</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/13/23</u> Name & Address: Magee, Melody 25800 Timberline Dr Warren, MI 48091 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/13/23</u> Name & Address: McClain, David 31650 Bretz Drive Warren, MI 48093 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	

Page Subtotal \$700.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/15/23</u> Name & Address: <u>MacDonald, Mike</u> <u>18890 San Quentin Drive</u> <u>Lathrup Village, MI 48076</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>consulting engineer</u> Employer <u>Hubbell Roth & Clark</u> <u>555 Hulet Drive, Bloomfield Hills, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>850.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/23</u> Name & Address: <u>Banick, Luke</u> <u>4897 Chicago Road</u> <u>Warren, MI 48092</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/17/23</u> Name & Address: <u>Lodovisi, Susan</u> <u>8209 Hettenberger</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/17/23</u> Name & Address: <u>Burden, Jerry</u> <u>3510 Bernice Avenue</u> <u>Warren, MI 48091</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal \$300.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☒ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Bricklayers Local No 1 Michigan PAC 21031 Ryan Rd Warren, MI 48091			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☒ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Bricklayers Local No. 1 Michigan PAC 21031 Ryan Rd Warren, MI 48091			\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Camden, Andrew 552 Rivard Boulevard Grosse Pointe, MI 48230			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>managing director - Investments</u> Employer <u>Wells Fargo Advisors</u> Business Address <u>77 Kercheval Avenue, Grosse Pointe Farms, MI 48236</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Charara, Hassen 25135 Newton St. Dearborn, MI 48124			\$ <u>250.00</u>	\$ <u>525.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Warren Quick Lube</u> Business Address <u>20835 Van Dyke Ave, Warren, MI 48089</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	

Page Subtotal \$1,000.00

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: DeRush, Sherry 46670 Fairchild Road Macomb, MI 48042			\$ <u>100.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>retired</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Nash, Birdie P.O. Box 46541 Mt. Clemens, MI 48046			\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Schroder, Jeffrey 1592 E Lincoln St Birmingham, MI 48009			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>partner/attorney</u> Employer <u>Plunkett Cooney</u> Business Address <u>38505 Woodward Ave, Suite 100, Bloomfield Hills, MI 48304</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/17/23</u>		
Name & Address: Vogt, Kathy 11214 Chicago Rd. Warren, MI 48093			\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>Garton & Vogt</u> Business Address <u>38550 Garfield Road, Suite A, Clinton Township, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	

Page Subtotal \$900.00

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 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/17/23</u> Name & Address: Warren Firefighters Segregated Fund 3272 E 12 Mile Road, Suite 107 Warren, MI 48092		\$ <u>250.00</u>	\$ <u>950.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/19/23</u> Name & Address: Cleaver, Kelly 2520 Avon Ave SW Wyoming, MI 49519		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/20/23</u> Name & Address: Diebolt, Alysia 23225 Oakwood Eastpointe, MI 48021		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/21/23</u> Name & Address: Ciecko, Celia 8475 Baird Avenue Warren, MI 48093		\$ <u>12.50</u>	\$ <u>12.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$337.50

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

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/21/23</u> Name & Address: Higgins, Kevin 28045 Mavis Warren, MI 48088		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Mr Wonderful Realty</u> Business Address <u>28045 Mavis, Warren, MI 48088</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/22/23</u> Name & Address: Higgins, George 18331 Breezeway Fraser, MI 48026		\$ <u>112.50</u>	\$ <u>112.50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>senior organizer</u> Employer <u>For Our Future Michigan</u> Business Address <u>18331 Breezeway, Fraser, MI 48026</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/22/23</u> Name & Address: Huntone, Margaret 8479 Towne Center Circle North Warren, MI 48093		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/22/23</u> Name & Address: Rutherford, Joel 5683 Storrow Court Warren, MI 48092		\$ <u>12.50</u>	\$ <u>62.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$475.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/22/23</u> Name & Address: Hill, Anne 24385 Kings Pointe Novi, MI 48375		\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/22/23</u> Name & Address: Kobir, Sumon 4036 Garbor Dr. Warren, MI 48092		\$ 25.00	\$ 25.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/23/23</u> Name & Address: Barrow, Sorana 14015 Knollwood Drive Sterling Heights, MI 48312		\$ 12.50	\$ 12.50
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/24/23</u> Name & Address: Newman, Henry 27156 Gail Dr. Warren, MI 48093		\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$137.50

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/25/23</u>		
Name & Address: Hansen, Gary 4663 Wildwood Street Eagan, MN 55122			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>not employed</u>			Click Here for Memo Itemization	
Business Address _____				
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/25/23</u>		
Name & Address: Badalameti, Raechel M 19500 Hall Rd #100 Clinton Township, MI 48038			\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>partner</u> Employer <u>Centre Court Properties</u>			Click Here for Memo Itemization	
Business Address <u>19500 Hall Rd #100, Clinton Township, MI 48038</u>				
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/25/23</u>		
Name & Address: Huth, Robert S Jr 19500 Hall Rd #100, Clinton Township, MI 48038			\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>partner</u> Employer <u>Centre Court Properties</u>			Click Here for Memo Itemization	
Business Address <u>19500 Hall Rd #100, Clinton Township, MI 48038</u>				
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/25/23</u>		
Name & Address: Kirk, Robert W 19500 Hall Rd #100 Clinton Township, MI 48038			\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>partner</u> Employer <u>Centre Court Properties</u>			Click Here for Memo Itemization	
Business Address <u>19500 Hall Rd #100, Clinton Township, MI 48038</u>				
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				

Page Subtotal \$850.00

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/23</u> Name & Address: CTE Paul Wojno for State Senate 32025 Margaret Ct Warren, MI 48093		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/25/23</u> Name & Address: Michigan Regional Council of Carpenters PAC 11687 American Avenue, Suite 200 Detroit, MI 48204		\$ <u>5000.00</u>	\$ <u>5000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/27/23</u> Name & Address: McMillan, Ann 30073 Lorraine Ave Warren, MI 48093		\$ <u>12.50</u>	\$ <u>12.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/27/23</u> Name & Address: Berdy, Leah 32252 Hawthorne Dr. Warren, MI 48092		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$5,162.50

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogesues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/29/23</u>		
Name & Address: Bertrand, Christina 4817 La Chene Dr Warren, MI 48092			\$ <u>100.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>Washtenaw County Prosecutors Office</u> Business Address <u>200 N Main St, Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/23</u>		
Name & Address: Lung, Peggy 30958 Moulin Warren, MI 48088			\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/23</u>		
Name & Address: Fisher, Jeremy 31428 Saratoga Warren, MI 48093			\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/02/23</u>		
Name & Address: 314 Action Victory Fund PO Box 14560 Washington, DC 20044			\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	

Page Subtotal \$1,160.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/02/23</u>	
Name & Address: Koerber, Arlynda 28660 Armanda Dr Warren, MI 48088		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/02/23</u>	
Name & Address: Burdi, Louis 4801 N Grand Oaks Dr Warren, MI 48092		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/02/23</u>	
Name & Address: Plumbers Local 98 700 Tower Dr, Suite 300 Troy, MI 48098		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/02/23</u>	
Name & Address: Blazevski, Zvonko 31253 Gay Street Roseville, MI 48066		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$340.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/05/23</u> Name & Address: <u>Northrup, Mike</u> <u>31457 Marilyn</u> <u>Warren, MI 48093</u>		\$ <u>15.00</u>	\$ <u>15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/14/23</u> Name & Address: <u>Neuner, Glenn</u> <u>47930 Harbor Dr</u> <u>New Baltimore, MI 48047</u>		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Neuner,'s Towing</u> Business Address <u>27365 Mound Rd, Warren, MI 48092</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/14/23</u> Name & Address: <u>Sheet Metal Workers Local 80</u> <u>17100 W Twelve Mile Road, 2nd Floor</u> <u>Southfield, MI 48076</u>		\$ <u>380.00</u>	\$ <u>880.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/14/23</u> Name & Address: <u>MI LIST</u> <u>17750 Sharon Valley Road</u> <u>Manchester, MI 48058</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$895.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/16/23</u> Name & Address: <u>Barclay, Geraldine</u> <u>32241 Southfield Rd</u> <u>Beverly Hills, MI 48025</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/14/23</u> Name & Address: <u>Wild, William</u> <u>8203 Creekside Dr</u> <u>Westland, MI 48185</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President & CEO</u> Employer <u>Midwest Independent Retailers Assoc</u> Business Address <u>5779 W Maple Rd, West Bloomfield, MI 48322</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/13/23</u> Name & Address: <u>Zobel, Anne</u> <u>35 McLean</u> <u>Highland Park, MI 48203</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/16/23</u> Name & Address: <u>Garavaglia, Michael</u> <u>18958 Aspen Dr</u> <u>Livonia, MI 48152</u>		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>consultant</u> Employer <u>Capital Relations LLC</u> Business Address <u>28470 13 Mile Rd, Suite 220, Farmington, MI 48334</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$850.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/17/23</u> Name & Address: Ferguson, Denise 1832 S Fairfield Ave Chicago, IL 60608		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/18/23</u> Name & Address: Dennings, Teri PO Box 46528 Mt. Clemens, MI 48046		\$ <u>50.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Judge</u> Employer <u>Macomb County</u> Business Address <u>40 N. Main, Mt. Clemens, MI 48046</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/23</u> Name & Address: Basmajian, Roger 280 West Drayton Ferndale, MI 48220		\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>real estate developer</u> Employer <u>Basco</u> Business Address <u>607 Shelby, Suite 350, Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/23</u> Name & Address: Bowes, Thomas 27181 James St. Warren, MI 48092		\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$375.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/22</u> Name & Address: <u>Sayes, Audrey</u> <u>28740 Milton Avenue</u> <u>Warren, MI 48092</u> 6. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/23</u> Name & Address: <u>Thomas, Buzz</u> <u>18051 Hamilton Rd</u> <u>Detroit, MI 48203</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>consultant</u> Employer <u>Thomas Group Consulting</u> Business Address <u>28 W. Adams, Suite 1300, Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/23</u> Name & Address: <u>Briody, Elizabeth</u> <u>3587 Salem Rd.</u> <u>Troy, MI 48084</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>anthropologist</u> Employer <u>Cultural Keys LLC</u> Business Address <u>3587 Salem Rd., Troy, MI 48084</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>150.00</u>	\$ <u>150.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/23</u> Name & Address: <u>Canestrelli, Roxanne</u> <u>54642 Shelby Road</u> <u>Shelby Township, MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>15.00</u>	\$ <u>15.00</u>
		Click Here for Memo Itemization	

Page Subtotal \$690.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/22/23</u> Name & Address: <u>Pursuit of Justice PAC</u> <u>2075 W Stadium Blvd #200</u> <u>Ann Arbor, MI 48105</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/22/23</u> Name & Address: <u>Realtors PAC of Michigan I</u> <u>720 N Washington Ave</u> <u>Lansing, MI 48906</u>		\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/21/23</u> Name & Address: <u>Rogensues, Angela</u> <u>13254 Common</u> <u>Warren, MI 48088</u>		\$ <u>20000.00</u>	\$ <u>20000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>self</u> Business Address <u>13254 Common, Warren, MI 48088</u> Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$20,750.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$41,349.50

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: Michigan Schools & Government Credit Union	Date of Receipt <u>09/30/23</u>	☐ Loan from a Lending Institution ☒ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ <u>10.79</u>
Receipt #2 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____

Page Subtotal \$10.79

Grand Total of All Schedules 1A-1
(Complete on last page of Schedule) \$10.79

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Allied</u> Address <u>240 N. Fenway Drive</u> <u>Fenton, MI 48430</u> ☐ Fund Raiser	Purpose: <u>walking literature</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/23</u> Date	\$ <u>1714.99</u>
Expenditure #2 Name <u>Allied</u> Address <u>240 N. Fenway Drive</u> <u>Fenton, MI 48430</u> ☐ Fund Raiser	Purpose: <u>mailers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/23</u> Date	\$ <u>14521.58</u>
Expenditure #3 Name <u>Allied</u> Address <u>240 N. Fenton Drive</u> <u>Fenton, MI 48430</u> ☐ Fund Raiser	Purpose: <u>mailers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/23</u> Date	\$ <u>2616.80</u>
Expenditure #4 Name <u>Allied</u> Address <u>240 N. Fenway Drive</u> <u>Fenton, MI 48430</u> ☐ Fund Raiser	Purpose: <u>mailers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/04/23</u> Date	\$ <u>2793.90</u>
Expenditure #5 Name <u>Allied</u> Address <u>240 N. Fenway Drive</u> <u>Fenton, MI 48430</u> ☐ Fund Raiser	Purpose: <u>postcards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/23</u> Date	\$ <u>2132.05</u>

Subtotal this page \$23,779.32

Grand Total of all Schedules 1B
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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>American Graphics Printing Co.</u> Address <u>34895 Groesbeck</u> <u>Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose: <u>flyers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/23</u> Date	\$ <u>392.00</u>
Expenditure #2 Name <u>Blue Bath Solutions LLC</u> Address <u>439 3rd St, Apt 10</u> <u>Ann Arbor, MI 48104</u> ☐ Fund Raiser	Purpose: <u>consulting</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/01/23</u> Date	\$ <u>2687.72</u>
Expenditure #3 Name <u>C & G Newspapers</u> Address <u>13650 E Eleven Mile Rd</u> <u>Warren, MI 48089</u> ☐ Fund Raiser	Purpose: <u>advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/04/23</u> Date	\$ <u>792.33</u>
Expenditure #4 Name <u>Caleb Rose</u> Address <u>19 Moross St</u> <u>Mount Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>campaign field director</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/23</u> Date	\$ <u>1000.00</u>
Expenditure #5 Name <u>Danielle Ferguson</u> Address <u>236 S Latitude Circle</u> <u>Delray Beach, FL 33483</u> ☐ Fund Raiser	Purpose: <u>assistant</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/23</u> Date	\$ <u>1000.00</u>

Subtotal this page **\$5,872.05**

Grand Total of all Schedules 1B
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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name Danielle Ferguson Address 236 S Latitude Circle Delray Beach, FL 33483 ☐ Fund Raiser	Purpose: <u>assistant</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/23</u> Date	\$ <u>1000.00</u>
Expenditure #2 Name Meta/Facebook Address online ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/18/23</u> Date	\$ <u>150.00</u>
Expenditure #3 Name Meta/Facebook Address online ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/23</u> Date	\$ <u>150.00</u>
Expenditure #4 Name Meta/Facebook Address online ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/23</u> Date	\$ <u>150.00</u>
Expenditure #5 Name Meta/Facebook Address online ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/23</u> Date	\$ <u>34.27</u>
Subtotal this page			\$1,484.27
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/23</u> Date	<u>\$ 150.00</u>
Expenditure #2 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/04/23</u> Date	<u>\$ 150.00</u>
Expenditure #3 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/08/23</u> Date	<u>\$ 150.00</u>
Expenditure #4 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/23</u> Date	<u>\$ 150.00</u>
Expenditure #5 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/23</u> Date	<u>\$ 150.00</u>

Subtotal this page **\$750.00**

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

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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Meta/Facebook</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>digital advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/23</u> Date	\$ <u>150.00</u>
Expenditure #2 Name <u>Michael Howard</u> Address <u>23725 Beierman Ave</u> <u>Warren, MI 48091</u> ☐ Fund Raiser	Purpose: <u>assistant</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/01/23</u> Date	\$ <u>1000.00</u>
Expenditure #3 Name <u>Michael Howard</u> Address <u>23725 Beierman Ave</u> <u>Warren, MI 48091</u> ☐ Fund Raiser	Purpose: <u>assistant</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/23</u> Date	\$ <u>1000.00</u>
Expenditure #4 Name <u>NGP Van, Inc.</u> Address <u>655 15th St NW, Suite 650</u> <u>Washington, DC 2005</u> ☐ Fund Raiser	Purpose: <u>donor database fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/01/23</u> Date	\$ <u>320.00</u>
Expenditure #5 Name <u>NGP Van, Inc</u> Address <u>655 15th St NW, Suite 650</u> <u>Washington, DC 2005</u> ☐ Fund Raiser	Purpose: <u>donor database fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/23</u> Date	\$ <u>320.00</u>
Subtotal this page			\$ <u>2,790.00</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Scale to Win</u> Address <u>13742 Harper St</u> <u>Santa Anna, CA 92703</u> ☐ Fund Raiser	Purpose: <u>text message service</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/23</u> Date	<u>\$ 31.16</u>
Expenditure #2 Name <u>Scale to Win</u> Address <u>13742 Harper St</u> <u>Santa Anna, CA 92703</u> ☐ Fund Raiser	Purpose: <u>text message service</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/23</u> Date	<u>\$ 766.84</u>
Expenditure #3 Name <u>Simple Palate</u> Address <u>27380 Van Dyke Ave</u> <u>Warren, MI 48093</u> ☒ Fund Raiser	Purpose: <u>food & beverage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/23</u> Date	<u>\$ 350.00</u>
Expenditure #4 Name <u>Simple Palate</u> Address <u>27380 Van Dyke Ave</u> <u>Warren, MI 48093</u> ☐ Fund Raiser	Purpose: <u>future meet & greet</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/23</u> Date	<u>\$ 21.00</u>
Expenditure #5 Name <u>The Original Print Shoppe</u> Address <u>270 S Telegraph Rd</u> <u>Pontiac, MI 48341</u> ☐ Fund Raiser	Purpose: <u>postcards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/05/23</u> Date	<u>\$ 318.00</u>
Subtotal this page			\$1,487.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>The Original Print Shoppe</u> Address <u>270 S Telegraph Rd</u> <u>Pontiac, MI 48341</u> ☐ Fund Raiser	Purpose: <u>meet & greet printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/23</u> Date	<u>\$ 71.02</u>
Expenditure #2 Name <u>The Original Print Shoppe</u> Address <u>270 S Telegraph Rd</u> <u>Pontiac, MI 48341</u> ☐ Fund Raiser	Purpose: <u>postcards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/23</u> Date	<u>\$ 63.60</u>
Expenditure #3 Name <u>Walmart</u> Address <u>29176 Van Dyke Ave</u> <u>Warren, MI 48093</u> ☐ Fund Raiser	Purpose: <u>supplies for meet & greet</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/23</u> Date	<u>\$ 37.80</u>
Expenditure #4 Name <u>Walmart</u> Address <u>29176 Van Dyke Ave</u> <u>Warren, MI 48093</u> ☐ Fund Raiser	Purpose: <u>candy for trunk or treat</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/23</u> Date	<u>\$ 89.94</u>
Expenditure #5 Name <u>Act Blue</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/23</u> Date	<u>\$ 1.88</u>
Subtotal this page			<u>\$264.24</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139783
2. Committee Name CTE Angela Rogensues

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Act Blue</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/23</u> Date	<u>\$ 87.03</u>
Expenditure #2 Name <u>Act Blue</u> Address <u>on line</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/32</u> Date	<u>\$ 26.49</u>
Expenditure #3 Name <u>Stripe</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/23</u> Date	<u>\$ 3.21</u>
Expenditure #4 Name <u>Stripe</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/23</u> Date	<u>\$ 137.04</u>
Expenditure #5 Name <u>Stripe</u> Address <u>online</u> ☐ Fund Raiser	Purpose: <u>service fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/23</u> Date	<u>\$ 41.36</u>
Subtotal this page			<u>\$295.13</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>\$36,722.01</u>

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139783

2. Committee Name CTE Angela Rogensues

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. 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) 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: Angela Rogensues 13254 Common Warren, MI 48088	4. Type: <u>loan for fundraiser</u> 5. <u>Date Debt Was Incurred:</u> <u>06/16/23</u> 6. <u>Original Amount of Debt:</u> \$ <u>754.74</u>	\$ \$ \$ \$ \$	\$	\$ <u>754.74</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: Allied 240 N Fenway Fenton, MI 48430	4. Type: <u>printing/mailling</u> 5. <u>Date Debt Was Incurred:</u> <u>06/23/23</u> 6. <u>Original Amount of Debt:</u> \$ <u>3,537.70</u>	\$ \$ \$ \$ \$	\$	\$ <u>3,537.70</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: Angela Rogensues 13254 Common Warren, MI 48088	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>09/21/23</u> 6. <u>Original Amount of Debt:</u> \$ <u>20,000.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>20,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$24,292.44**

Grand Total of all Schedules 1E **\$24,292.44**
(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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139783
2. Committee Name CTE Angela Rogensues

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/12/23</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>54</u>	5. Type of Fund Raising Activity <u>food & beverage</u>	6. Address and Name (If any) of the place where the activity was held. <u>Simple Palate</u> <u>27380 Van Dyke Ave</u> <u>Warren, MI 48093</u> ☐ Private Residence
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7. Total Contributions \$18,884.50
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$18,884.50
10. Total Cost of Event \$450.00
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.