

CANDIDATE COMMITTEE COVER PAGE

FILED 25 OCT 2023 PM 04:51

MACOMB COUNTY CLERK MT. CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

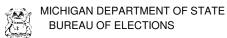
3. This Statement covers From: 07/21/2023 to 10/20/2023 Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. 1. Committee I.D. Number 4. Candidate Last Name First Name M.I. MICHAEL V RADTKE 139377 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name **COUNCIL, STERLING HEIGHTS** CITIZENS FOR MICHAEL RADTKE 4b. County of Residence MACOMB COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 34205 BARRETT VIRGINIA LA ROSA STERLING HEIGHTS, MI 48312 13515 PARKRIDGE SHELBY TWP, MI 48315 Area Code and Phone (586) 873-8427
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (586) 739-8885 be sent to this address by the filing official. 7. Treasurer's Business Address 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) 13515 PARKRIDGE SHELBY TWP, MI 48315 Area Code and Phone (586) 739-8885 Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. Pre-Election OR 9b. Post-Election By checking this item I/We certify any outstanding debt is not on the ballot for the current year: by the committee to the candidate or his or her spouse is here Pre-Election or Post-Election Statement relates to: by discharged and forgiven, and no longer collectible from July Quarterly the committee. The committee has no oustanding assets, Primary owes no lates fees or has any oustanding debt. X October Quarterly General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement (2023) Effective date of dissolution Coverage Year School Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to Caucus Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my\our knowledge and belief the contents are true, accurate and complete. Submitted electronically. Current Treasurer or signature on file 10/25/2023 Designated Record keeper Date Type or Print Name Signature Submitted electronically, 10/25/2023 signature on file Candidate _ Date Signature Type or Print Name

1. Committee I.D. Number 139377

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMMINITIES		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	16 200 00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 16,290.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 16,290.00	(18.) \$ _27,930.00
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.) \$ _16,290.00	(20.) \$ 27,930.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 955.99	(21.) \$ 3,827.92
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.) \$ 387.96	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 387.96	(23.) \$ 12,227.20
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)	(100.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligationsa. Owed by the Committee (Schedule 1E)	(12a.) \$ _30,682.08	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	BALANCE STATEMENT (13.) \$ 12,666.80 (14.) + \$ 16,290.00 (15.) = \$ 28,956.80 (16.) - \$ 387.96 (17.) \$ 28,568.84	*



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

139377 1. Committee I.D. Number

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 07/24/2023 Name & Address: TERESA BOROWSKI 243 HARROW LN SAGINAW, MI 48638	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/24/2023 Name & Address PASHKO UJKIC 38346 PHYLLIS CT STERLING HEIGHTS, MI 48312	\$ 200.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER DODGE PARK CONEY ISLAND Business Address 35252 DODGE PARK RD, STERLING HEIGHTS, MI 48312 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/24/2023 Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	\$300.00	_{\$} 3,146.94
Occupation CONSULTANT Employer WOLVERINE STRATEGIES		
Business Address 13515 PARKRIDGE DR, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/19/2023 Name & Address SOLTIS JOSEPH 301 W LENAWEE ST LANSING, MI 48933	_{\$} 35.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
Page Subtotal	560.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 1 of 20	Enter this total on line 3a of Summary Page.	



SCHEDULE 1A

1. Committee I.D. Number _

139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/21/2023 Name & Address: ALAN CASMERE 28836 PANAMA ST WARREN, MI 48092 5. If over \$100.00 cumulative, please provide:	_{\$} 380.00	_{\$} 750.00
Occupation SELF EMPLOYED Employer FRIENDLY OUTDOOR STORAGE		
Business Address 33400 MAPLE LN DR, STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/21/2023 Name & Address ALAN CASMERE 28836 PANAMA ST	_{\$} 500.00	_{\$} 1,250.00
WARREN, MI 48092	φ	\$
5. If over \$100.00 cumulative, please provide: Occupation SELF EMPLOYED Employer FRIENDLY OUTDOOR STORAGE Business Address 33400 MAPLE LN DR, STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/21/2023 Name & Address: CARL MARLINGA 5228 CARAWAY DR STERLING HEIGHTS, MI 48314	_{\$} 100.00	_{\$_} 100.00
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 09/21/2023 Name & Address CYNTHIA DENARDIS 36664 RIDGECROFT DR STERLING HEIGHTS, MI 48312	§ 50.00	_{\$} _85.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,030.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Schedule)	Enter this total on	

Page 2 of 20



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

139377 1. Committee I.D. Number

CANDIDATE COMMITTEE

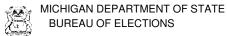
2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 09/21/2023 Name & Address: MICHAEL GILSON 37378 VAN DYKE AVE STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	_{\$} 380.00	_{\$} 380.00
Occupation EXECUTIVE Employer CROSSROADS PLAZA		
Business Address 37378 VAN DYKE AVE, STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/21/2023 Name & Address		
TIMOTHY ZOLLNER 54421 IROQUOIS LN	_{\$} 50.00	_{\$} 150.00
SHELBY TWP, MI 48315		
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/22/2023 Name & Address: STEPHEN PANGORI 8106 ROSEBUD LN CLARKSTON, MI 48348	§ 300.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation CIVIL ENGINEER Employer ANDERSON ECKSTEIN AND WESTRICK		
Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/22/2023 Name & Address NICK NAJJAR 436 MAYAPPLE CT ROCHESTER HILLS, MI 48307	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation REALTOR Employer NEW MICHIGAN REALTY		
Business Address 850 STEPHENSON HWY, TROY, MI 48083		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	830.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
3 20	Enter this total on line 3a of Summary	

Page 5 of 20

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

139377

1. Committee I.D. Number

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/28/2023 Name & Address: JUDY HOLMES		
13516 WHITTIER DR STERLING HEIGHTS, MI 48312	_{\$} 20.00	° 20.00
, and the second se	<u>\$ 20.00</u>	<u>\$ 20100</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/28/2023 Name & Address		
LORENZO CAVALIERE	400.00	
30078 SCHOENHERR RD	_{\$} 100.00	_{\$} 200.00
WARREN, MI 48088		
5. If over \$100.00 cumulative, please provide:		
Occupation REAL ESTATE DEVELOPER Employer CAVALIERE COMPANIES		
Business Address 30078 SCHOENHERR RD, WARREN, MI 48088		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/29/2023		
Name & Address:		
GARY CYNOWA 45451 FIELDING ST	_{\$} 100.00	§ 200.00
MACOMB, MI 48042	\$	\$ 200.00
,		
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/01/2023 Name & Address		
TIMOTHY JONES		
40 SHERBORNE ST	£200.00	, 200.00
SOMERSET, NJ 08873	<u>\$ = 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 </u>	\$
5. If over \$100.00 cumulative, please provide:		
Occupation FINANCE DIRECTOR Employer PWC		
Business Address 300 MADISON AVE, NEW YORK, NY 10017		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	420.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 4 of 20	line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

Enter contributor's name and address. If contribution is from an individual, e	enter last name, first name,	6. Amount	7. Cumulative for
middle initial. Check box to indicate if contribution is from a Political Commit Committee (PAC) Report <u>all</u> contributions regardless of amount.			Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	ot 10/02/2023		data 0.1.000.pt/
JOE DISANO			
2162 BANYON TRAIL EAST LANSING, MI 48823		_s 380.00	_{\$} 380.00
5. If over \$100.00 cumulative, please provide:		\$ 233.33	\$
Occupation CONSULTANT Employer DISANO ST	RATEGIES		
Business Address 5859 W SAGINAW HWY, LANSING			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	t_10/02/2023		
LUKE BONNER			
4875 SAWGRASS DR W		_{\$} 250.00	_{\$} 250.00
ANN ARBOR, MI 48108		·	Ψ
5. If over \$100.00 cumulative, please provide:			
Occupation CEO Employer THE BONNER A	DVISORY GROUP		
Business Address 4875 SAWGRASS DR W, ANN ARE	BOR, MI 48108		
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	ot 10/02/2023		
DOMINIC LA ROSA			
13515 PARKRIDGE DR		_{\$} 380.00	_{\$} 404.99
SHELBY TWP, MI 48315		·	\$ <u> </u>
5. If over \$100.00 cumulative, please provide:			
Occupation ADVERTISING EXECUTIVE Employer SELF EMPL	OYED		
Business Address 13515 PARKRIDGE DR, SHELBY TWP,	MI 48315		
Type of Contribution: Direct Loan from a person	Fund Raiser		
	ipt 10/02/2023		_
Name & Address VIRGINIA LAROSA			
13515 PARKRIDGE DR		1 000 00	1 000 00
SHELBY TWP, MI 48315		_{\$} 1,000.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide:			
Occupation RETIRED Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	2,010.00	
Gra	and Total of All Schedules 1A	,	-
	ete on last page of Schedule)	Enter this total on	J
Page 5 of 20		line 3a of Summary	
Page O of 20		Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

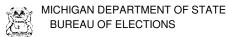
139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/03/2023 Name & Address: VANESSA JOHNSON 6619 RIDGE AVE. , 105 PHILADELPHIA, PA 19128 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution:	_{\$} 100.00	_{\$} 100.00
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/04/2023 Name & Address		
AVIS CHOULAGH 48528 ISOLA DR SHELBY TWP, MI 48315	\$ 200.00	_{\$} 570.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer AVIS CHOULAGH LAW PLLC		
Business Address 32059 UTICA RD, FRASER, MI 48026		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/05/2023 Name & Address: PHILIP RUGGERI 55764 ST REGIS DR SHELBY TWP, MI 48315	\$380.00	_{\$} 750.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer PHILIP P. RUGGERI AND ASSOCIATES		
Business Address 43231 SCHOENHERR RD, STERLING HEIGHTS, MI 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/08/2023 PATRICIA BELANGER 14938 ALMA DR STERLING HEIGHTS, MI 48313	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	780.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 6 of 20	Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

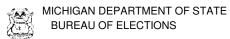
CANDIDATE COMMITTEE

1. Committee I.D. Number ____139377

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/08/2023 Name & Address: JOHN FENN 13288 LILLIAN LN STERLING HEIGHTS, MI 48313 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Business Address	\$ 100.00	_{\$} 200.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/08/2023 Name & Address GLORIA GRZEGORZEWSKI 11136 HANNA DR STERLING HEIGHTS, MI 48312	\$ 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/08/2023 LAURA KASZUBSKI 1096 BROMPTON ROAD ROCHESTER HILLS, MI 48309	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/08/2023 Name & Address JIM MCNULTY 5065 BAYLEAF DR STERLING HEIGHTS, MI 48314	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 7 of 20	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

139377

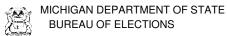
CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2023 Name & Address: JOHN BOLOGNA 19135 SAXON DR BEVERLY HILLS, MI 48025	_{\$} 200.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation REAL ESTATE DEVELOPER Employer BONIES PROPERTY FAMILY PLAZA		
Business Address 33100 SCHOENHERR RD, STERLING HEIGHTS, MI 48312		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/08/2023 Name & Address JOE ORAM	000.00	000 00
4585 ARLINE DR WEST BLOOMFIELD, MI 48323	\$ 200.00	§ 300.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/08/2023 Name & Address: DOMINIC MOCERI 3495 MOCERI COURT ROCHESTER, MI 48306	\$380.00	_{\$} 380.00
5. If over \$100.00 cumulative, please provide:		
Occupation MANAGER Employer MOCERI MANAGEMENT COMPANY Business Address 3005 UNIVERSITY DR, AUBURN HILLS, MI 48326		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/08/2023 Name & Address FREDERICK PERAYEFF 4925 PICKFORD DR TROY, MI 48085	§380.00	_{\$} 380.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	1 100 00	
	1,160.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
0 00	line 3a of Summary	

Page 8 of 20

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

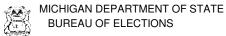
139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/08/2023 Name & Address: JOHN DINKA 37279 FIORE TRAIL CLINTON TWP, MI 48036 5. If over \$100.00 cumulative, please provide: Occupation DENTIST Employer DINKA DENTAL	_{\$} 500.00	_{\$} 1,000.00
Business Address 35100 TIFFANY DR, STERLING HEIGHTS, MI 48312 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/09/2023 Name & Address NATE HATTON 22844 ROXANA AVE EASTPOINTE, MI 48021	_{\$} 150.00	_{\$} 520.00
5. If over \$100.00 cumulative, please provide: Occupation CONDUCTOR Employer AMTRAK Business Address 23908 TALBOT ST, ST CLAIR SHORES, MI 48082 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/09/2023 Name & Address: DENNIS AGUIRRE PO BOX 965 NOVI, MI 48376	\$380.00	_{\$} 380.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer IRON WORKERS LOCAL NO. 25 Business Address P.O. BOX 965, NOVI, MI 48376 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/09/2023 Name & Address MIKEY FOON 520 TALL TREE LN BLOOMFIELD HILLS, MI 48302	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation METALS RECYCLING Employer ADMIRAL METALS		
Business Address 41200 MOUND RD, STERLING HEIGHTS, MI 48314 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	1,230.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page _ of _ 20	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

139377 1. Committee I.D. Number

CANDIDATE COMMITTEE

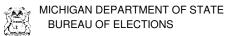
2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/09/2023 Name & Address: CAROLE CHI 35325 MORAVIAN DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 80.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/09/2023 Name & Address CONSTANCE MACIEJEWSKI 11224 FORRER DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer	\$ 200.00	\$ 400.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/10/2023 FRANCESCA STEPHENSON 7409 2ND AVE DETROIT, MI 48202	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 AISHA FAROOQI 34648 FONTANA DR STERLING HEIGHTS, MI 48312	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	370.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page IU of 2U

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: BRIAN HARTWELL 1606 MILLARD AVE MADISON HEIGHTS, MI 48071 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address KASTRIOT CUBI 51705 BEDFORD BLVD. WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 100.00	_{\$} 100.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: DIANE YOUNG 13250 IRVINGTON DR WARREN, MI 48088	_{\$} 50.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation FINANCIAL PLANNER Employer ARROWROOT FAMILY OFFICE Business Address 725 BARCLAY CIR, ROCHESTER HILLS, MI 48307 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address CAROL HOGAN 26653 TOM ALLEN DR WARREN, MI 48089	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 11 of 20	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

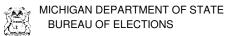
139377 1. Committee I.D. Number

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: AMBER LEE 4727 S KNOLL RD	100.00	200.00
WEST BLOOMFIELD, MI 48323	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer LEGAL EAGLE LEE, PLLC		
Business Address 41000 WOODWARD AVE, STE 350 EAST,, BLOOMFIELD HILLS, MI 48304		
Type of Contribution: Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address		
MIKE HENRY 2311 ARROWWOOD TRAIL	50.00	E0 00
ANN ARBOR, MI 48105	_{\$} 50.00	§ 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: JOEL RUTHERFORD 5683 STORROW CT WARREN, MI 48092	_{\$} 25.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address MELODY MAGEE 25800 TIMBERLINE DR		
WARREN, MI 48091	_{\$} 50.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		1
Page Subtotal	225.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		_
10 00	Enter this total on line 3a of Summary	

Page 12 of 20

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number _

139377

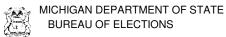
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: DENNIS BRUCK 19637 LLOYD ST CLINTON TWP, MI 48038 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 25.00	_{\$} 45.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address CHALDEAN CHAMBER P.A.C. 30095 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334 5. If over \$100.00 cumulative, please provide: OccupationEmployer	_{\$} 1,000.00	_{\$} 1,000.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: MAZIN SAMONA 1100 W MAPLE RD TROY, MI 48084	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer WILD BILLS TOBACCO Business Address 1100 W MAPLE RD, TROY, MI 48084 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address HIETHEM CHOULAGH 43798 HOLMES DR STERLING HEIGHTS, MI 48314	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	2,125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 13 of 20



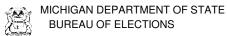
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

139377 1. Committee I.D. Number

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: WILLIAM DECHAVEZ 11922 TAHITI DR STERLING HEIGHTS, MI 48312	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023		
Name & Address ROSE FESSLER 13652 AMANDA DR STERLING HEIGHTS, MI 48313	_{\$} 50.00	_{\$} 70.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: BARBARA GECK 39526 WALDORF DR CLINTON TWP, MI 48038	\$ 100.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address NATHAN INKS 11848 ANGUS CIR STERLING HEIGHTS, MI 48312	_{\$} 250.00	_{\$} _500.00
5. If over \$100.00 cumulative, please provide:		
Occupation LAW CLERK Employer STATE OF MICHIGAN		
Business Address 3034 W GRAND BLVD, DETROIT, MI 48202		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	450.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 14 of 20	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

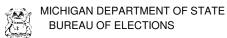
1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: DED JUNCEVIC 52756 BLUERIDGE DR. SHELBY TOWNSHIP, MI 48316	_s 750.00	_{\$} 1,250.00
5. If over \$100.00 cumulative, please provide:	<u> </u>	
Occupation OWNER Employer UTICA VAN DYKE TOWING		
Business Address 43500 UTICA RD, STERLING HEIGHTS, MI 48314		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023		
Name & Address		
MARK J PLAWECKI	E0 00	FO 00
26736 CECILE ST	_{\$} 50.00	_{\$} 50.00
DEARBORN HEIGHTS, MI 48127		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: MICHAEL SCHODOWSKI 29275 STEPHENSON HWY MADISON HEIGHTS, MI 48071	§300.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT Employer SHELVING INC		
Business Address 29275 STEPHENSON HWY, MADISON HEIGHTS, MI 48071		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023		
Name & Address ROB SEMBARSKI 12412 VINEWOOD CT SHELBY TWP, MI 48315	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,150.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 15 of 20	line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

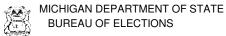
139377

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: IQBAL SINGH P.O. BOX 1281 STERLING HEIGHTS, MI 48311	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address PASHKO UJKIC 38346 PHYLLIS CT STERLING HEIGHTS, MI 48312	\$ 500.00	\$ 800.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer DODGE PARK CONEY ISLAND Business Address 35252 DODGE PARK RD, STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address: BRICKLAYERS LOCAL NO. 1 MICHIGAN PAC 21031 RYAN RD WARREN, MI 48091 5. If over \$100.00 cumulative, please provide:	_{\$} 380.00	_{\$} 580.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/11/2023 Name & Address EIGHTY TWO HUNDRED, LLC 8200 15 MILE RD STERLING HEIGHTS, MI 48312	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,480.00	

Page 16 of 20



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

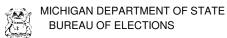
139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/11/2023 Name & Address: SHEET METAL WORKERS LOCAL 80 PAC 17100 W 12 MILE RD SOUTHFIELD, MI 48076 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 380.00	_{\$} 860.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/12/2023 Name & Address MICHAEL HOWARD 23725 BEIERMAN AVE WARREN, MI 48091	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/12/2023 Name & Address: JACKIE KELLY-SMITH 2524 CHALK FARM RD N WARREN, MI 48091	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/12/2023 Name & Address PAUL SLIFCO 36623 MAAS DR STERLING HEIGHTS, MI 48312	_{\$} 200.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER SLIFCO ELECTRIC LLC		
Business Address 6353 E 14 MILE RD, STERLING HEIGHTS, MI 48312 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	730.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 17 of 20	Enter this total on line 3a of Summary Page.	J



SCHEDULE 1A

1. Committee I.D. Number

139377

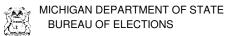
CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/12/2023 Name & Address: MARIE TOKAR 37747 GREGORY DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/13/2023 Name & Address ROBERT GASIOR 1365 NEWTON ST NW WASHINGTON, DC 20010	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation PROGRAM OFFICER Employer NATIONAL ACADEMY OF SCIENCES Business Address 2101 CONSTITUTION AVE. NW, WASHINGTON, DC 20418 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/13/2023 Name & Address: SAMANTHA SHALDA 8432 SAVANNA OAKS ALCOVE ST PAUL, MN 55125	§35.00	§ 35.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/16/2023 Name & Address BARBARA PECKHAM 42217 ARCADIA DR STERLING HEIGHTS, MI 48313	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	385.00	

Page 18 of 20



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

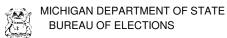
1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/16/2023 Name & Address: JOE SCORDALAKES 34304 BARRETT DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	_{\$} 50.00	_{\$} 50.00
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/16/2023 Name & Address AUDREY SPEZIA 4786 LUCERNE DR STERLING HEIGHTS, MI 48310 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 100.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/19/2023 Name & Address: DEREK MILLER 36630 THOMAS DR STERLING HEIGHTS, MI 48312	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/19/2023 Name & Address IBRAHIM ELZHENNI 42222 POND VIEW DR STERLING HEIGHTS, MI 48314	_{\$} 500.00	_{\$} _500.00
5. If over \$100.00 cumulative, please provide:		
Occupation QUALITY TEAM MANAGER Employer FORD MOTOR CO		
Business Address 42222 POND VIEW DR, STERLING HEIGHTS, MI 48314 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 0 of 0 0	Enter this total on line 3a of Summary Page.	



SCHEDULE 1A

1. Committee I.D. Number _

139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

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 10/19/2023 Name & Address: JOSEPH SOLTIS 301 W LENAWEE ST LANSING, MI 48933	_{\$} 35.00	_{\$} 70.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or 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 Name & Address:		
	\$. \$ <u> </u>
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 # 4 PAC Receipt? YES 4. Date of Receipt		
	\$	\$
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		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	35.00 16,290.00 Enter this total on	

Page 20 of 20



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK 1. Committee I. D. Number 139377 CANDIDATE COMMITTEE 2. Committee Name CITIZENS F

³ Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMM	IITTEE 2. Committee Name 3111 = 11011		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ STERLING FEST 5. Date Of Receipt: 07/29/2023 6. Vendor Name & Address: THE NUT SHELL 4210 82ND ST SW, BYRON CENTER, MI 49315	5.00	\$ 2,876.93
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others-LOAN Description STERLING FEST 5. Date Of Receipt: 07/29/2023 6. Vendor Name & Address: DETROIT WING COMPANY 36741 VAN DYKE AVE, STERLING HEIGHTS, MI 48312	15.00	\$ 2,891.93
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4.	4.00	\$ 2,905.93
	Page Subtotal	34.00	0.00
	Grand Total of all Schedules 1-II (Complete on last page of Schedule)		



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK 1. Committee I. D. Number 139377 CANDIDATE COMMITTEE 2. Committee Name CITIZENS F

² Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMM	IITTEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description EMAIL 5. Date Of Receipt: 08/02/2023 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043	6.00	_{\$} 2,911.93
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4.	 ,	\$ 2,924.65
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$	23.99	3,048.64
	Page Subtot	al 142.71	0.00
	Grand Total of all Schedules 1- (Complete on last page of Schedul		



1. Committee I. D. Number 139377

2 Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMM	IITTEE 2. Committee Name OTTIZETIOTO		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description LEADERSHIP MACOMB EVENT 5. Date Of Receipt: 08/23/2023 6. Vendor Name & Address: BLACK CAT COFFEE 55 MACOMB PL, MT CLEMENS, MI 48043	5.09	\$ 3,053.73
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others-LOAN Description MUSIC IN THE PARK 5. Date Of Receipt: 08/24/2023 6. Vendor Name & Address: GREAT GREEK FOOD TRUCK 40620 UTICA RD, STERLING HEIGHTS, MI 48313	20.00	\$ 3,073.73
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4.	7.42	\$ 3,081.15
	Page Subto	32.51	0.00
	Grand Total of all Schedules 1 (Complete on last page of Schedu		



1. Committee I. D. Number <u>139</u>377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDA I E COMIV	IIIIEE 2. Oommittee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4.	6.00	\$ 3,087.15
Contribution #2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description MEETING 5. Date Of Receipt: 09/05/2023 6. Vendor Name & Address: JOHNNY BLACKS PUBLIC HOUSE 35000 MORAVIAN DR,	35.68	§ 3,122.83
Fund Raiser Contribution	STERLING HEIGHTS, MI 48312		
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4.	52.00	3,374.83
	Page Subtota	293.68	0.00
	Grand Total of all Schedules 1-I (Complete on last page of Schedule		



1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMIN	IIIIIEE 2. Oommiliee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ BMAIL 5. Date Of Receipt: 10/06/2023 6. Vendor Name & Address: ☐ SUITE ☐ 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043	6.00	_{\$} 3,380.83
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others-LOAN Description WEBSITE 5. Date Of Receipt: 10/11/2023 6. Vendor Name & Address: GO DADDY 14455 HAYDEN RD, SCOTTSDALE, AZ 85260	22.17	\$ 3,403.00
Contribution #3 PAC Receipt? Yes Name & Address: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315 If over \$100.00 cumulative, please provide: Occupation: ADVERTISING EXECUTIVE Employer Name & Address: SELF EMPLOYED 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description FUNDRAISER FOOD 5. Date Of Receipt: 10/11/2023 6. Vendor Name & Address:	4.99	\$ 429.98
	Page Subtotal	53.16	429.98
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		



1. Committee I. D. Number 139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDA I E COMIN				
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	Fair M Value	ount or arket	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description FUNDRAISER FOOD 5. Date Of Receipt: 10/11/2023 6. Vendor Name & Address:	\$ 300.	.00	§ 300.00
✓ Fund Raiser Contribution		<u> </u>		
Contribution # 2 Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others-LOA Description ADVERTISING 5. Date Of Receipt: 10/16/2023 6. Vendor Name & Address: FACEBOOK 1 HACKER WAY, MENLO PARK, CA 94025	5 <u>74.00</u> N	<u>O</u> :	3,477.00
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$_ ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ Description MEETING 5. Date Of Receipt: 10/20/2023 6. Vendor Name & Address: THE PUB TC 160 E FRONT ST, TRAVERSE CITY, MI 49684	25.93	\$	3,502.93
	Page Subto	otal 399	9.93	3,802.93

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

955.99

Enter this total

on line 6 of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

<u>-</u> . •			
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CTE MINDY MOORE Address 11530 SHORT DR WARREN, MI 48093	Purpose: FUNDRAISER TICKET	09/06/2023 Date	\$ <u>100.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name 10TH CONGRESSIONAL DISTRICT Address	Purpose: FUNDRAISER TICKET	09/17/2023 Date	\$ <u>20.00</u>
PO BOX 46699 MOUNT CLEMENS, MI 48046	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name MAILCHIMP Address	Purpose: EMAIL SERVICE	09/22/2023 Date	\$ <u>45.33</u>
675 PONCE DE LEON AVE NE ATLANTA, GA 30308			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name FRIENDS OF ROSLYN GRAFSTEIN		09/28/2023 Date	\$ 50.00
Address 29637 SPOON AVE MADISON HEIGHTS, MI 48071	Purpose: FUNDRAISER TICKET	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name ACTBLUEDONATE		10/05/2022	
Address PO BOX 441146	Purpose: PROCESSING FEES	10/05/2023 Date	\$ <u>31.73</u>
SOMERVILLE, MA 02144 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	247.06
	Grand Total of all ((Complete on last page		
		L	



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number

139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name MAILCHIMP		\$ 80.00
	Purpose: EMAIL SERVICE	Date 9 00.00
Address 675 PONCE DE LEON AVE NE	Purpose:	
ATLANTA, GA 30308		
,	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name VANTIV ECOMMERCE		10/11/2023
	DDOCESSING FEES	Date \$ 60.90
Address	Purpose: PROCESSING FEES	
8500 GOVERNORS HILL DR		
SYMMES TWP, OH 45249		
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #3		
Name		•
Address	-	\$
Address	Purpose:	
	Click He	ere for Memo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #4		
Name		
	-	
Address	Purpose:	Date
	Obstati	one for Manya Bandashan Torra
		ere for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #5		
Name		
Address		\$
Address	Purpose:	Dale
	Click H	ere for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
	Subtot	al this page 140.90

387.96 (Complete on last page of Schedule)

Grand Total of all Schedules 1B



1. Committee I.D. Number

139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMMITTEE 2.1	Sommittee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Debt eck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 06/27/2018 6. <u>Original Amount of Debt</u> : \$ 700.00	\$ \$ \$ \$	\$ <u>656.99</u>	\$_43.01 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: $\frac{0}{}$	
Debt #2 Corp? Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 08/24/2018 6. <u>Original Amount of Debt</u> : \$_650.00	\$ \$ \$ \$	\$_0.00	\$_650.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. Date Debt Was Incurred: 12/24/2018 6. Original Amount of Debt: \$485.17	\$ \$ \$ \$ \$	\$ <u>334.73</u>	\$_150.44
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_)
		-	(Outstanding debt) of all Schedules 1E	843.45
(0	Complete on last page of Schedule s	showing amounts owed by c	or to the committee)	Enter this total
				on line 12a "owed by"" or line 12b

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

"owed to" of the Summary Page

Page 1 of 9



1. Committee I.D. Number

139377

00::==	
CANDIDATE	COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Check	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. Date Debt Was Incurred: 01/23/2019 6. Original Amount of Debt: \$497.50	\$ \$ \$ \$	\$ 0.00	\$_497.50 FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ 0	
Debt #2 Corp? Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR	4. Type: IN-KIND 5. Date Debt Was Incurred:	\$ \$		
SHELBY TWP, MI 48315	01/24/2019 6. Original Amount of Debt: \$ 746.25	\$ \$ \$	\$ 0.00	\$_746.25
If bank loan, name of endorser or guarantor:			nount Endorsed: \$)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 04/03/2019 6. <u>Original Amount of Debt</u> : \$ 1,000.00	\$ \$ \$ \$	\$_0.00	\$_1,000.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	0
		Page Subtotal	(Outstanding debt)	2,243.75
(Co	omplete on last page of Schedule s	Grand Total chowing amounts owed by controls	of all Schedules 1E or to the committee)	Enter this total
				on line 12a "owed

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

by"" or line 12b "owed to" of the Summary Page

Page 2 of 9



1. Committee I.D. Number

139377

CONLEGEL IL	
CANDIDATE COMMITTEE	1

2. Committee Name CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Checomology).	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR	4. Type: IN-KIND 5. Date Debt Was Incurred: 09/20/2019	\$ \$		
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt:	\$ \$	\$ 0.00	\$_386.96 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ 0	
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: LOAN	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : 10/18/2019 6. <u>Original Amount of Debt</u> :	<u> </u>	s 0.00	\$ 2,500.00
	\$ 2,500.00	<u> </u>	1 \$ _0.00	FORGIVEN
If bank loan, name of endorser or guarantor:		Am	nount Endorsed: \$_)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND 5. Date Debt Was Incurred:	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	10/19/2019 6. Original Amount of Debt: \$ 3,473.24	\$	\$_0.00	\$ 3,473.24
If bank loan, name of endorser or guarantor:	φ = 0,	\$Ar	mount Endorsed: \$_	FORGIVEN
		Page Subtotal	(Outstanding debt)	6,360.20
(Co	omplete on last page of Schedule s	Grand Total howing amounts owed by c	of all Schedules 1E or to the committee)	Enter this total
				on line 10e "ewed

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

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

Page 3 of 9



1. Committee I.D. Number

139377

00	ULL !
CANDIDATE	COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Check	mittee OR b. Debtsck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 11/25/2019 6. <u>Original Amount of Debt</u> : \$ 2,058.96	\$ \$ \$ \$	\$ 0.00	\$_2,058.96
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ 0	
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR	4. Type: IN-KIND 5. Date Debt Was Incurred:	\$ \$		
STERLING HEIGHTS, MI 48312	07/20/2020 6. Original Amount of Debt: \$ 836.48	\$ \$ \$	\$ 0.00	\$ 836.48
If bank loan, name of endorser or guarantor:			nount Endorsed: \$)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 10/20/2020 6. <u>Original Amount of Debt</u> : \$ 322.97	\$ \$ \$ \$	\$_0.00	\$ 322.97
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	0
		Page Subtotal	(Outstanding debt)	3,218.41
(Co	omplete on last page of Schedule s	Grand Total showing amounts owed by c	of all Schedules 1E or to the committee)	
				Enter this total on line 12a "owed

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

by"" or line 12b "owed to" of the Summary Page

Page 4 of 9



1. Committee I.D. Number

139377

CANDIDATE COMMITTEE 2. Committee Na

CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Checomology).	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR	4. Type: IN-KIND 5. Date Debt Was Incurred: 12/31/2020	\$ \$		
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt:	\$ \$	\$ 0.00	\$ 618.61 FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ 0	
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : 07/18/2021 6. <u>Original Amount of Debt</u> :	\$ \$	s 0.00	s 3,625.96
	\$ 3,625.96	\$ \$	1.2	FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND 5. Date Debt Was Incurred:	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	08/23/2021 6. Original Amount of Debt: \$ 1,227.48	\$	\$_0.00	\$ 1,227.48
If bank loan, name of endorser or guarantor:		\$ Ar	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	5,472.05
(Co	omplete on last page of Schedule s	Grand Total howing amounts owed by c	of all Schedules 1E or to the committee)	Enter this total
				on line 10e "ewed

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

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

Page 5 of 9



1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

CITIZENS FOR MICHAEL RADTKE

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	nmittee OR b. Debte	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the cor	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND 5. Date Debt Was Incurred:			
34205 BARRETT DR	10/17/2021	\$		
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt	\$ \$	\$ 0.00	\$_4,618.98
	\$ <u>4,618.98</u>	· .		FORGIVEN
If bank loan, name of endorser or guarantor:		\$	ount Endorsed: $\frac{0}{2}$)
Debt #2 Corp? Yes Owed to or by:	4. Type: IN-KIND	\$		
MICHAEL RADTKE JR. 34205 BARRETT DR	5. <u>Date Debt Was Incurred</u> : 11/02/2021	\$		
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt:	\$	\$ 0.00	\$_3,362.54
	_{\$} 3,362.54	\$	¥	FORGIVEN
		\$,)
If bank loan, name of endorser or guarantor:	T	Am	ount Endorsed: \$_	<u></u>
Debt #3 Corp? Yes Owed to or by:	4. Type: IN-KIND	\$		
MICHAEL RADTKE JR. 34205 BARRETT DR	5. <u>Date Debt Was Incurred</u> :	\$		
STERLING HEIGHTS, MI 48312	07/20/2022	\$	0.00	s 408.79
	6. Original Amount of Debt:	\$	\$_0.00	T
	\$ <u>+00.73</u>	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	0
		Page Subtotal	(Outstanding debt)	8,390.31
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
				Enter this total on line 12a "owed

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

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

Page 6 of 9



1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Debts eck either a or b. Use only for the pu	s and obligations owed <u>to</u> c rpose checked.)	or forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 10/20/2022	\$ \$		
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt: \$ 821.54	\$ \$	\$ 0.00	\$ 821.54 FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ 0	
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: IN-KIND	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : 12/31/2022 6. <u>Original Amount of Debt</u> :	<u> </u>	\$ 0.00	_{\$} 559.16
	\$ 559.16	\$	\$ 0.00	FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR	4. Type: IN-KIND 5. Date Debt Was Incurred:	\$ \$		
STERLING HEIGHTS, MI 48312	12/31/2022 6. Original Amount of Debt: \$ 105.45	\$	\$_0.00	\$_105.45
If bank loan, name of endorser or guarantor:		\$A	mount Endorsed: \$_	
, , , , , , , , , , , , , , , , , , , ,				1 400 15
		Page Subtota	I (Outstanding debt)	1,486.15
(0	Complete on last page of Schedule s	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	
				Enter this total

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

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

Page 7 of 9



1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name

CITIZENS FOR MICHAEL RADTKE

OANDIDATE OOMINITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. Date Debt Was Incurred: 07/20/2023	\$ \$ \$	\$ 0.00	\$_629.00_
If bank loan, name of endorser or guarantor:	6. Original Amount of Debt: \$ 629.00	\$		FORGIVEN
	1	AIIIC	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: LOAN	\$		
34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : 07/24/2023	\$		
STENLING REIGHTS, WII 40312	6. Original Amount of Debt:	\$ \$	\$_0.00	\$ 300.00
	\$ <u>000.00</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by: VIRGINIA LA ROSA	4. Type: LOAN	\$		
13515 PARKRIDGE DR	5. <u>Date Debt Was Incurred</u> : 10/02/2023	\$		
SHELBY TWP, MI 48315	6. Original Amount of Debt:	\$ \$	\$_0.00	\$_1,000.00
	\$ <u>1,000.00</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	1,929.00
(C	omplete on last page of Schedule s	Grand Total showing amounts owed by c	of all Schedules 1E or to the committee)	
				Enter this total

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

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

Page 8 of 9



1. Committee I.D. Number

139377

CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the common (Chec	mittee OR b. Debtsck either a or b. Use only for the pu	s and obligations owed <u>to</u> o rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	incurred 6. Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR.	4. Type: LOAN	\$		
34205 BARRETT DR	5. <u>Date Debt Was Incurred</u> :	\$		
STERLING HEIGHTS, MI 48312	10/20/2023	\$	0.00	¢ 738.76
	6. Original Amount of Debt	\$	\$ 0.00	\$_738.76
	{\$} 738.76	Ψ		FORGIVEN
	•	\$		
If bank loan, name of endorser or guarantor:	T	Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
	6. Original Amount of Debt	\$	 	\$
	\$	\$	*	D _{EODON/EN}
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	 	\$	\$
	\$	<u> </u>		FORGIVEN
If he called a second of a cardon and a card				
If bank loan, name of endorser or guarantor:		AI	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	738.76
(Co	omplete on last page of Schedule s	Grand Total	of all Schedules 1E or to the committee)	30,682.08
(0.0		- 3		=

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

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

Page 9 of 9



Page 1 of 1

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

139377

2 Committee Name CITIZENS FOR MICHAEL RADTKE

	- USE A SEPAKATE SHI	EET 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. CENTURY BANQUET CENTE
10/11/2023	74	38TH BIRTHDAY BASH	33204 MAPLE LN DR STERLING HEIGHTS, MI 483 Private Residence
. Total Contributions	15,089.99		
. Other Receipts	0.00		
. Gross Receipts (Add lines 7	,		
Total Cost of Event Total Cost includes In-Kind Cor	324.99 ntributions and All Expenditures	Made For the Event)	
1. Check if event was a joint	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)
The committee is require	ed to file a separate Fund Paic	er Schedule for each fund raising	a event held during the
period covered by the C Receipts and expenditu	Campaign Statement.	nedule must also be reported on	the Itemized Contributions