

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONSBALLOT QUESTION COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 08/21/24 To 10/20/241. Committee I.D. Number **140546**4. Committee's Mailing Address **11848 Angus Cir
Sterling Heights, MI 48312**

2. Committee Name

Say Yes Sterling Heights!Area Code and Phone: (313) 919-1527

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

5. Treasurer's Name and Residential Address

**11848 Angus Cir
Sterling Heights, MI 48312**Area Code and Phone (313) 919-1527

6. Treasurer's Business Address

**11848 Angus Cir
Sterling Heights, MI 48312**Area Code and Phone (313) 919-15277. Designated Record Keeper's Name and Mailing Address
(If the committee has a Designated Record Keeper)

Area Code and Phone

8. TYPE OF STATEMENT:

8a. ☒ PRE- ELECTION

OR

☐ POST- ELECTIONPre-Election or Post-Election
Statement relates to:☐ PRIMARY☒ GENERAL☐ SCHOOL☐ SPECIAL☐ OTHER: _____

Date of Election:

11/05/24

8b.

☐ FEBRUARY STATEMENT☐ APRIL STATEMENT☐ JULY STATEMENT☐ OCTOBER STATEMENT8c. ☐ ANNUAL STATEMENT

(____ Coverage Year)

8d:

☐ Post Petition Sample Filing
under MCL 168.483a(Required of Statewide Ballot
Question Committees only after
the submission of a sample petition
prior to circulating the petition)8e. ☐ AMENDMENT TO
CAMPAIGN STATEMENT(Complete Item 8a, 8b, 8c 8d, or 8f
to indicate which Statement is
being amended)8f. ☐ DISSOLUTION OF
COMMITTEE REQUESTEffective Date of Dissolution
_____By checking this item, I certify that
the committee has no assets or
outstanding debts, including late
filing fees. Note: The disposition of
residual funds must be reported on
Schedule 4B and the Summary
Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.**

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or
Designated Record Keeper **Nathan Inks**

Type or Print Name

Signature



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 140546

2. Committee Name Say Yes Sterling Heights!



RECEIPTS		Column I This Period	Column II Cumulative for Election Cycle
3. Contributions			
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$	<u>5,350.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$	<u>5,350.00</u>	(18.) \$ <u>5,350.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$	<u>5,350.00</u>	(20.) \$ <u>5,350.00</u>
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions			
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$	<u>166.66</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$	<u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$	<u>166.66</u>	(21.) \$ <u>166.66</u>
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$	<u>27.46</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$	<u>0.00</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$	<u>0.00</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$	<u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$	<u>27.46</u>	(22.) \$ <u>27.46</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	<u>0.00</u>	(23.) \$ <u>0.00</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	<u>27.46</u>	(24.) \$ <u>27.46</u>
IN-KIND EXPENDITURES			
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$	<u>0.00</u>	(25.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 4E)	(12a.) \$	<u>12.17</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0.00</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	<u>5,350.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) =	<u>5,350.00</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	<u>27.46</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>5,322.54</u>	*

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 140546

2. Committee Name Say Yes Sterling Heights! 

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

4. Date of Receipt 08/26/24

Name & Address:

Nathan Inks
11848 Angus Cir
Sterling Heights, MI 48312

\$ 100.00 \$ \$220.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Senior Law Clerk Employer Michigan Supreme Court

Business Address 3034 W Grand Blvd, Detroit, MI 48202

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt 08/28/24

Name & Address:

Citizens for Radtke
34205 Barrett Dr
Sterling Heights, MI 48312

\$ 1,000.00 \$ 1,000.00

[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 # 3

4. Date of Receipt 09/17/24

Name & Address:

Lisa Stout
40968 Auburndale Dr
Sterling Heights, MI 48313

\$ 10.00 \$ 10.00

[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

4. Date of Receipt 10/02/24

Name & Address:

Barbara Wojtas
44134 Kendyl Dr
Sterling Heights, MI 48314

\$ 20.00 \$ 20.00

[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

Page Subtotal

\$ 1,130.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 140546

2. Committee Name Say Yes Sterling Heights! 

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: James McNulty 5065 Bayleaf Dr Sterling Heights, MI 48314 4. Date of Receipt <u>10/02/24</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>20.00</u>	\$ <u>20.00</u>
		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Dominic Mocerì 3495 Mocerì Ct Rochester, MI 48306 4. Date of Receipt <u>10/04/24</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Mocerì Management Company</u> Business Address <u>3005 University Dr, Auburn Hills, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: The Bonner Advisory Group LLC 4875 Sawgrass Dr W Ann Arbor, MI 48108 4. Date of Receipt <u>10/07/24</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: O'Reilly Rancilio P.C. 12900 Hall Rd, Suite 350 Sterling Heights, MI 48313 4. Date of Receipt <u>10/09/24</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>2,500.00</u>	\$ <u>2,500.00</u>
		Click Here for Memo Itemization	

Page Subtotal

\$3,220.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 140546

2. Committee Name Say Yes Sterling Heights!



Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

4. Date of Receipt 10/11/24

Name & Address:

Mike MacDonald
18890 San Quentin Dr
Lathrup Village, MI 48076

\$ 1,000.00 \$ 1,000.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Civil Engineer Employer Hubbell, Roth & Clark, Inc.

Business Address 555 Hulet Dr, Bloomfield Hills, MI 48302

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

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

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

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

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

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

Page Subtotal

\$1,000.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

\$5,350.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 140546
2. Committee Name Say Yes Sterling Heights!

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: Nathan Inks 11848 Angus Cir Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation Senior Law Clerk Employer Name & Address: Michigan Supreme Court 3034 W Grand Blvd, Detroit, MI 48202 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Nonprofit Corporation Filing Fee</u> 5. DATE OF RECEIPT: <u>08/21/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Department of Licensing & Regulatory Affairs Ottawa Building 611 W Ottawa P.O. Box 30004 Lansing, MI 48909	\$ <u>70.00</u>	\$ <u>70.00</u>
Contribution #2 Name & Address: Nathan Inks 11848 Angus Cir Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation Senior Law Clerk Employer Name & Address: Michigan Supreme Court 3034 W Grand Blvd, Detroit, MI 48202 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>IRS Form 8976 Filing Fee</u> 5. DATE OF RECEIPT: <u>08/23/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Internal Revenue Service 1111 Constitution Ave NW Washington, DC 20224	\$ <u>50.00</u>	\$ <u>120.00</u>
Contribution #3 Name & Address: Michael Radtke Jr. 34205 Barrett Dr Sterling Heights, MI 48315 If over \$100.00 cumulative, please provide: Occupation Consultant Employer Name & Address: Wolverine Strategies 13515 Parkridge Dr Shelby Township, MI 48315 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☒ Goods or Services Purchased by Others - LOAN Description <u>Website Domain Registration</u> 5. DATE OF RECEIPT: <u>08/27/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: GoDaddy 2155 E GoDaddy Way Tempe, AZ 85284	\$ <u>12.17</u>	\$ <u>12.17</u>

Page Subtotal

\$132.17

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number 140546
2. Committee Name Say Yes Sterling Heights!

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: Nathan Inks 11848 Angus Cir Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation Senior Law Clerk Employer Name & Address: Michigan Supreme Court 3034 W Grand Blvd, Detroit, MI 48202 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☒ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Postage Stamps</u> 5. DATE OF RECEIPT: <u>10/10/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ <u>9.49</u>	\$ <u>229.49</u>
Contribution #2 Name & Address: Nathan Inks 11848 Angus Cir Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation Senior Law Clerk Employer Name & Address: Michigan Supreme Court 3034 W Grand Blvd, Detroit, MI 48202 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Website Plan</u> 5. DATE OF RECEIPT: <u>10/15/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Wix.com LTD 5 Yunitsman St Tel Aviv, Israel 6936025	\$ <u>25.00</u>	\$ <u>254.49</u>
Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description 5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS:	\$	\$

Page Subtotal

\$34.49

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

\$166.66

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 140546

2. Committee Name Say Yes Sterling Heights!

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: Stripe Payments Company 354 Oyster Point Blvd South San Francisco, CA 94080	4. Purpose: <u>Processing Fee</u> 5. Ballot Proposal: <u>Pathway to Play and Preservation</u>	<u>09/17/24</u> Date of Expenditure	\$ <u>0.45</u>	\$ <u>0.45</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Macomb</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: ActBlue PO Box 441146 Somerville, MA 02144	4. Purpose: <u>Processing Fee</u> 5. Ballot Proposal: <u>Pathway to Play and Preservation</u>	<u>10/01/24</u> Date of Expenditure	\$ <u>0.15</u>	\$ <u>0.60</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Macomb</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: Stripe Payments Company 354 Oyster Point Blvd South San Francisco, CA 94080	4. Purpose: <u>Processing Fee</u> 5. Ballot Proposal: <u>Pathway to Play and Preservation</u>	<u>10/04/24</u> Date of Expenditure	\$ <u>4.63</u>	\$ <u>5.23</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Macomb</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: Stripe Payments Company 354 Oyster Point Blvd South San Francisco, CA 94080	4. Purpose: <u>Processing Fee</u> 5. Ballot Proposal: <u>Pathway to Play and Preservation</u>	<u>10/11/24</u> Date of Expenditure	\$ <u>22.23</u>	\$ <u>27.46</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Macomb</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		

Subtotal this page

\$27.46

Grand Total of Schedules 4B
(Complete on last page of Schedule)

\$27.46

Enter this total
on Line 8a of
the Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS
SCHEDULE 4E
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 140546
2. Committee Name Say Yes Sterling Heights!

This Schedule itemizes:

(Check either a or b. Use only for the purpose checked.)

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. 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 Owed to or by: Michael Radtke Jr. 34205 Barrett Dr Sterling Heights, MI 48315	4. Type: <u>In-Kind Loan</u> 5. <u>Date Debt Was Incurred</u> <u>08/27/24</u> 6. <u>Original Amount of Debt</u> <u>\$ 12.17</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 12.17</u>
☐ FORGIVEN				
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred</u> _____ 6. <u>Original Amount of Debt</u> <u>\$</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u>
☐ FORGIVEN				
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred</u> _____ 6. <u>Original Amount of Debt</u> <u>\$</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u>
☐ FORGIVEN				
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$12.17

Grand Total of all Schedules 4E

(Complete on last page of Schedule showing amounts owed by or to the committee.)

\$12.17

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