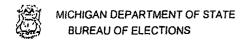
Authority granted under P.A. 388 of 1976

COVER PAGE

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	i signed by andidate.	3. This Statement covers From	Ti 1-1-25 to 7-20-25
1. Committee I.D. Number 69954-50 2. Committee Name 20 mm NTFEE TO REELE DEANNA KOSKI	et	4. Candidate Last Name KOSK 4a. Office Sought Including Di C TY Cou 4b. County of Residence	First Name M.I. EANNA istrict # or Community Served (If applicable)
5. Committee's Mailing Address 15019 HARVEST MEADO STERLING HTS MI 48 Area Code and Phone 586 118 555 If the address in this box is different from the comm mailing address on the Statement of Organization, be sent to this address by the filing official. 7. Treasurer's Business Address 15019 HARVESTMEA STERLING HTS MI	Ittee mail may	Area Code & Phone 586	ential Address KOSKI JEST MEADOWS DR HFS M, 48313 S 718 5559 Is Name and Mailing Address (If the committee has a
Area Code and Phone <u>586</u> 7185		Area Code and Phone	9e.
9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary General Convention Special School Caucus Date of Election, Convention or Caucus	is not on the current year: July Quarte October Quarte 9c. Annual	erly Uarterly I Statement () Coverage Year diment to Campaign Statement elete Item 9a, 9b, 9c or 9e to e which Statement Is being	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution Mote: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
10. Verification: I\We certify that all reasonable diligemy\our knowledge and belief the contents are true, a	ence was used in accurate and con	n the preparation of this stateme	ent and attached schedules (if any) and to the best of
Current Treasurer or Designated Record keeper DEANNA K Type or Print Name Candidate DEANNA Kosk Type or Print Name	BSKi L	Signature Signature Signature	Date 7-23-25

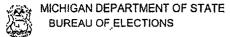


SUMMARY PAGE

1. Committee I.D. Number 69954-50

2. Committee Name Committee to REELECT DEANNA Koski

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$/_ 95, 00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.)\$ 1195.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES	·	
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$545,00	
b. Itemized Get-Out-the-Vote (Schedule 18-G)	(8b.) \$, .
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 5 45.	(23.) \$ 545.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$	
b. Uniternized (less than \$50.01 each - no Schedule)	 	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.)\$	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations	1112 20	
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 6793, 20	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT 75	
 Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 	(13.) \$ 36 Hr	
14. Amount received during reporting period	(14.)+\$ 1/95, DD	
(Line 5, Total Contributions & Other Receipts)	110 11 15	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	•
 Amount expended during reporting period (Add lines 9 and 11) 	(16.) - \$ 545.00	
17. ENDING BALANCE	(10.)- 0	
(Subtract line 16 from line 15)	(17.) s 4321,75.	
	,	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 2, Committee Name DEANNA KOSKI

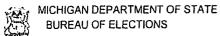
Enter contributor's name an middle initial. Check box to Committee (PAC) Report al	indicate if contribu	ition is from a f	Political Committee			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: KASZUBS 1096 BROI	PAC Receipt? SKI M mpton	YES 4. ARC ROLLE	Date of Receipt D SHEIR Hill	7-1-2 15, M, 48	<u>5</u> '309	, 250, ²	\$ 150,00
5. If over \$100.00 cumulati Occupation Atty Business Address 12	900 HAL	Employer <u>O</u>] SHE	RING H		10 P 3/3	C	
Type of Contribution:	Direct	Loan from a p		und Raiser			
3. Contribution #2 P Name & Address CHARIES 53951 St	PAC Receipt? TURNE THERLAM	VES 4.	Date of Receipt	1-1-25		s 100, 00	s 100,00
5. If over \$100.00 cumulati	ve, please provid	e:				•	
Occupation	Er	mployer					
Business Address				***************************************	· 		
Type of Contribution: D	Direct	Loan from a p	erson F	und Raiser		G.	
3. Contribution #3 P Name & Address: TVRN BUL 53957 SU	AC Receipt? L Jih HER L	YES 4 AND CH	Date of Receipt	7-1-25 , M1 4831	· <u> </u>	s 100,00	s 100,00
5. If over \$100,00 cumulati	ve, please provid	e:					
Occupation		Employer		•	_	nà.	
Business Address					_		
Type of Contribution:	Direct i	Loan from a p	erson [Fund Raiser			
S. Contribution #4 F Name & Address SCOTT 12908 H	PAC Receipt? LAWRE, FAII RA	•	No.	7-1-25 , M. 4831		s 200.	\$200,00°
5. If over \$100.00 cumulation Occupation AHY Business Address 739 Type of Contribution:	od Hall	Employer (O'REILLY Sterline	y RANC SHE MI und Raiser	1 <u>7</u> 10	PC 313	,
The or community.	Direct 1	Loan from a p	elaon L	Page St	ubtotal	1.5A 00	
•				raye o		650.	

Page _____of ____

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

Enter this total on

line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

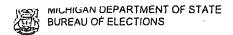
CANDIDATE COMMITTEE

.						·
Enter contributor's name middle initial. Check bo Committee (PAC) Repo	x to indicate if contri	bution is fron	n a Political Commit	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: DEANNA 15079HAR	PAC Receipt? KOSKI VE9FMEF	yes HDOWLS	4. Date of Receip		48313 5455	£ 545,00
5. If over \$100,00 cum Occupation RET						
Business Address						
Type of Contribution:	Direct	Loan from	n a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Receip			
					\$	\$
5. If over \$100.00 cumu	ılative, please prov	ide:				
Occupation		Employer				
Business Address		· · · · · · · · · · · · · · · · · · ·				
Type of Contribution:	Direct	Loan from	a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of Recel	pt		
					\$	\$
5. If over \$100,00 cumu	ılative, please prov	ide:				
Occupation		Employer_				
Business Address						
Type of Contribution:	Direct	Loan fron	a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of Recel	pt		
					\$	\$
5. If over \$100.00 cumu	rlative, please prov	ide:				
Occupation		Employ	er			
Business Address						
Type of Contribution:	Direct	Loan fron	n a person	Fund Raiser		
				Page Subtot	1 545,00	
			Gra (Comple	nd Total of All Schedules 1, ete on last page of Schedul	1195,00	

Enter this total on line 3a of Summary

Page _____ of ____

Page.



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number 69954-50

2. Committee Name Committee TokeElect DEANNA KOSKI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CANDG NEWSPAPER Address /3650 E. // MI/E WARREN, MI	Purpose: NEWSPAPER Ad	<u>1- 1825</u> Date	\$ <u>545</u> 00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		· · · · · · · · · · · · · · · · · · ·
Expenditure #2 Name Address	Purpose:	Date	\$
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser Expenditure #3	statement		
Name			\$
Address	Purpose;	Date	4
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name			
Address	Purpose:	Date	\$
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Address	Purpose:	Date	\$
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
•	Subtota	I this page	54500

Grand Total of all Schedules 18 (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

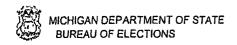


1. Committee I.D. Number 69954-50

2. Committee Name Committee to REELECT DEANDA KOSKI

CANDIDATE COMMITTEE 2.0	ommittee Name Omini 11 CZ	= 10 NECTOG	SINCA INPIL	110011
This Schedule itemizes:			•	
a. Debts and obligations owed by or forgiven the com (Chec	mittee OR b. Debt ck 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 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 quarantors, 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)
Debl #1 Corp? Yes Owed to orby: DEANNA KOSK 15079 HARVEST MEADOWS STERLING HTS, M, 48313	4. Type: FO 5. <u>Date Debt Was Incurred</u> : 1-7-00 6. <u>Original Amount of Debt</u> : \$ 749, 58	\$ \$ \$.\$	\$	\$ 749,58 FORGIVEN
If bank loan, name of endorser or guarantor:	· · · · · · · · · · · · · · · · · · ·	Ame	ount Endorsed: \$ -	
Debt #2 Corp? Yes Owed to arby: DEANNA KOSKI ISO79 HARVEST MEADOWS STERLING HTS M. 48313 If bank loan, name of endorser or guarantor:	4. Type: HDS 5. Date Debt Was Incurred: 10-11-09 6. Original Amount of Debt: \$_486.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$	\$ 486.00 FORGIVEN
Debt #3 Corp? Yes	1 1 Tacul		lount Endorsed. V=	·
OWED TO EATHER HEADOWS 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: CAN by - TREAT 5. Date Debt Was Incurred: 9-31-10 / 10-19-10 6. Original Amount of Debt: \$ 1090 67	\$\$\$	\$	\$/09.67 FORGIVEN
If bank loan, name of endorser or guarantor:		AII	IDUN ENCOISED. 3_	
(Co	implete on last page of Schedule si	Grand Total	(Outstanding debt) of all Schedules 1E r to the committee)	Enter this total on line 12a "owed by" or line 12b
A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during t			osing date of	"owed to" of the Summary Page

Page ____ of ___



1. Committee I.D. Number 69954-50

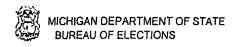
2. Committee Name Committee to REELECT DEANNA KOSKI

CANDIDATE COMMITTEE 2. Co	ommittee Name Committee	e 10 MECIEG	SIMAINEIL	7105/11
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the comments. (Chec	nittee OR b. Debt k either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven by the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or quarantors, 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)
Debl#1 Corp? Yes, Owed to get by: DEANNA KOSKY 15079 HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 4. C = 99 6. Original Amount of Debt: \$ 337.	\$ \$ \$ \$	\$	s <u>337.</u> 20
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed; \$ -	
Debt #2 Owed to or by: DEANNA KOSKI DEANNA KOSKI DEANNA KOSKI DEANNA KOSKI SHERLING HTS MI 48313 If bank loan, name of endorser or guarantor: Debt #3 Owed to or by: DEANNA KOSKI DEANNA KOSKI	\$ 885, 81	\$ \$ \$ \$ \$ \$ \$ Am	\$ount Endorsed: \$_	\$ 885, 81 FORGIVEN
Owed to pray: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313 If bank loan, name of endorser or guarantor:	6-16-60 6. Original Amount of Debt: \$ 700.		\$nount Endorsed: \$_	\$ 900. FORGIVEN
		Grand Total of	(Outstanding debt) of all Schedules 1E	3132.81
(Co	emplete on last page of Schedule s le if there was an outstanding ar	Ĭ.		Enter this total on line 12a "owed by"" or line 12b "owed to" of the

this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Summary Page

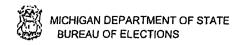
Page ____ of ____



Page _____ of ____

2. Committee Name Comm. HEE to REELECT DEANNA KOSKI

CANDIDATE COMMITTEE 2.5	or and of the state of the stat			7.10=110
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the com-	mittee OR b. Debt	s and obligations owed to or	r forgiven <u>by</u> the cor	nmittee.
(Cher	ck either a or b. Use only for the pu	rpose checked.)		
3. Name and Mailing Address of person, vendor or	4. Type of Obligation	7. Date and amount of	8. Cumulative	9. Outstanding
financial institution to whom debt is owed.	(Description) 5. Indicate date debt was	each payment	payment to date on debt	Balance at close of this period
Check box to indicate whether debt is owed to an	incurred			(Item 6 minus
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	6. Indicate original amount of debt			Item 8)
guarantors, if any.	5. 3.5.			
Debt #1 Corp? Yes	4. Type: NLC			·
Owed to extent to SKY DEANNA KOSKY 15079 HARVEST MEADOWS STERLING HTS, M. 48313	4. Type			·
DEANNI LABITET MEADOWS	5. Date Debt Was Incurred:	\$		
15017 AUNTED WILLIAM	5-24-99	\$		s 241, a
STERLING HTS, MI 40010	6. Original Amount of Debt:		\$	\$ 976
0,2.0	241,00	.\$		FORGIVEN
	1 3 <u>5 2 / / / </u>	\$		
if bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 · Corp? Yes	4. Type: NLC			
Owed to er by:	4. Type: // C	\$		
DEANNA KOSKI 15079 HARVEST MEADOWS	5. Date Debt Was Incurred:	\$		اسه
15079 HARVEST MEADOWS	6-7-79	•		664.13
STERLING HTS MI 48313	1 1 1 1 1 1 1	3	\$	s60/·
STEKLING IIIS MILL	\$ 664, 13	<u> </u>		FORGIVEN
		\$		TORGIVEIT
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	-
Debt #3 Corp? Yes	4. Type: FO	_		·
Owed to or by.	4. Type: 1			
THEANNA KOSKY	5. Date Debt Was Incurred:	<u> </u>		
1299 HADVEST MEADOWS	2-16-99	\$		FORE
DEANNA KOSKI 15079 HARVEST MEADOWS	6. Original Amount of Debt:	· \$	\$	\$ 275:
Sterling Hts Mi 48313	\$ 595, ⁰⁰	2		FORGIVEN
		<u> </u>		1
If bank loan, name of endorser or guarantor:		Arr	ount Endorsed: \$_	
			1	1501,13
		Page Subtotal (Outstanding debt)	1300
		Connd Total o	f all Schedules 1E	1
(Co	implete on last page of Schedule sl	howing amounts owed by or	to the committee)	
•		;		Enter this total on line 12a "owed
		•		by"" or line 12b
A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during t			sing date of	"owed to" of the Summary Page
and a surprigit a series of the series of th	pulled covered by the bullipt			-ammay rago



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•	***			_		,	

1. Committee I.D. Number 69954-50

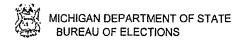
2. Committee Name Committee to REELECT DEANNA ROSKI

CANDIDATE COMMITTEE 2. Co	ommittee Name Committee	= WIECIEG	SULL INPIL	TOSKL
This Schedule itemizes:		,		
a. Debts and obligations owed by or forgiven the compact	nittee OR b. Debt k either a or b. Use only for the pu	s and obligations owed <u>to</u> ourpose checked.)	r forgiven <u>by</u> the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or quarantors, 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)
Debi#1 Owed to or by: DEANNA KOSKI JEANNA KOSKI JEANNA HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: Cost FR 5. Date Debt Was Incurred: 5-15-13 6. Original Amount of Debt: \$ 337. 05	\$ \$ \$ \$	\$	s. <u>337.</u> FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	
Debi#2 Corp? Yes Owed to erby: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS M. 48313	4. Type Cost FR 5. Date Debt Was Incurred: 9-9-15 6. Original Amount of Debt: 5-69-2-196	\$ \$ \$ \$ \$	\$	\$692, FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
DEANNA KOSKI DEANNA KOSKI 15079 HARVEST MEADOWS 3 FERLING HTS MI 48313	4. Type: Cost FR. 5. Date Debt Was Incurred: 10-24-19 6. Original Amount of Debt: \$ 250,00		\$	\$ <u>250,</u> FORGIVEN
If bank loan, name of endorser or guarantor:		Arr	nount Endorsed: \$_	
	nplete on last page of Schedule s	Page Subtotal	(Outstanding debt)	/A 80,°1

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

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

Page _____ of ____



1. Committee I.D. Number 69954-50

2. Committee Name Committee to REE/Ect DEANNA KOSKI

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the common of		s and obligations owed to	or forgiven <u>by</u> the co	nmittee.
	ck either a or b. Use only for the pu	rpose checked.)		
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	Outstanding Balance at close of this period
Check box to indicate whether debt is owed to an	incurred			(Item 6 minus
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	Indicate original amount of debt			Item 8)
guarantors, if any.	0,000			
Debt #1 Corp? Yes Owed to perhaps	4. Type: Ad-NEWS	\$		
TREADUNG KOSKI -	5. Date Debt Was Incurred:	\$		
DEANNA KOSKI 15079 HARVEST MEADOWSDR STERLING HTS, MI 48313	7-18-25	\$		F11500
15079 HANGES 10110313	6. Original Amount of Debt:		\$	\$24J.
STERLING HTS, MI 40010	545 00	<u> </u>		FORGIVEN
,	•	\$, 0,,0,, 2,,
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes		_		
Owed to or by:	4. Type:	<u> </u>		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	<u> </u>		FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
Gwed to di by.	5. Date Debt Was Incurred:	¢		
	J. ADDIC TOLOT IT AS ARCUTTED.			
	6. Original Amount of Debt:	<u> </u>		\$
	O. Original Amount of Debt.	\$	' \$	· · · · · · · · · · · · · · · · · · ·
	\$	•		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtota	il (Outstanding debt)	545,00
		Grand Tota	of all Schedules 1E	6793,20
(Co	emplete on last page of Schedule s	howing amounts owed by	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	 of	
3-	 	