

### CANDIDATE COMMITTEE COVER PAGE

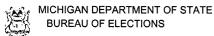
#### FOR OFFICIAL USE ONLY

| Report must be legible, typed or printed in ink and signe<br>the treasurer (or designated record keeper) and candida     | d by 3. This Statement covers From ite.                            | <sup>n:</sup> <u>07/21/2023</u> to <u>10/20/2023</u>   |
|--|--|--|
| 1. Committee I.D. Number   | 4. Candidate Last Name   | First Name M.I.  |
| 139348   | Sierawski  | Elisabeth M  |
| 2. Committee Name  |  | strict # or Community Served (If applicable)  Council  |
|  | Sterling Heights City  | Council  |
| CTE Liz Sierawski  | 4b. County of Residence MA   | COMB _   |
| 5. Committee's Mailing Address   | 6. Treasurer's Name & Reside                                       |  |
| 40426 William Dr.<br>Sterling Heights, MI 48313  | Elisabeth M. Sieraw<br>40426 William Dr.                           | SKI  |
| Sterling Fleights, Wil 400 10  | Sterling Heights, MI   | 48313  |
|  | Ctoming rengine, in  |  |
| Area Code and Phone (586) 977-0143   |  |  |
| If the address in this box is different from the committee mailing address on the Statement of Organization, mail m      | Hav (FOC) (  | 77.0440  |
| be sent to this address by the filing official.  | Area Code & Phone (500)  |  |
| 7. Treasurer's Business Address 40426 William Dr.  | 8. Designated Record Keepe Designated Record Keeper)               | r's Name and Address (If the committee has a   |
| Sterling Heights, MI 48313   |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Area Code and Phone (586) 977-0143   | Area Code and Phone  |  |
| 9. TYPE OF STATEMENT   |  | 9e. Dissolution of Candidate Committee   |
|  | quired ONLY if candidate not on the ballot for the                 | By checking this item I/We certify any outstanding debt  |
| Pre-Election or Post-Election Statement relates to:  | rent year:   | by the committee to the candidate or his or her spouse is here<br>by discharged and forgiven, and no longer collectible from |
|  | luly Quarterly   | the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.                        |
| Primary  | October Quarterly  |  |
| General  | Soloson Quartony   | Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.                   |
| Convention   |  |  |
| Special 9c.  | Annual Statement ()  | Effective date of dissolution  |
| School   | Coverage Year  |  |
| Caucus 9d. L   | Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to | Note: The disposition of residual funds must be reported on  |
|  | indicate which Statement is being amended.)                        | Schedule 1B and the Summary Page.  |
| Date of Election, Convention or Caucus   |  |  |
| Bute of Election, Convention of Causas   |  |  |
|  |  |  |
|  |  |  |
| 10. Verification: I\We certify that all reasonable diligence my\our knowledge and belief the contents are true, accurate | was used in the preparation of this staten ate and complete.       | nent and attached schedules (if any) and to the best of  |
| Current Treasurer or Elisabeth M. Sierav   | wski Ale   | 10/23/2023   |
| Designated Record keeper Type or Print Name  | VSKI / Signature   | Date   |
|  |  | 40/00/0000   |
| Candidate Elisabeth M. Sierawski   | 1 / Julewsh  | Date 10/23/2023  |
| Type or Print Name   | <b>β</b> ignature  |  |

1. Committee I.D. Number 139348

### **SUMMARY PAGE** CANDIDATE COMMITTEE

| CANDIDATE COMMITTEE  |                            |  |
|--|----------------------------|--|
| RECEIPTS   | Column I<br>This Period    | Column II Cumulative this election cycle |
| 3. Contributions   |                            | Outhalaste this election cycle           |
| a. Itemized (Schedule 1A - Column 6)   | (3a.) \$ 29,150.00         |  |
| b. Unitemized (less than \$20.01 each - no Schedule)   | (3b.) \$ NOT APPLICABLE    |  |
| c. Subtotal of "Contributions"   | (3c.) \$ \$29,150.00       | (18.) \$ \$29,150.00                     |
| 4. Other Receipts (Schedule 1A -1, Column 6)   | (4.) \$ _\$0.00            | (19.) \$ \$0.00                          |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)                             | (5.) \$ \$29,150.00        | (20.) \$ \$29,150.00                     |
| IN-KIND CONTRIBUTIONS & EXPENDITURES   |                            |  |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7)   | (6.) \$ \$0.00             | (21.) \$ \$0.00                          |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6)   | (7.) \$ \$0.00             | (22.) \$ \$0.00                          |
| EXPENDITURES   |                            |  |
| 8. Expenditures  |                            |  |
| a. Itemized (Schedule 1B, Column 6)  | (8a.) \$ <u>\$4,874.49</u> |  |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G)   | (8b.) \$ \$0.00            |  |
| 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.) \$ \$4,874.49         | (23.) \$ \$7,824.48                      |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)  |                            |  |
| 10. Disbursements a. Itemized (Schedule 1C, Column 6)  | (10a.) \$ \$0.00           |  |
| b. Unitemized (less than \$50.01 each - no Schedule)   | (10b.)\$ \$0.00            |  |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)                         | (11.) \$ \$0.00            | (24.) \$ \$0.00                          |
| DEBTS AND OBLIGATIONS 12. Debts and Obligations  |                            |  |
| a. Owed <b>by</b> the Committee (Schedule 1E)  | (12a.) \$ _\$0.00          |  |
| b. Owed to the Committee (Schedule 1E)   | (12b.) \$ _\$0.00          |  |
|  | BALANCE STATEMENT          |  |
| Ending Balance of last report filed     (Enter zero if no previous reports have been filed.) | (13.) \$ \$9,657.43        | _  |
| 14. Amount received during reporting period  | (14.) + \$ \$29,150.00     | _  |
| (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14              | (15.) = \$_\$38,807.43     | _  |
| 16. Amount expended during reporting period (Add lines 9 and 11)                             | (16.) - \$ \$4,874.49      |  |
| 17. ÈNDING BALANCÉ   | (17.) \$ \$33,932.94       | <b>-</b><br>*                            |
| (Subtract line 16 from line 15)  | (11.)                      | _  |



### **CANDIDATE COMMITTEE**

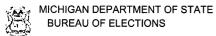
1. Committee I.D. Number \_\_\_\_\_

2. Committee Name CTE Liz Sierawski

| 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<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|--------------------|--|
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/18/2023   |                    |  |
| Name & Address:   |                    |  |
| 7626 Acorn Hill Court   |                    |  |
| West Bloomfield, MI 48323   | <sub>s</sub> 300   | <sub>\$</sub> 300  |
| 5. If over \$100.00 cumulative, please provide:   |                    |  |
| Occupation Attorney Employer Self-employed  | Click Here fo      | or Memo Itemization  |
| Business Address 7626 Acorn Hill, West Bloomfield, MI 48323   |                    |  |
| Type of Contribution: Direct Loan from a person   |                    |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                    |  |
| Michael Schodowski  |                    |  |
| 29275 Stephenson Hwy  | <sub>\$</sub> 200  | ° 200  |
| Madison Hgts, MI 48071  | <b>D</b>           | \$   |
| 5. If over \$100.00 cumulative, please provide:   | Click Here fo      | r Memo Itemization   |
| Occupation Owner of Shelving Company Employer Self-employed   |                    |  |
| Business Address 29275 Stephenson Hwy, Madison Hghts, MI 48071  |                    |  |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                    |  |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:   |                    |  |
| Wesam Younis  | 4050               |  |
| 4913 Maceri Ct  | <sub>\$</sub> 1250 | ຸ 1250   |
| Sterling Hgts, MI 48314   |                    | Ψ  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for     | Memo Itemization   |
| Occupation Appraiser Employer Self-employed   |                    |  |
| Business Address 4913 Maceri CT, Sterling Hgts, MI 48314  |                    |  |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                    |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt   | 1                  |  |
| Lourd Younis  |                    |  |
| 4913 Maceri Ct  | <sub>s</sub> 1250  | <u>,</u> 1250  |
| Sterling Hgts, MI 48314   | \$ 1200            | \$_1250  |
| 5. If over \$100.00 cumulative, please provide:   | Oliale I I ama fam | . N. A   |
| Occupation Housewife Employer   | Click Here for     | Memo Itemization   |
| Business Address 4913 Maceri Ct, Sterling Hgts, MI 48314  |                    |  |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                    |  |
| Page Subtotal   | \$3,000.00         |  |
|   |                    | 1  |

Grand Total of All Schedules 1A (Complete on last page of Schedule) \$29,150.00

Enter this total on line 3a of Summary Page.



1. Committee I.D. Number \_\_\_\_\_139348

**CANDIDATE COMMITTEE** 

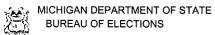
2. Committee Name CTE Liz Sierawski

| 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 all contributions regardless of amount. | 6. Amount         | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|-------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address: Robert Moffa 37728 Lois Dr. Sterling Hgts, MI 48310  | <sub>\$</sub> 100 | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Horo fo     | r Mama Itamization   |
| Occupation Employer  | Click Here to     | r Memo Itemization ▼   |
| Business Address   |                   |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                   |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                   |  |
| CTE Derek Miller<br>PO Box 143<br>Warren, MI 48090   | <u>\$</u> 100     | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for    | Memo Itemization   |
| Occupation Employer  |                   |  |
| Business Address   |                   |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                   |  |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:  |                   |  |
| Jean Cloud<br>53219 Kentland St.<br>Macomb, MI 48042   | § 300             | \$300  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for    | Memo Itemization ▼   |
| Occupation Clerk Employer Macomb County  |                   |  |
| Business Address 40 N. Main St, MT Clemens, MI 48083   |                   |  |
| Type of Contribution:  |                   |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                   |  |
| Korrin Krieg<br>309 Parkdale<br>Rochester, MI 48307  | <sub>\$</sub> 150 | <sub>\$</sub> 150  |
| 5. If over \$100.00 cumulative, please provide:  |                   |  |
| Occupation Owner of Counseling Center Employer Self-employed   | Click Here for    | Memo Itemization ▼   |
| Business Address 34224 Van Dyke, Sterling Hgts, MI 48312   |                   |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                   |  |
| Page Subtotal  | \$650.00          |  |
| Grand Total of All Schedules 1A (Complete on last page of Schedule)  | \$29,150.00       |  |
| (Complete on last page of Schedule)  |                   | •  |

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Enter this total on

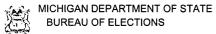
line 3a of Summary Page.



1. Committee I.D. Number \_\_\_\_\_

**CANDIDATE COMMITTEE** 

| 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 10/18/2023  Name & Address: Stanley Grot 11927 Hiawatha Dr. Shelby Twp, MI 48315  | <sub>\$</sub> 75            | <sub>\$</sub> 75  |
| 5. If over \$100.00 cumulative, please provide:   | Clink Hara fo               | or Memo Itemization ▼   |
| Occupation Employer   | Click Here it               | or Werno Remization   |
| Business Address  |                             |   |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                             |   |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                             |   |
| Sylwia Grot<br>11927 Hiawatha Dr.<br>Shelby Twp, MI 48315   | <sub>\$</sub> 75            | <sub>\$</sub> 75  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here fo               | r Memo Itemization ▼  |
| Occupation Employer   |                             |   |
| Business Address  |                             |   |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                             |   |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023 Name & Address:  | -                           |   |
| Robert Rotondo<br>4149 Berkshire Dr<br>Sterling heights, MI 48314   | <u>\$ 100</u>               | <sub>\$</sub> _100  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for              | Memo Itemization ▼  |
| Occupation Employer   |                             |   |
| Business Address  |                             |   |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                             |   |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                             |   |
| John Kennedy<br>3664 Edgemont Dr.<br>Troy, MI 48084   | <sub>\$</sub> 200           | <sub>\$_</sub> 200  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for              | Memo Itemization  |
| Occupation Attorney Employer Self-employed  | Chok Here lot               | Wellie Remization   |
| Business Address 3664 Edgemont Dr, Troy, MI 48084   |                             |   |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                             |   |
| Page Subtota  | \$450.00                    |   |
| . Grand Total of All Schedules 1A   | Ψ=0,:00:00                  |   |
| (Complete on last page of Schedule  | Enter this total on         | <b></b>   |
| Page 3 of 27  | line 3a of Summary<br>Page. | ,   |



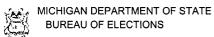
#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_\_139348

2. Committee Name CTE Liz Sierawski

| 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<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|--------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address: Raymond Nadolski  |                    |  |
| 3274 Alderdale Dr<br>Sterling Heights, MI 48310   | <sub>\$</sub> 100  | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for     | Memo Itemization ▼   |
| Occupation Employer   | Official force for | Wellie Relinzation   |
| Business Address  |                    |  |
| Type of Contribution: Direct Loan from a person V Fund Raiser   |                    |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                    |  |
| Frances Rizzo<br>37516 Hidden Valley Ct<br>Clinton Twp, MI 48036  | <u>\$</u> 200      | <sub>\$</sub> 200  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for     | Memo Itemization ▼   |
| Occupation Retired Employer   |                    | <b></b>  |
| Business Address 37516 Hidden Valley Court, Clinton Twp, MI 48036   |                    |  |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                    |  |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:  |                    |  |
| Joseph Manuszak<br>43835 Via Antonio Dr<br>Sterling Heights, MI 48314   | <u>\$100</u>       | <u>\$ 100</u>  |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for     | Memo Itemization <b>▼</b>  |
| Occupation Employer   |                    |  |
| Business Address  |                    |  |
| Type of Contribution: Direct Loan from a person Fund Raiser   |                    |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                    |  |
| Lynn Manuszak<br>43835 Via Antonio Dr   | <sub>s</sub> 100   | <u>.</u> 100   |
| Sterling Heights, MI 48314  | \$                 | \$   |
| 5. If over \$100.00 cumulative, please provide:   | Click Here for     | Memo Itemization ▼   |
| Occupation Employer   |                    | أسسا   |
| Business Address  |                    |  |
| Type of Contribution: ☐ Direct ☐ Loan from a person ✔ Fund Raiser   |                    |  |
|   | \$500.00           |  |
| Grand Total of All Schedules 1A   | I\$29 150 00       | I  |

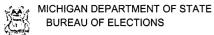
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1. Committee I.D. Number \_\_\_\_\_

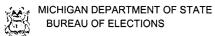
**CANDIDATE COMMITTEE** 

| Enter contributor's name and address. If contribution is from an individual, enter last middle initial. Check box to indicate if contribution is from a Political Committee or an Committee (PAC) Report all contributions regardless of amount. |  |
|--|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/Name & Address: Salvatore Rizzo 4280 Galt Ocean Dr Apt 16N Ft Lauderdale, FL 33308  | \$\frac{18/2023}{\state{100}} \square \square 100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for Memo Itemization  |
| Occupation Employer  |  |
| Business Address   |  |
| Type of Contribution: Direct Loan from a person  | Raiser   |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/1 Name & Address   | 8/2023   |
| Lucido for a Brighter Tomorrow<br>6303 26 Mile Rd. Suite 203<br>Washington, MI 48094   | <u>\$100</u> <u>\$100</u>  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for Memo Itemization ▼  |
| Occupation Employer  |  |
| Business Address   |  |
| Type of Contribution: Direct Loan from a person 🗸 Fund   | I Raiser   |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/ Name & Address:  Pashko Ujkic 38346 Phyllis Ct Sterling Heights, MI 48312  5. If over \$100.00 cumulative, please provide:   | \$500 \$500  Click Here for Memo Itemization   |
| Occupation Owner Employer Self-employed  |  |
| Business Address Dodge Park Coney,35252 Dodge Park, Sterling Hgts Type of Contribution: Direct Loan from a person Fund   |  |
|  | d Raiser   |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/Name & Address  John Wallace 5605 Cherokee Washington, MI 48094   | \$250 <u>\$</u> 250  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for Memo Itemization ▼  |
| Occupation Retired Employer  |  |
| Business Address   |  |
| Type of Contribution: Direct Loan from a person Fund   | Raiser   |
|  | Page Subtotal \$950.00   |
| (Complete on I   | al of All Schedules 1A ast page of Schedule)  Enter this total on line 3a of Summary Page. |
| Page of  | . ~3~.   |



### CANDIDATE COMMITTEE

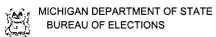
| Enter contributor's nammiddle initial. Check b<br>Committee (PAC) Repo | ox to indicate if conti | ribut  | ion is from a Political C         |          | nter last name, first name,<br>ee or an Independent | 6. Amount                              | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|-------------------------|--------|-----------------------------------|----------|---|--|--|
| 3. Contribution # 1 Name & Address: Jon Novak                          | PAC Receipt?            |        | YES 4. Date of                    | Receipt  | 10/18/2023  |  |  |
| 22611 Oconnor  |                         |        |                                   |          |   | 200                                    | , 200  |
| St Clair Shores,   | MI 48080                |        |                                   |          |   | <u>\$200</u>                           | <u>\$ 200</u>  |
| 5. If over \$100.00 cum  |                         |        |                                   |          |   | Click Here for                         | r Memo Itemization ▼   |
| Occupation Contrac   |                         |        | <sub>mployer</sub> <u>Self-em</u> |          |   | Ollok Flore for                        | Welle Remization   |
| Business Address 22  | 611 Oconnor             | St,    | St. Clair Shore                   | es, M    | 1 48080   |  |  |
| Type of Contribution:  | Direct                  |        | Loan from a person                | 4        | Fund Raiser   |  |  |
| Contribution #2     Name & Address                                     | PAC Receipt?            |        | YES 4. Date of                    | Receipt  | 10/18/2023  |  |  |
| Derek Wilcynsk<br>41927 Standish<br>Clinton Twp, MI                    | Dr                      |        |                                   |          |   | <u>\$ 100</u>                          | <sub>\$_</sub> 100   |
| 5. If over \$100.00 cum  | ulative, please pro     | vide   | :                                 |          |   | Click Here for                         | Memo Itemization ▼   |
| Occupation   |                         | . Em   | ployer                            | <u> </u> |   |  | l  |
| Business Address   |                         |        |                                   |          |   |  |  |
| Type of Contribution:  | Direct                  |        | Loan from a person                | V        | Fund Raiser   |  |  |
| 3. Contribution # 3 Name & Address:                                    | PAC Receipt?            |        | YES 4. Date of                    | f Receip | ot 10/18/2023                                       |  |  |
| John Ange<br>3031 Alden Ct<br>Port Huron,MI 4                          | 8060                    |        |                                   |          |   | <sub>\$</sub> 100                      | <sub>\$</sub> _100   |
|  |                         |        |                                   |          |   | Click Here for                         | Memo Itemization ▼   |
| 5. If over \$100.00 cum  | ulative, please pro     |        |                                   |          |   |  | keoseenik  |
| Occupation   |                         | . E    | mployer                           |          |   |  |  |
| Business Address   | Direct                  |        | Loan from a person                | V        | Fund Raiser   |  |  |
| 3. Contribution # 4  | PAC Receipt?            | ᆛ      | •                                 | ت        |   | 1                                      |  |
| Name & Address   | PAC Receipt?            | L      | YES 4. Date o                     | n Recei  | pt 10/18/2023                                       |  |  |
| Ronald Fenton  |                         |        |                                   |          |   |  |  |
| 3583 Port Cove   |                         |        |                                   |          |   | ູ 100                                  | <u>,</u> 100   |
| Waterford, MI 48   |                         | مامانى |                                   |          |   | Φ                                      | \$   |
| 5. If over \$100.00 cum  | lulative, please pro    | viae   | :                                 |          |   | Click Here for                         | Memo Itemization ▼   |
| Occupation   |                         | -      | Employer                          |          |   |  |  |
| Business Address   |                         |        |                                   |          |   |  |  |
| Type of Contribution:  | Direct                  |        | Loan from a person                | V        | Fund Raiser   |  |  |
|  |                         |        |                                   |          | Page Subtotal                                       | \$500.00                               |  |
|  |                         |        |                                   |          | nd Total of All Schedules 1A                        | \$29,150.00                            |  |
| 6 . 27   |                         |        | (                                 | (Comple  | ete on last page of Schedule)                       | Enter this total on line 3a of Summary | J  |
| Pageof   | _                       |        |                                   |          |   | Page.                                  |  |



### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_139348

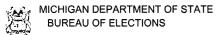
| Enter contributor's nan<br>middle initial. Check b<br>Committee (PAC) Rep                     | ox to indicate if cont | ribu | tion is from a Political | vidual, e<br>Committ | nter last name, first name,<br>see or an Independent          | 6. Amount  | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|------------------------|------|--------------------------|----------------------|---|--|--|
| 3. Contribution # 1<br>Name & Address:<br>Michael Macher<br>7223 Venturi Dr<br>Washington, MI |                        |      | YES 4. Date o            | f Receip             | 10/18/2023  | <sub>\$</sub> 100  | <sub>\$</sub> 100  |
| 5. If over \$100.00 cum   | ulative, please pro    | vid  | <b>)</b> :               |                      |   | Click Horo fo  | r Mama Itamization   |
| Occupation  |                        | _    | Employer                 |                      |   | Click here to  | r Memo Itemization ▼   |
| Business Address  |                        |      |                          |                      |   |  |  |
| Type of Contribution:   | Direct                 |      | Loan from a person       | <b>V</b>             | Fund Raiser   |  |  |
| Contribution #2     Name & Address  | PAC Receipt?           |      | YES 4. Date o            | f Receipt            | 10/18/2023  |  |  |
| John Torongo<br>40540 Lizabeth<br>Sterling heights  |                        |      |                          |                      |   | <u>\$ 100</u>  | <sub>\$</sub> _100   |
| 5. If over \$100.00 cum   | ulative, please pro    | vide | ::                       |                      |   | Click Here for   | r Memo Itemization 🔻   |
| Occupation  |                        | _ Er | nployer                  |                      |   |  |  |
| Business Address  |                        |      |                          |                      | · · · · · · · · · · · · · · · · · · ·                         |  |  |
| Type of Contribution:   | Direct                 |      | Loan from a person       | ~                    | Fund Raiser   | _  |  |
| 3. Contribution # 3   | PAC Receipt?           |      | YES 4. Date of           | of Receip            | ot 10/18/2023   | _  |  |
| Name & Address:<br>Greg Iacobelli<br>53639 Christy D<br>Chesterfield, MI                      |                        |      |                          |                      |   | <u>\$</u> 200  | <u>\$200</u>   |
| 5. If over \$100.00 cum   | ulative, please pro    | vide | <b>:</b> :               |                      |   | Click Here for   | Memo Itemization ▼   |
| Occupation Retired  | 70.1494 miles y 10.119 | _    | Employer                 |                      |   |  |  |
| Business Address  |                        |      |                          |                      |   |  |  |
| Type of Contribution:   | Direct                 |      | Loan from a person       | <b>V</b>             | Fund Raiser   |  | <u>-</u>   |
| 3. Contribution # 4 Name & Address  | PAC Receipt?           | L    | YES 4. Date              | of Recei             | pt 10/18/2023   |  |  |
| Chris Alayan<br>3822 Winding B<br>Rochester Hills,  |                        |      |                          |                      |   | <sub>\$</sub> 500  | <sub>\$_</sub> 500   |
| 5. If over \$100.00 cum   | ulative, please pro    | vid  | <b>»</b> :               |                      |   | Click Horo for   | Memo Itemization ▼   |
| Occupation Attorne  | <b>∋</b> у             | _    | Employer Self-e          | emplo                | /ed   | Click Here lor   | Memo itemization   |
| Business Address 38   |                        | ro   | ok, Rochester            | Hills,               | MI 48309  |  |  |
| Type of Contribution:   | Direct                 | Γ    | Loan from a person       | V                    | Fund Raiser   |  |  |
| B-14  | <u> </u>               |      |                          | b                    | Page Subtotal   | \$900.00   |  |
| 7 27  |                        |      |                          |                      | nd Total of All Schedules 1A<br>ete on last page of Schedule) | \$29,150.00<br>Enter this total on<br>line 3a of Summary |  |
| Pageof  | -                      |      |                          |                      |   | Page.  |  |



1. Committee I.D. Number \_\_\_\_\_139348

**CANDIDATE COMMITTEE** 

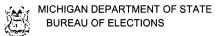
|  | ox to indicate if cont | ribu | bution is from an individual, enter<br>ion is from a Political Committee o<br>rdless of amount. |                           | 6. Amount                   | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|------------------------|------|---|---------------------------|-----------------------------|--|
| 3. Contribution # 1 Name & Address: Dominico Melia | PAC Receipt?           |      | YES 4. Date of Receipt 1  | 0/18/2023                 |                             |  |
| 3520 Fox Hill                                      | MI 49240               |      |   |                           | <sub>s</sub> 100            | <u>.</u> 100   |
| Sterling Heights                                   |                        |      |   |                           | <u>\$</u>                   | \$   |
| 5. If over \$100.00 cum                            | ulative, please pro    | vid  | <b>:</b> :  |                           | Click Here for              | Memo Itemization ▼   |
| Occupation   |                        | -    | Employer  |                           |                             |  |
| Business Address                                   | <del></del> 1          |      |   |                           |                             |  |
| Type of Contribution:                              | Direct                 |      | Loan from a person Fu   | nd Raiser                 |                             |  |
| Contribution #2     Name & Address                 | PAC Receipt?           |      | YES 4. Date of Receipt 10   | 0/18/2023                 |                             |  |
| Jeffrey Davis<br>20852 Marlinga<br>Clinton twp, MI |                        |      |   |                           | <u>\$100</u>                | <sub>\$</sub> 100  |
| 5. If over \$100.00 cum                            | ulative, please pro    | vide | <b>:</b>  |                           | Click Here for              | Memo Itemization ▼   |
| Occupation   |                        | _ Er | nployer   |                           |                             |  |
| Business Address                                   |                        |      |   |                           |                             |  |
| Type of Contribution:                              | Direct                 |      | Loan from a person  | und Raiser                |                             |  |
| 3. Contribution # 3 Name & Address:                | PAC Receipt?           |      | YES 4. Date of Receipt 1  | 0/18/2023                 |                             |  |
| Joseph Oram  |                        |      |   |                           | 200                         | 000  |
| PO Box 252755                                      |                        |      |   |                           | <u>\$300</u>                | <u>\$ 300</u>  |
| West Bloomfield                                    | i, MI 48325            |      |   |                           | Click Horo for              | Mama Itamization   |
| 5. If over \$100.00 cum                            |                        | vid  | <b>:</b> :  |                           | Click Here lor              | Memo Itemization ▼   |
| Occupation Retired                                 |                        | _ [  | Employer  |                           |                             |  |
| Business Address                                   |                        |      |   |                           |                             |  |
| Type of Contribution:                              | Direct                 |      | Loan from a person  | und Raiser                |                             |  |
| Contribution # 4     Name & Address                | PAC Receipt?           |      | YES 4. Date of Receipt 1  | 0/18/2023                 |                             |  |
| Cecil ST. Pierre                                   |                        |      |   |                           |                             |  |
| 32595 Sabrina (                                    |                        |      |   |                           | <sub>s</sub> 100            | ູ 100  |
| Warren, MI 480                                     |                        |      |   |                           |                             | Φ  |
| 5. If over \$100.00 cum                            | ulative, please pro    | vid  | <b>):</b>   |                           | Click Here for              | Memo Itemization ▼   |
| Occupation   |                        | -    | Employer  |                           |                             | annual and a second  |
| Business Address                                   |                        |      |   |                           |                             |  |
| Type of Contribution:                              | Direct                 |      | Loan from a person 🕡 Fu   | ınd Raiser                |                             |  |
|  |                        |      |   | Page Subtotal             | \$600.00                    |  |
|  |                        |      | Grand T   | otal of All Schedules 1A  | \$29,150.00                 |  |
|  |                        |      |   | on last page of Schedule) | Enter this total on         |  |
| Page 8 of 27                                       | <u>-</u>               |      |   |                           | line 3a of Summary<br>Page. |  |



1. Committee I.D. Number 139348

**CANDIDATE COMMITTEE** 

| 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 all contributions regardless of amount. | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|--|--|
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address: Theresa Toia  |  |  |
| 55196 Meadow Ridge Ct<br>Shelby Twp, MI 48316  | <sub>\$</sub> 100                            | <u>,</u> 100   |
|  | \$   | \$   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | r Memo Itemization ▼   |
| Occupation Employer  |  |  |
| Business Address   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |  |  |
| Arthur Garton<br>38550 Garfield Rd Suite A<br>Clinton Twp, MI 48038  | <u>\$</u> 100                                | <sub>\$_</sub> 100   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization   |
| Occupation Employer  |  |  |
| Business Address   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  |  |  |
| Anthony Urbani II 42500 Hayes Rd, Suite 100 Clinton Township, MI 48038   | <u>\$</u> 200                                | <sub>\$</sub> 200  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Attorney Employer Self-employed   |  |  |
| Business Address 42500 Hayes Rd, Suite 100 Clinton Twp, MI 48038   |  |  |
| Type of Contribution: ☐ Direct ☐ Loan from a person ✔ Fund Raiser  |  |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |  |  |
| Nathan Inks<br>1050 Cloverlawn Blvd<br>Lincoln Park, MI 48146  | <sub>\$</sub> 500                            | <sub>\$</sub> 500  |
| 5. If over \$100.00 cumulative, please provide:  |  |  |
| Occupation Attorney Employer Self-employed   | Click Here for                               | Memo Itemization ▼   |
| Business Address 1050 Cloverlawn Blvd, Lincoln Park, MI 48146  |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| Page Subtotal  | \$900.00                                     |  |
| Grand Total of All Schedules 1A  | \$29,150.00                                  |  |
| (Complete on last page of Schedule)  Page of   | Enter this total on line 3a of Summary Page. | ı  |



1. Committee I.D. Number 139348

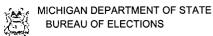
**CANDIDATE COMMITTEE** 

2. Committee Name CTE Liz Sierawski

|   | ox to indicate if con | ntribution is from a Politica |            | enter last name, first name,<br>tee or an Independent        | 6. Amount             | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|-----------------------|-------------------------------|------------|--|-----------------------|--|
| 3. Contribution # 1<br>Name & Address:<br>Fawwaz Jarbou<br>812 S. Main ST | PAC Receipt?          | YES 4. Date                   | of Receip  | 10/18/2023   | _                     |  |
| Royal Oak, MI 4   | 8067                  |                               |            |  | <sub>\$</sub> 500     | <sub>s</sub> 500   |
| 5. If over \$100.00 cum   |                       | ovide:                        |            |  | Ψ                     | Ψ  |
| Occupation Retired  | uiutivo, picuso pi    | Employer                      |            |  | Click Here for        | or Memo Itemization ▼  |
| Business Address  |                       |                               |            |  |                       |  |
| Type of Contribution:   | Direct                | Loan from a persor            | , <b>/</b> | Fund Raiser  |                       |  |
| 3. Contribution #2 Name & Address   | PAC Receipt?          | YES 4. Date                   | of Receip  | t 10/18/2023   |                       |  |
| Jennifer Kee<br>55837 Nickelby<br>Shelby Twp, MI                          |                       |                               |            |  | <sub>\$</sub> 1000    | <sub>\$</sub> 1000   |
| 5. If over \$100.00 cum   | ulative, please pro   | ovide:                        |            |  | Click Here fo         | or Memo Itemization ▼  |
| Occupation Housew   | rife                  | Employer                      |            |  |                       | Lannand  |
|   |                       | S, Shelby Twp.                | MI 483     | 316  |                       |  |
| Type of Contribution:   | Direct                | Loan from a person            | V          | Fund Raiser  |                       |  |
| 3. Contribution # 3 Name & Address:                                       | PAC Receipt?          | YES 4. Date                   | of Recei   | ot 10/18/2023  | _                     |  |
| Quincy McAlpine<br>1682 Pinnate Ct<br>Rochester, MI 4                     |                       |                               |            |  | <sub>\$</sub> 1000    | <sub>\$</sub> 1000   |
| 5. If over \$100.00 cum   |                       | ovide:                        |            |  | Click Here for        | r Memo Itemization ▼   |
| Occupation Entrepe  |                       | Employer Self-en              | nolove     | d  |                       |  |
|   |                       | Rochester, MI 48306           | пріодо     |  |                       |  |
| Type of Contribution:   | Direct                | Loan from a persor            | V          | Fund Raiser  |                       |  |
| 3. Contribution # 4 Name & Address  | PAC Receipt?          | YES 4. Date                   | e of Recei | ipt 10/18/2023   |                       |  |
| Matthew Dunask<br>535 Cushing St<br>₋ake Orion, MI 4                      |                       |                               |            |  | <sub>\$</sub> 100     | <sub>\$</sub> _100   |
| 5. If over \$100.00 cum   | ulative, please pro   | ovide:                        |            |  | 0                     |  |
| Occupation  |                       | Employer                      |            |  | Click Here for        | Memo Itemization   |
| Business Address  |                       | <u> </u>                      |            | Fund Daises  |                       |  |
| Type of Contribution:   | Direct                | Loan from a persor            |            | Fund Raiser  | llan ann an           |  |
|   |                       |                               | _          | Page Subtota   | <del>+=</del> ,000.00 | -  |
|   |                       |                               |            | nd Total of All Schedules 1A<br>ete on last page of Schedule | 1420,100.00           | J  |
| 40 6-   |                       |                               |            |  | Enter this total of   |  |

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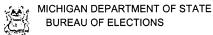
line 3a of Summary Page.



1. Committee I.D. Number \_\_\_\_\_\_\_139348

CANDIDATE COMMITTEE

| Enter contributor's name<br>middle initial. Check bo<br>Committee (PAC) Repor                | k to indicate if contr | ribution is from a F | Political Com |          | ter last name, first name,<br>se or an Independent            | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|------------------------|----------------------|---------------|----------|---|--|--|
| 3. Contribution # 1<br>Name & Address:<br>Lisa Alamat<br>44012 Basswood<br>Sterling Heights, |                        | YES 4.               | Date of Rec   | ceipt    | 10/18/2023  | <sub>\$</sub> 1000                           | <sub>\$</sub> 1000   |
| 5. If over \$100.00 cumu   | lative, please pro     | vide:                |               |          |   | Click Here fo                                | r Memo Itemization   |
| Occupation Housew  |                        | _ Employer           |               |          |   | Click Here ic                                | i Wello Remization   |
| Business Address 440   | 12 Basswoo             | d Dr, Sterlin        | g Height      | ts, i    | MI 48314  |  |  |
| Type of Contribution:  | Direct                 | Loan from a p        | person        | <u> </u> | Fund Raiser   |  |  |
| 3. Contribution #2 Name & Address  | PAC Receipt?           | YES 4.               | Date of Rec   | ceipt    | 10/18/2023  |  |  |
| Jan Lee<br>600 Manotic Dr.<br>Lakeville, MI 483  | 67                     |                      |               |          |   | <sub>\$</sub> 150                            | <sub>\$</sub> 150  |
| 5. If over \$100.00 cumu   | lative, please pro     | vide:                |               |          |   | Click Here fo                                | r Memo Itemization ▼   |
| Occupation Retired   |                        | Employer             |               |          |   |  | _  |
| Business Address   |                        |                      |               |          |   |  |  |
| Type of Contribution:  | Direct                 | Loan from a p        | erson         | ~        | Fund Raiser   |  |  |
| 3. Contribution # 3  | PAC Receipt?           | YES 4                | . Date of Re  | ceipt    | 10/18/2023  |  |  |
| Name & Address:<br>Julia Ann Apone<br>52849 Seven Oa<br>Shelby Twp, MI                       |                        |                      |               |          |   | § 250  | <sub>\$</sub> 250  |
| 5. If over \$100.00 cumu   | lative, please pro     | vide:                |               |          |   | Click Here for                               | Memo Itemization ▼   |
| Occupation Retired   |                        | Employer             |               |          |   |  |  |
| Business Address   |                        |                      |               |          |   |  |  |
| Type of Contribution:  | Direct                 | Loan from a p        |               | <u> </u> | Fund Raiser   |  |  |
| Contribution # 4  Name & Address   | PAC Receipt?           | YES '                | 4. Date of Re | eceip    | ot 10/18/2023   |  |  |
| Labeed Nouri, M<br>3525 Fern Canyo<br>Jamul, CA 91935  | on Rd.                 |                      |               |          |   | <sub>\$</sub> 500                            | <sub>\$_</sub> 500   |
| 5. If over \$100.00 cum  | ılative, please pro    | vide:                |               |          |   | Click Here for                               | Memo Itemization   |
| Occupation Doctor  |                        | _ Employer           | Self-emp      | oloy     | red   | Chok Horo to                                 | Wellio Remization  |
| Business Address 352   | 25 Fern Cany           | yon Dr, Jamı         | ul, CA 9      | 193      | 35  |  |  |
| Type of Contribution:  | Direct                 | Loan from a          | person        | <b>V</b> | Fund Raiser   |  |  |
|  |                        |                      |               |          | Page Subtotal   | \$1,900.00                                   | -  |
|  |                        |                      |               |          | nd Total of All Schedules 1A<br>ete on last page of Schedule) | \$29,150.00                                  |  |
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1. Committee I.D. Number 139348

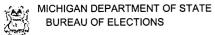
**CANDIDATE COMMITTEE** 

2. Committee Name CTE Liz Sierawski

| 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 all contributions regardless of amount. | 6. Amount           | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|---------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address: Vincenzo Manzella 18751 Wigeon Dr. Clinton Twp. MI 48038   | <sub>\$</sub> 300   | <sub>\$</sub> 300  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here          | for Memo Itemization   |
| Occupation Attorney Employer Self-employed   | Click Here          | Tor Memo Remization  |
| Business Address 18751 Wigeon Dr. Clinton Twp, MI 48038  |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                     |  |
| Charles Turnbull<br>53957 Sutherland Ct<br>Shelby Twp, MI 48316  | <sub>\$</sub> 100   | <u></u> \$_100   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here          | for Memo Itemization -   |
| Occupation Employer  |                     | , Additional   |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:   | _                   |  |
| Anthony Rubino<br>38880 Sahr Ct<br>Clinton Twp, Mi 48038   | <sub>\$</sub> 100   | _ \$100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here          | for Memo Itemization   |
| Occupation Employer  |                     |  |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  Nancy Piatek   |                     |  |
| 45565 Louise Ct<br>Utica, MI 48317   | <sub>\$</sub> 500   | _ \$_500   |
| 5. If over \$100.00 cumulative, please provide:  | Official Library    |  |
| Occupation Retired Employer  | Click Here          | for Memo Itemization 🔻   |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| Page Subtot  | \$1,000.00          |  |
| Grand Total of All Schedules 1/  |                     |  |
| (Complete on last page of Schedule   | Enter this total or | 1  |

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line 3a of Summary Page.



139348 1, Committee I.D. Number

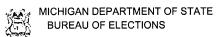
CTE Liz Sierawski CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt 10/18/2023 Name & Address: Valentina Andreopolos 31148 White Oak Ct £500 Chesterfield Twp, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ▼ Occupation Retired Employer. Business Address Type of Contribution: Direct Fund Raiser Loan from a person 4. Date of Receipt 10/18/2023 PAC Receipt? 3. Contribution #2 Name & Address Paul Borg \$500 § 500 20331 Huron Dr. Clinton Twp, MI 48038 Click Here for Memo Itemization ▼ 5. If over \$100.00 cumulative, please provide: Employer Self-employed Occupation Contractor Business Address 20331 Huron Dr. Clinton Twp, MI 48038 Fund Raiser Type of Contribution: Direct Loan from a person 3. Contribution #3 PAC Receipt? 4. Date of Receipt 10/18/2023 Name & Address: Ben Aloia <sub>\$</sub>300 54439 White Spruce Lane Shelby Twp, MI 48315 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: **Employer Self-employed** Occupation Attorney Business Address 54439 White Spruce Lane, Shelby Twp, MI 48315 Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 4 4. Date of Receipt 10/18/2023 PAC Receipt? ] YES Name & Address John Tesija 733 Westview Rd. £100 100 Bloomfield Hills, MI 48304 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ▼ Occupation\_ Business Address Type of Contribution: **Fund Raiser** Direct Loan from a person Page Subtotal \$1,400.00

Page 13 of 27

Grand Total of All Schedules 1A (Complete on last page of Schedule) \$29,150.00

Enter this total on

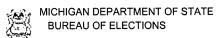
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### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_39348

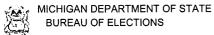
| Enter contributor's name and middle initial. Check box to in Committee (PAC) Report all                | ndicate if contrib | oution is from a Political | •          |  | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|--------------------|----------------------------|------------|--|--|--|
| 3. Contribution #1 P<br>Name & Address:<br>Steven Mancini<br>37532 Hidden Valle<br>Clinto Twp, MI 4803 |                    | YES 4. Date o              | f Receipt  | 10/18/2023   | <sub>\$</sub> 100                            | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulativ  | e, please provi    | de:                        |            |  | Click Here fo                                | r Memo Itemization ▼   |
| Occupation   |                    | Employer                   |            |  | Office reference                             | i Wello Remization   |
| Business Address   |                    |                            |            |  |  |  |
| Type of Contribution:  | irect              | Loan from a person         | <b>V</b>   | Fund Raiser  |  |  |
| Contribution #2 PA     Name & Address  | AC Receipt?        | YES 4. Date o              | f Receipt  | 10/18/2023   |  |  |
| Phillip Ruggeri<br>55764 Saint Regis I<br>Shelby Twp, MI 483   |                    |                            |            |  | <sub>\$</sub> _1000                          | <u>\$ 1000</u>   |
| 5. If over \$100.00 cumulativ  | e, please provi    | de:                        |            |  | Click Here fo                                | r Memo Itemization ▼   |
| Occupation Attorney  | E                  | Employer Self-emp          | loyed      |  |  | Eumal<br>I   |
| Business Address 55764   | Saint Regi         | s Ct, Shelby Rw            | /p, ΜΙ     | 48315  |  |  |
|  | rect               | Loan from a person         | V          | Fund Raiser  |  | ĺ  |
| 3. Contribution # 3 PA   | AC Receipt?        | YES 4. Date of             | of Receipt | 10/18/2023   |  |  |
| Louis Stramaglia<br>3202 Auburn Rd.<br>Shelby Twp, MI 48317  |                    |                            |            |  | <u>\$100</u>                                 | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulativ  | e, please provi    | de:                        |            |  | Click Here for                               | Memo Itemization 🔻   |
| Occupation   |                    | Employer                   |            |  |  |  |
| Business Address   |                    |                            |            |  |  |  |
| Type of Contribution: Di   | rect               | Loan from a person         | ~          | Fund Raiser  |  |  |
| Contribution # 4 P.  Name & Address  | AC Receipt?        | YES 4. Date                | of Receip  | ot 10/18/2023  |  |  |
| Robert Zee<br>5064 Maceri Circle<br>Sterling Heights, MI   | 48314              |                            |            |  | <sub>\$</sub> 200                            | <sub>\$</sub> _200   |
| 5. If over \$100.00 cumulativ  | ve, please provi   | ide:                       |            |  | Click Here for                               | Memo Itemization   |
| Occupation Retired   |                    | Employer                   |            |  | Olick Fiere for                              | Wello Remization 1   |
| Business Address   |                    |                            |            |  |  |  |
| Type of Contribution: [ ]  | Direct             | Loan from a person         | V          | Fund Raiser  |  |  |
|  |                    |                            |            | Page Subtotal  | \$1,400.00                                   | _  |
|  |                    |                            |            | nd Total of All Schedules 1A<br>te on last page of Schedule) | \$29,150.00                                  |  |
| Page of  |                    |                            | Comple     | to on last page of otherwie)                                 | Enter this total on line 3a of Summary Page. |  |



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_139348

| Enter contributor's nam<br>middle initial. Check b<br>Committee (PAC) Repo                 | ox to indicate if contr | ibution is from a | a Political Cor | * .      | ter last name, first name,<br>e or an Independent | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|-------------------------|-------------------|-----------------|----------|---|--|--|
| 3. Contribution # 1<br>Name & Address:<br>Lukas Bonner<br>4875 Sawgrass<br>Ann Arbor, MI 4 |                         | YES               | 4. Date of Re   | eceipt   | 10/18/2023  | <sub>\$</sub> 250                            | <sub>\$</sub> 250  |
| 5. If over \$100.00 cum<br>Occupation Consul   | • •                     |                   | Self-empl       | oye      | <u> </u>  | Click Here fo                                | or Memo Itemization 🔻  |
| Business Address 48  Type of Contribution:   |                         | Dr W, Ann         |                 |          | S108<br>Fund Raiser                               |  |  |
| 3. Contribution #2 Name & Address  | PAC Receipt?            | YES               | 4. Date of Re   | ceipt    | 10/18/2023  |  |  |
| Clark Andrews<br>53985 Sutherlar<br>Shelby Twp, MI   |                         |                   |                 |          |   | <u>\$100</u>                                 | <sub>\$</sub> 100  |
| 5. If over \$100.00 cum  | ulative, please pro     | vide:             |                 |          |   | Click Here fo                                | r Memo Itemization <b>▼</b>  |
| Occupation   |                         | Employer          |                 |          |   |  |  |
| Business Address   |                         |                   |                 |          |   |  |  |
| Type of Contribution:  | Direct                  | Loan from a       | person          | <b>v</b> | Fund Raiser                                       |  |  |
| Contribution # 3     Name & Address:   | PAC Receipt?            | YES               | 4. Date of R    | eceipt   | 10/18/2023  |  |  |
| Thomas Kemp<br>8459 Tipisco Tr<br>Holly, MI 48442  | ail                     |                   |                 |          |   | <u>\$400</u>                                 | <u>\$400</u>   |
| 5. If over \$100.00 cum  | ulative, please pro     | vide:             |                 |          |   | Click Here for                               | r Memo Itemization ▼   |
| Occupation Retired   |                         | Employer          |                 |          |   |  |  |
| Business Address<br>Type of Contribution:  | Direct                  | Loan from         | a person        | <b>'</b> | Fund Raiser                                       |  |  |
| Contribution # 4     Name & Address  Dan Rubino  | PAC Receipt?            | YES               | 4. Date of F    | Receip   | t 10/18/2023                                      |  |  |
| 1380 Ross Lane<br>Sterling Heights   |                         |                   |                 |          |   | <sub>\$</sub> 100                            | <sub>\$_</sub> 100   |
| 5. If over \$100.00 cum  |                         | vide:             |                 |          |   | Click Horo for                               | r Memo Itemization ▼   |
| Occupation   |                         | _ Employe         | -               |          |   | Click Here to                                | Memo itemization   |
| Business Address   |                         |                   |                 |          |   |  |  |
| Type of Contribution:  | Direct                  | Loan from         | a person        | ~        | Fund Raiser                                       |  |  |
|  |                         |                   |                 |          | Page Subtotal                                     | \$850.00                                     |  |
|  |                         |                   | (0              |          | nd Total of All Schedules 1A                      | \$29,150.00                                  |  |
| Page   | -                       |                   | (C              | ompie    | te on last page of Schedule)                      | Enter this total on line 3a of Summary Page. | <del>-</del>   |



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_139348

2. Committee Name CTE Liz Sierawski

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt 10/18/2023 Name & Address: John H Bologna 19135 Saxon Dr £100 100 Beverly Hills, MI 48025 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ▼ Occupation Employer\_ Business Address Type of Contribution: Direct Fund Raiser Loan from a person 4. Date of Receipt 10/18/2023 3. Contribution #2 PAC Receipt? Name & Address John H. Bologna JR <sub>s</sub> 100 , 100 19135 Saxon Dr Beverly Hills, Mi 48025 Click Here for Memo Itemization ▼ 5. If over \$100.00 cumulative, please provide: Employer\_ Occupation \_ **Business Address** Fund Raiser Type of Contribution: Direct Loan from a person 3. Contribution # 3 PAC Receipt? 4. Date of Receipt 10/18/2023 Name & Address: **Louis Corey** <sub>\$</sub>500 ູ 500 401 N Main St. Royal Oak, MI 48067 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: **Employer Self-employed** Occupation Attorney Business Address 401 N Main St, Royal Oak, MI 48067 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023 Name & Address Frank Malv 11080 16.5 Mile Road ,50 50 Sterling Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ▼ Occupation Business Address Type of Contribution: Fund Raiser Direct Loan from a person Page Subtotal \$750.00 Grand Total of All Schedules 1A \$29,150.00 (Complete on last page of Schedule) Enter this total on

Page 16 of 27

Enter this total on line 3a of Summary Page.



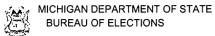
### **CANDIDATE COMMITTEE**

2. Committee Name CTE Liz Sierawski

| 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 all contributions regardless of amount. | 6. Amount           | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|---------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address: Marc Kaszubski 1096 Brompton Road Rochester Hills, MI 48309  | <sub>\$</sub> 100   | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for      | r Memo Itemization ▼   |
| Occupation Employer  | Onor Horo To        | Womo Romization  |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                     |  |
| Valerio Poliuto<br>39085 Moravian Dr.<br>Clinton Twp, MI 48036   | <u>\$ 100 </u>      | <u>\$ 100</u>  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for      | Memo Itemization ▼   |
| Occupation Employer  |                     |  |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:  |                     |  |
| Alan Casmere<br>28836 Panama St.<br>Warren, MI 48092   | <u>\$ 1000</u>      | <sub>\$</sub> 1000   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for      | Memo Itemization <b>▼</b>  |
| Occupation Entrepenuer Employer Self-employed  |                     |  |
| Business Address 28836 Panama St, Warren, MI 48092   |                     | :  |
| Type of Contribution: Direct Loan from a person V Fund Raiser  |                     |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                     |  |
| Linda Shermetaro<br>3146 Barkway<br>Sterling Heights, MI 48310   | <sub>\$</sub> 100   | <sub>\$_</sub> 100   |
| 5. If over \$100.00 cumulative, please provide:  | Click Llore for     | Mana Haminatian []   |
| Occupation Employer  | Click Here for      | Memo Itemization ▼   |
| Business Address   |                     |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                     |  |
| Page Subtotal  | \$1,300.00          |  |
| Grand Total of All Schedules 1A  | \$29,150.00         |  |
| (Complete on last page of Schedule)  | Enter this total on | ı  |

Page \_\_\_\_\_ of \_\_\_\_\_

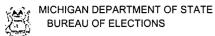
line 3a of Summary Page.



1. Committee I.D. Number \_\_\_\_\_\_139348

**CANDIDATE COMMITTEE** 

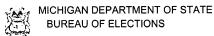
| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|--|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:  Joseph Peters   |  |  |
| 2850 Hickory Lawn Rd   | °100   | <u>,</u> 100   |
| Rochester Hills, MI 48307  | \$_100                                       | <u>\$ 100</u>  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here fo                                | r Memo Itemization ▼   |
| Occupation Employer  |  | lumuud.  |
| Business Address   |  |  |
| Type of Contribution: Direct Loan from a person V Fund Raiser  |  |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |  |  |
| Ralph Maccarone III<br>13921Basilisco Chase Dr<br>Shelby Twp, MI 48315   | <u>\$</u> 100                                | <u>\$ 100</u>  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Employer  |  |  |
| Business Address   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023   |  |  |
| Raymond Lope<br>8459 Hall Rd<br>Utica, MI 48317  | <u>\$</u> 200                                | <sub>\$</sub> 200  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Owner Employer Sullivan Funeral Homes   |  |  |
| Business Address 8459 Hall Rd, Utica, MI 48317   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |  |  |
| Gino Roncelli<br>6471 Metro Parkway  | <sub>250</sub>                               | , 250  |
| Sterling Heights, MI 48312   | \$200  | \$   |
| 5. If over \$100.00 cumulative, please provide:  | Click Horo for                               | Mama Itamization   |
| Occupation President Employer Roncelli Construction  | Click Hele lor                               | Memo Itemization ▼   |
| Business Address 6471 Metro Parkway, Sterling Heights, MI 48312  |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| Page Subtotal  | \$650.00                                     |  |
| Grand Total of All Schedules 1A (Complete on last page of Schedule)  | \$29,150.00                                  |  |
| Page of  | Enter this total on line 3a of Summary Page. |  |



1. Committee I.D. Number \_\_\_\_\_139348

### **CANDIDATE COMMITTEE**

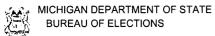
|   | to indicate if con | tributio     | on is from a Political Com | al, enter last name, first name,<br>imittee or an Independent    | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|--------------------|--------------|----------------------------|--|--|--|
| 3. Contribution # 1<br>Name & Address:<br>Thomas Wickersh<br>14863 Towering (<br>Shelby Twp, MI 4 | Daks Dr.           |              | YES 4. Date of Red         | 10/18/2023   | ,250   | <sub>s</sub> 250   |
| 5. If over \$100.00 cumul   |                    | vide.        |                            |  | Ψ  |  |
| Occupation Vice Pres  |                    |              | mployer Roncelli C         | onstruction  | Click Here for                               | or Memo Itemization ▼  |
| Business Address 647  |                    |              |                            |  |  |  |
| Type of Contribution:   | Direct             | П            |                            | ✓ Fund Raiser  |  |  |
| 3. Contribution #2  | PAC Receipt?       |              |                            | ceipt 10/18/2023   |  |  |
| Name & Address  |                    | L            |                            |  | •  |  |
| Cy Abdo<br>42550 Garfield Ro<br>Clinton Twp, MI 4   |                    | Α            |                            |  | <sub>\$</sub> 500                            | <sub>\$</sub> 500  |
| 5. If over \$100.00 cumula  |                    | vide:        |                            |  | Click Here fo                                | or Memo Itemization ▼  |
| Occupation Attorney   |                    |              | Self-employ                | ed   | Gliok Flore le                               | . Womo temzaton  |
| Business Address 4255   |                    |              |                            |  |  |  |
| Type of Contribution:   | Direct             |              |                            | ✓ Fund Raiser  |  |  |
| 3. Contribution # 3   | PAC Receipt?       |              | YES 4. Date of Re          | ceipt 10/18/2023   |  |  |
| Name & Address: Gary Cynowa 45451 Fielding St Macomb, MI 4804                                     |                    |              |                            |  | <sub>\$</sub> 100                            | <sub>\$</sub> _100   |
| 5. If over \$100.00 cumula  |                    | vide:        |                            |  | Click Here for                               | r Memo Itemization 🔻   |
|   | ilivo, picase pro  |              | nployer                    |  |  |  |
| Occupation<br>Business Address  |                    |              | прюует                     |  |  |  |
| Type of Contribution:   | Direct             |              | oan from a person          | ✓ Fund Raiser  |  |  |
| Contribution # 4     Name & Address   | PAC Receipt?       |              | YES 4. Date of Re          | eceipt 10/18/2023  |  |  |
| Stephen Pangori<br>8106 Rosebud La<br>Clarkston, Mi 483   |                    |              |                            |  | <sub>\$</sub> 75                             | <sub>\$_</sub> 75  |
| 5. If over \$100.00 cumul   | ative, please pro  | ovide:       |                            |  | Click Horo for                               | r Memo Itemization ▼   |
| Occupation  | ****               | <del>_</del> | Employer                   |  | Click Here to                                | Wellio Remization  |
| Business Address  |                    |              | · <del>-</del> ···         |  |  |  |
| Type of Contribution:   | Direct             |              | oan from a person          | ✓ Fund Raiser  |  |  |
|   |                    |              |                            | Page Subtotal  | \$925.00                                     |  |
|   |                    |              |                            | Grand Total of All Schedules 1A mplete on last page of Schedule) | \$29,150.00                                  |  |
| Pageof  |                    |              | (00)                       | mpioro on last page of scriedule)                                | Enter this total on line 3a of Summary Page. | ,<br>,   |



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

1. Committee I.D. Number \_\_\_\_\_139348

|  | x to indicate if conti | ributi | oution is from an individual, enter last name, fi<br>on is from a Political Committee or an Indepe<br>dless of amount. |              | 6. Amount                | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|------------------------|--------|--|--------------|--------------------------|--|
| 3. Contribution # 1<br>Name & Address:<br>Laura Pangori              | PAC Receipt?           |        | YES 4. Date of Receipt 10/18/202   | 23           |                          |  |
| 8106 Rosebud L   |                        |        |  |              | 75                       | ، 75   |
| Clarkston, MI 48   | 348                    |        |  |              | <sub>\$</sub> 75         | \$ 13  |
| 5. If over \$100.00 cum  | ulative, please pro    | vide   |  |              | Click Here for           | Memo Itemization ▼   |
| Occupation   |                        | _ E    | mployer  |              | Chok Horo for            | Womo Komization  |
| Business Address   |                        |        |  |              |                          |  |
| Type of Contribution:  | Direct                 |        | Loan from a person Fund Raiser   |              |                          |  |
| 3. Contribution #2 Name & Address                                    | PAC Receipt?           |        | 4. Date of Receipt 10/18/202   | 3            |                          |  |
| Gordon Wilson<br>49572 Compass<br>Chesterfield, MI                   |                        |        |  |              | <sub>\$</sub> 75         | <sub>\$</sub> 75   |
| 5. If over \$100.00 cum  | ulative, please pro    | vide   |  |              | Click Here for           | Memo Itemization ▼   |
| Occupation   |                        | Em     | ployer   |              |                          | <u> Common</u>   |
| Business Address   |                        |        |  | <del></del>  |                          |  |
| Type of Contribution:  | Direct                 |        | oan from a person  |              |                          |  |
| 3. Contribution # 3  | PAC Receipt?           |        | YES 4. Date of Receipt 10/18/202   | 23           |                          |  |
| Name & Address:<br>Kathy Wilson<br>49572 Compass<br>Chesterfield, MI |                        |        |  |              | <sub>\$</sub> 75         | <sub>\$</sub> 75   |
| 5. If over \$100.00 cum  | ulative, please pro    | vide   | :  |              | Click Here for           | Memo Itemization ▼   |
| Occupation   |                        | _ E    | mployer  |              |                          |  |
| Business Address   |                        |        |  |              |                          |  |
| Type of Contribution:  | Direct                 |        | Loan from a person Fund Raiser   |              | ,                        |  |
| Contribution # 4  Name & Address                                     | PAC Receipt?           |        | YES 4. Date of Receipt 10/18/20  | 23           |                          |  |
| Anthony Donadi<br>3085 Harrow Wa<br>Shelby Twp, MI                   | ay                     |        |  |              | <sub>\$</sub> 100        | <sub>\$</sub> _100   |
| 5. If over \$100.00 cum  |                        | vide   | :  |              |                          |  |
| Occupation   | ,, ·                   | _      | Employer   |              | Click Here for           | Memo Itemization ▼   |
| Business Address   |                        |        |  |              |                          |  |
| Type of Contribution:  | Direct                 |        | Loan from a person Fund Raiser   |              |                          |  |
| <u> </u>   |                        |        | P  | age Subtotal | \$325.00                 |  |
|  |                        |        | Grand Total of All S   | chedules 1A  | \$29,150.00              |  |
|  |                        |        | (Complete on last page   |              | Enter this total on      | J  |
| Page 20 of 27  |                        |        |  |              | line 3a of Summary Page. |  |

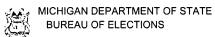


### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_139348

2. Committee Name CTE Liz Sierawski

| 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 all contributions regardless of amount. |                     |     |                    |            |                              | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|---------------------|-----|--------------------|------------|------------------------------|--|--|
| 3. Contribution # 1<br>Name & Address:<br>James George<br>19634 Westches   | PAC Receipt?        |     | YES 4. Date o      | f Receipt  | 10/18/2023                   | 400  | 400  |
| Clinto Twp, MI 4   |                     |     |                    |            |                              | <sub>\$</sub> 100                            | <sub>\$</sub> 100  |
| 5. If over \$100.00 cum  | ulative, please pro | vid | e:                 |            |                              |  |  |
| Occupation   |                     |     | Employer           |            |                              | Click Here to                                | or Memo Itemization ▼  |
| Business Address   |                     | _   |                    |            |                              |  |  |
| Type of Contribution:  | Direct              | ٦   | Loan from a person | ~          | Fund Raiser                  |  |  |
| 3. Contribution #2 Name & Address  | PAC Receipt?        |     | YES 4. Date of     | f Receipt  | 10/18/2023                   |  |  |
| David Yarema<br>2521 Rochester<br>Royal Oak,MI 48  |                     |     |                    |            |                              | <sub>\$</sub> 100                            | <u>\$ 100</u>  |
| 5. If over \$100.00 cum  | ulative, please pro | vid | <b>)</b> :         |            |                              | Click Here fo                                | r Memo Itemization ▼   |
| Occupation   |                     | Er  | nployer            |            |                              |  |  |
| Business Address   |                     |     |                    |            | ·····                        |  |  |
| Type of Contribution:  | Direct              |     | Loan from a person | <b>'</b>   | Fund Raiser                  |  |  |
| 3. Contribution # 3  | PAC Receipt?        |     | YES 4. Date of     | of Receipt | 10/18/2023                   |  |  |
| Name & Address:<br>Mark Zausmer<br>2298 LOcklin La<br>West Bloomfield  |                     |     |                    |            |                              | <u>\$ 100</u>                                | <u>\$ 100</u>  |
| 5. If over \$100.00 cum  | ulative, please pro | vid | e:                 |            |                              | Click Here for                               | Memo Itemization ▼   |
| Occupation   |                     | . 1 | Employer           |            |                              |  |  |
| Business Address   |                     |     |                    |            |                              |  |  |
| Type of Contribution:  | Direct              |     | Loan from a person | <b>V</b>   | Fund Raiser                  | <u> </u>                                     |  |
| Contribution # 4     Name & Address  | PAC Receipt?        |     | YES 4. Date        | of Receip  | t 10/18/2023                 |  |  |
| Annette Manzell<br>18441 Utica Rd<br>Roseville, MI 48  |                     |     |                    |            |                              | <sub>\$</sub> 1000                           | <sub>\$</sub> _1000  |
| 5. If over \$100.00 cum  | ulative, please pro | vid | e:                 |            |                              | Click Horo for                               | Memo Itemization   |
| Occupation House   | wife                | _   | Employer           |            |                              | Click Here loi                               | Wemo itemization   |
| Business Address 184   |                     | , R | oseville, MI 48    | 066        |                              |  |  |
| Type of Contribution:  | Direct              |     | Loan from a person | V          | Fund Raiser                  |  |  |
|  | 7                   |     |                    |            | Page Subtotal                | \$1,300.00                                   |  |
|  |                     |     |                    |            | d Total of All Schedules 1A  | \$29,150.00                                  |  |
| 21 of 27   |                     |     |                    | (Comple    | te on last page of Schedule) | Enter this total on line 3a of Summary Page. |  |

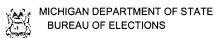


### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_139348

2. Committee Name CTE Liz Sierawski

|   | to indicate if conf | ribu | ibution is from an individual, e<br>tion is from a Political Committ<br>ardless of amount. |                               | 6. Amount                             | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|---------------------|------|--|-------------------------------|---------------------------------------|--|
| 3. Contribution # 1 Name & Address: S M A C PAC         | PAC Receipt?        |      | ı  | 10/18/2023                    |                                       |  |
| 3221 W Big Beav<br>Troy, MI 48084                       | erRD Suite          | 30   | 5  |                               | <sub>\$</sub> 100                     | <sub>\$</sub> 100  |
| 5. If over \$100.00 cumu                                | lative, please pro  | vid  | <b>9</b> :   |                               | Clink Horn fo                         | r Mama Itamization   |
| Occupation  |                     | _    | Employer   |                               | Click Here to                         | r Memo Itemization ▼   |
| Business Address  |                     |      |  |                               |                                       |  |
| Type of Contribution:                                   | Direct              |      | Loan from a person   | Fund Raiser                   |                                       |  |
| Contribution #2  Name & Address                         | PAC Receipt?        |      | YES 4. Date of Receipt   | 10/18/2023                    |                                       |  |
| Lawrence Scott<br>12900 Hall Rd, S<br>Sterling Heights, |                     |      |  |                               | <sub>\$</sub> 100                     | <sub>\$</sub> _100   |
| 5. If over \$100.00 cumul                               | ative, please pro   | vide | <b>:</b> :   |                               | Click Here for                        | Memo Itemization   |
| Occupation  |                     | _ Er | nployer  |                               |                                       |  |
| Business Address  |                     |      |  |                               |                                       |  |
| Type of Contribution:                                   | Direct              |      | Loan from a person   | Fund Raiser                   |                                       |  |
| 3. Contribution # 3                                     | PAC Receipt?        |      | YES 4. Date of Receip  | t 10/18/2023                  |                                       |  |
| Name & Address: David Femminine 110 South Main S        | Street              |      |  |                               | <sub>\$</sub> 100                     | <sub>\$</sub> 100  |
| Mount Clemens,  | MI48043             |      |  |                               | Click Here for                        | Memo Itemization ▼   |
| 5. If over \$100.00 cumul                               | ative, please pro   | vid  | <b>9</b> :   |                               | Olick Fiere for                       | Wemo temization  |
| Occupation  |                     | _ E  | Employer   | <del></del>                   |                                       |  |
| Business Address Type of Contribution:                  | 7 Direct            |      | Loop from a person   | Front Dates                   |                                       |  |
|   |                     | 닏    | Loan from a person   | Fund Raiser                   | · · · · · · · · · · · · · · · · · · · |  |
| 3. Contribution # 4 Name & Address                      | PAC Receipt?        | L    | YES 4. Date of Recei   | ot 10/18/2023                 |                                       |  |
| Dominic Moceri  |                     |      |  |                               |                                       |  |
| 3495 Moceri Cou<br>Oakland Twp, MI                      |                     |      |  |                               | <sub>\$</sub> 500                     | <sub>s</sub> 500   |
| 5. If over \$100.00 cumul                               |                     | wi d | <b></b>  |                               |                                       |  |
| Occupation Contrac                                      | -                   | _    | <sub>Employer</sub> Self-employ  | ved                           | Click Here for                        | Memo Itemization ▼   |
|   |                     | ur   | , Oakland Twp, MI 4  |                               |                                       |  |
| Type of Contribution:                                   | Direct              | Ī    | Loan from a person   | Fund Raiser                   |                                       |  |
|   | <del>_</del>        | -    |  | Page Subtotal                 | \$800.00                              |  |
|   |                     |      | Gra  | nd Total of All Schedules 1A  | \$29,150.00                           | -  |
|   |                     |      |  | ete on last page of Schedule) | Enter this total on                   | J  |
| Page of   |                     |      |  |                               | line 3a of Summary Page.              |  |



### **CANDIDATE COMMITTEE**

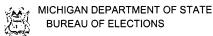
1. Committee I.D. Number \_\_139348

2. Committee Name CTE Liz Sierawski

| 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 all 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 10/18/2023 Name & Address: Chris Fischer 48 Market St, Suite 2B Mount Clemens, MI 48043  | <br><sub>\$</sub> 100 | <sub>\$</sub> 100   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for        | r Memo Itemization ▼  |
| Occupation Employer  | -                     | Wellio Remization   |
| Business Address   |                       |   |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                       |   |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |                       |   |
| Dan Garon<br>48 Market St. Suite 2B<br>Mount Clemens, MI 48043   | <u>\$</u> 100         | <sub>\$_</sub> 100  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for        | Memo Itemization ▼  |
| Occupation Employer  |                       |   |
| Business Address   |                       |   |
| Type of Contribution: Direct Loan from a person Fund Raiser  |                       |   |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2023   |                       |   |
| Gary D'Alessandro<br>28117 Groesbeck Hwy<br>Roseville MI 48066   | <sub>\$</sub> 500     | § 500   |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for        | Memo Itemization ▼  |
| Occupation Retired Employer  |                       |   |
| Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  |                       |   |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |                       |   |
| Tony Gallo<br>6303 26 Mile RD, Suite 200<br>Washington, MI 48094   | <sub>\$</sub> 1000    | <sub>s</sub> _1000  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for        | Memo Itemization ▼  |
| Occupation Contractor Employer Self-employed   | _                     | السسا   |
| Business Address 6303 26 Mile Rd, Suite 200, Washington, MI 48094  Type of Contribution: Direct Loan from a person Fund Raiser   |                       |   |
| Page Subtr   | otal \$1,700.00       |   |
| Grand Total of All Schedules<br>(Complete on last page of Schedu   | 1A \$29,150.00        |   |

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line 3a of Summary Page.



139348 1. Committee I.D. Number

CTE Liz Sierawski CANDIDATE COMMITTEE 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 10/18/2023 PAC Receipt? Name & Address: Kevin Denha 700 N. Old Woodward Ave Suite 300 ,1000 1000 Birmingham, MI 48009 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ▼ \_\_\_ Self-employed Occupation Financial Advisor Business Address 700 N. Old Woodward Ave Suite 300, Birmingham, MI 48009 Type of Contribution: Direct Fund Raiser Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Receipt 10/18/2023 Name & Address Kimberlev Belcastro <sub>s</sub> 100 100 11427 Heatherwood Ct Shelby Twp, MI 48315 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation \_ **Business Address** Type of Contribution: Direct Fund Raiser Loan from a person 3. Contribution # 3 PAC Receipt? 4. Date of Receipt 10/18/2023 YES Name & Address: Terry Newman <sub>\$</sub> 100 2920 Drahner Rd Oxford, MI 48370 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation \_ Employer\_ Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023 Name & Address Kelly Newman 2920 Drahner Rd <sub>s</sub> 100 100 Oxford, MI 48370 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation\_ Business Address \_ Type of Contribution: Direct Loan from a person **Fund Raiser** 

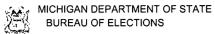
Page Subtotal

\$1,300.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) \$29.150.00

Enter this total on line 3a of Summary Page.

Page 24 of 27

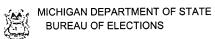


### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_139348

2. Committee Name CTE Liz Sierawski

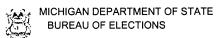
|   | x to indicate if cont | ribu | ibution is from an individual, enter last name, first name,<br>tion is from a Political Committee or an Independent<br>rdless of amount. | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|---|-----------------------|------|--|--|--|
| 3. Contribution # 1<br>Name & Address:<br>Stephen Rabaut<br>16931 19 Mile R<br>Clinton Twp, MI                  | d Suite 100           |      | YES 4. Date of Receipt 10/18/2023  | <sub>\$</sub> 100                            | <sub>\$</sub> 100  |
| 5. If over \$100.00 cum   | ılative, please pro   | vid  | <b>9</b> :   | Click Here fo                                | r Memo Itemization ▼   |
| Occupation  |                       | _    | Employer   | Olick Flere to                               | i Wellio Remization  |
| Business Address  |                       | _    |  |  |  |
| Type of Contribution:   | Direct                |      | Loan from a person Fund Raiser   |  |  |
| 3. Contribution #2 Name & Address   | PAC Receipt?          | ~    | YES 4. Date of Receipt 10/18/2023  |  |  |
| Mich Regional C<br>11687 American<br>Detroit, MI 4820   | Ave, Suite 2          | •    |  | <u>\$</u> 1000                               | <sub>\$</sub> 1000   |
| 5. If over \$100.00 cum   | ılative, please pro   | vide | :  | Click Here for                               | r Memo Itemization ▼   |
| Occupation  |                       | Er   | nployer  |  | Annual Control   |
| Business Address  |                       |      |  |  |  |
| Type of Contribution:   | Direct                |      | Loan from a person 🔽 Fund Raiser   |  |  |
| Name & Address:<br>Sheet Metal Wo<br>17100 W. 12 Mil<br>Southfield,MI 48  | e Rd, 2nd Fl          |      |  | <u>\$ 100</u>                                | § 100  |
| 5. If over \$100.00 cum   | ılative, please pro   | vid  | <b>:</b> :   | Click Here for                               | Memo Itemization ▼   |
| Occupation  |                       | _ 6  | Employer   |  |  |
| Business Address  | _                     |      |  |  |  |
| Type of Contribution:   | Direct                |      | Loan from a person Fund Raiser   |  |  |
| <ol> <li>Contribution # 4</li> <li>Name &amp; Address</li> <li>Aubrey Tobin</li> <li>2140 Walnut Lak</li> </ol> | PAC Receipt?          |      | YES 4. Date of Receipt 10/18/2023  | ¸100   | 100  |
| West Bloomfield   |                       |      |  | \$ 100                                       | <sub>\$_</sub> 100   |
| 5. If over \$100.00 cum   | ulative, please pro   | vid  | <b>9</b> :   | Click Here for                               | Memo Itemization ▼   |
| Occupation  |                       | _    | Employer   | Oliok Flore for                              | Wellio Remization  |
| Business Address  |                       |      |  |  |  |
| Type of Contribution:   | Direct                |      | Loan from a person Fund Raiser   |  |  |
|   |                       |      | Page Subtotal  | \$1,300.00                                   |  |
|   |                       |      | Grand Total of All Schedules 1A (Complete on last page of Schedule)  | \$29,150.00                                  |  |
| 25 of 27  |                       |      | (Complete on last page of Schedule)  | Enter this total on line 3a of Summary Page. | -  |



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348

| 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 all contributions regardless of amount. | 6. Amount                                    | 7. Cumulative for<br>Election Cycle for Each<br>Contributor (Through<br>date of receipt) |
|--|--|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:  Rob Huth 19500 Hall Rd, Suite 100  Clinton Twp, MI 48038  | <sub>\$</sub> 250                            | <sub>\$</sub> 250  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization   |
| Occupation Attorney Employer Self-employed   | Click Here for                               | Wellio Remization  |
| Business Address 19500 Hall Rd, Suite 100, Clinton Twp, MI 48038   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address  |  |  |
| Robert Kirk<br>19500 Hall Rd, Suite 100<br>Clinton Twp, MI 48038   | <sub>\$</sub> 250                            | <sub>\$</sub> 250  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Attorney Employer Self-employed   |  | <del></del>  |
| Business Address 19500 Hall Rd. Suite 100, Clinton Twp, MI 48038   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address:   |  |  |
| Georgette Devlin<br>15799 Southhampton Rd<br>Livonia, MI 48154   | <u>\$</u> 250                                | <sub>\$</sub> 250  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Housewife Employer  |  |  |
| Business Address 15799 Southhampton Rd, Livonia, MI 48154  |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/18/2023  Name & Address   |  |  |
| Tom Parker 356 North Clifton Bloomfield Hills, MI 48301  | <sub>\$</sub> 250                            | <sub>\$</sub> 250  |
| 5. If over \$100.00 cumulative, please provide:  | Click Here for                               | Memo Itemization ▼   |
| Occupation Retired Employer  | Chok Horo for                                | Womo Romzadon  |
| Business Address   |  |  |
| Type of Contribution: Direct Loan from a person Fund Raiser  |  |  |
| Page Subtotal  | \$1,000.00                                   |  |
| Grand Total of All Schedules 1A<br>(Complete on last page of Schedule)   | \$29,150.00                                  | ]  |
| Page of  | Enter this total on line 3a of Summary Page. | -  |



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_139348

2. Committee Name CTE Liz Sierawski

|  | ox to indicate if cont | ribution is from a Political |         | enter last name, first name,<br>ittee or an Independent         | 6. Amount               | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|------------------------|------------------------------|---------|---|-------------------------|---|
| 3. Contribution # 1<br>Name & Address:<br>Lorenzo Cavalie<br>30078 Schoenho<br>Warren, MI 4808 | err Suite 300          | YES 4. Date o                | f Recei | pt 10/18/2023   | <sub>\$</sub> 200       | <sub>\$</sub> 200   |
| 5. If over \$100.00 cum Occupation Manage  |                        | ovide:<br>Employer_Legacy N  | //anac  | ement Services  | Click Here              | for Memo Itemization  |
|  |                        | err Suite 300, Wa            |         |   |                         | _   |
| Type of Contribution:  | Direct                 | Loan from a person           |         | Fund Raiser   |                         |   |
| 3. Contribution #2 Name & Address  | PAC Receipt?           | YES 4. Date of               | f Recei |   |                         |   |
|  |                        |                              |         |   | \$                      | \$  |
| 5. If over \$100.00 cum  | ulative, please pro    | vide:                        |         |   | Click Here              | for Memo Itemization  |
| Occupation   |                        | Employer                     |         |   |                         |   |
| Business Address   |                        |                              |         |   |                         |   |
| Type of Contribution:  | Direct                 | Loan from a person           |         | Fund Raiser   | -                       |   |
| Contribution # 3  Name & Address:  | PAC Receipt?           | YES 4. Date of               | of Rece | ipt   | \$                      | \$  |
| 5. If over \$100.00 cum  | ulative, please pro    | vide:                        |         |   | Click Here f            | or Memo Itemization 🔻   |
| Occupation   |                        | Employer                     |         |   |                         |   |
| Business Address   |                        |                              |         |   |                         |   |
| Type of Contribution:  | Direct                 | Loan from a person           |         | Fund Raiser   |                         |   |
| 3. Contribution # 4 Name & Address   | PAC Receipt?           | YES 4. Date                  | of Rece | eipt  |                         |   |
|  |                        |                              |         |   | \$                      | \$  |
| 5. If over \$100.00 cum  | ulative, please pro    | vide:                        |         |   | Click Here f            | or Memo Itemization   |
| Occupation   |                        | _ Employer                   |         |   |                         |   |
| Business Address   | Direct                 | Loop from a parson           |         | Fund Raiser   |                         |   |
| Type of Contribution.  | Direct                 | Loan from a person           |         | Page Subtotal   | (COOO OO                |   |
|  |                        |                              |         | and Total of All Schedules 1A<br>lete on last page of Schedule) | \$200.00<br>\$29,150.00 |   |
| 27 27  |                        |                              |         |   | Enter this total on     |   |

Page \_\_\_\_\_ of \_\_\_\_

Page.



### ITEMIZED EXPENDITURES **SCHEDULE 1B**

139348 1. Committee I. D. Number

2. Committee Name CTE Liz Sierawski CANDIDATE COMMITTEE 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 08/28/2023 Name FedEx Office s 128.78 Date Printing Address 37160 Van Dyke Ave. Click Here for Memo Itemization Type Sterling Heights, MI 48312 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name American Graphics Printing 08/29/2023 \$ 904.60 Purpose: Printing Date Address 34895 Groesbeck Hwy. Click Here for Memo Itemization Type Clinton Twp, MI 48035 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name United States Postal Service 08/29/2023 \$ 198 Purpose: Postage 7007 Metropolitan Pkwy. Click Here for Memo Itemization Type Sterling Heights, MI 48311 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser Expenditure #4 Name American Polish Century Club 09/21/2023 \$ 125 Purpose: \_Sponsorship Date Address 33204 Maple Lane Click Here for Memo Itemization Type Sterling Heights, MI 48312 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Friends of Dave Coulter 10/06/2023 \$100 Donation Address PO Box 201073 Click Here for Memo Itemization Type Ferndale, MI 48220 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser

Subtotal this page

\$1,456.38

Grand Total of all Schedules 1B (Complete on last page of Schedule) \$4,874.49

Enter this total on line 8a of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

2. Committee Name CTE Liz Sierawski

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information)   | 5. Date         | 6. Amount  |
|--|---|-----------------|--|
| Expenditure #1                                       |   | <u>-</u>        |  |
| Name Office Depot/Office Max                         |   | 10/16/2023      | s 142.02   |
| ·  | Purpose: Office Supplies  | Date            | 172.02   |
| Address<br>44835 Schoenherr                          | Purpose:  |                 |  |
| Sterling Heights, MI 48313                           | Click I   | Here for Memo   | Itemization Type                                 |
| 3 3 .  | Check box if this expenditure is payment of   |                 |  |
| Fund Raiser  | debt or obligation reported on previous statement                                   |                 |  |
| Expenditure #2                                       |   |                 |  |
| Name Macomb Bar Association                          |   | 10/16/2023      | 4000   |
| Macomb Bar 7 Goodlation                              | Empil linto   | Date            | \$ <u>1000</u>                                   |
| Address  | Purpose: Email lists  | Dato            |  |
| 40 North Main St./Room 435                           | Click H   | Here for Memo   | Itemization Type                                 |
| Mount Clemens, MI 48043                              |   |                 |  |
|  | Check box if this expenditure is payment of debt or obligation reported on previous |                 |  |
| Fund Raiser  | statement   |                 | <del></del>                                      |
| Expenditure #3                                       |   |                 |  |
| Name Office Depot/Office Max                         |   | 10/19/2023      | . 170 7 <i>1</i>                                 |
| Address  | Purpose: Office Supplies  | Date            | \$ <u>172.74</u>                                 |
| 44835 Schoenherr                                     | Purpose:  |                 |  |
| Sterling Heights, MI 48313                           | Click F   | lere for Memo I | temization Type                                  |
|  | Check box if this expenditure is payment of   |                 |  |
| Fund Raiser  | debt or obligation reported on previous<br>statement                                |                 |  |
| Expenditure #4                                       |   |                 |  |
| Name FedEx Office                                    |   | 10/19/2023      |  |
|  |   | Date            | \$ 103.35  |
| Address  | Purpose: Printing   | Date            |  |
| 37160 Van Dyke Ave.                                  | Clink   | loro for Momo I | tamization Type                                  |
| Sterling Heights, MI 48312                           |   | iere ior Memo i | temization Type                                  |
|  | Check box if this expenditure is payment of debt or obligation reported on previous |                 |  |
| Fund Raiser  | statement   |                 |  |
| Expenditure #5                                       |   |                 |  |
| Name Penna's of Sterling Heights                     |   | 10/19/2023      |  |
| Address  | <sub>Purpose:</sub> Fundraiser  |                 | \$ <u>2000                                  </u> |
| 38400 Van Dyke Ave.                                  | r ui pose.  |                 |  |
| Sterling Heights, MI 48312                           | · promoner  | lere for Memo I | Itemization Type                                 |
|  | Check box if this expenditure is payment of debt or obligation reported on previous |                 |  |
| Fund Raiser  | statement   |                 |  |
|  | Subto   | tal this page   | \$3,418.11                                       |
|  | Grand Total of all S  |                 | \$4,874.49                                       |
|  | (Complete on last page  | of Schedule)    | ψ4,014.49  |

Enter this total on line 8a of Summary Page



### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 139348

|  |   | mittee Name OTE EIZ GIGTE  |   |
|--|---|--|---|
|  | - USE A SEPARATE SHE  | ET FOR EACH EVENT  | -   |
| 3. Date Event Was Held   | Number of Individuals Attending or Participating (whichever is greater) | 5. Type of Fund Raising Activity                                   | 6. Address and Name (If any) of the place where the activity was held.  Penna's of Sterling |
| 10/18  | 200   | Pasta Dinner   | 38400 Van Dyke Sterling Heights, MI 48312 Private Residence                                 |
| 7. Total Contributions   | \$29,150.00   |  |   |
| 8. Other Receipts  | \$0.00  | 100  |   |
| 9. Gross Receipts (Add lines 7   | and 8) \$29,150.00  |  |   |
| 10. Total Cost of Event<br>(Total Cost includes In-Kind Co   | \$2,000.00 ontributions and All Expenditures                            | Made For the Event)  |   |
| 11. Check if event was a jo  | oint fund raiser and complete the                                       | following:   |   |
| Co-Sponsor(s)  | Contribution S<br>(%)   | plit   | Expenditure Split (%)   |
|  |   |  |   |
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| <ul> <li>period covered by the<br/>Receipts and expendit<br/>Schedule (1A), Itemize<br/>Summary Page.</li> </ul> | ures listed on a Fund Raiser Scl<br>ed In-Kind Contributions Schedu     | nedule must also be reported on<br>le (1-IK), Itemized Expenditure | on the Itemized Contributions<br>as Schedule (1B) and the                                   |
| Each committee that p  | articipated in a joint fund raiser (                                    | must file a Fund Kalser Sched                                      | ule for the event.  |
| Page _1 of _1  |   |  |   |