

### CANDIDATE COMMITTEE COVER PAGE

FILED 25 JUL 2025 AM 11:37

MACOMB COUNTY CLERK MT. CLEMENS, MICHIGAN

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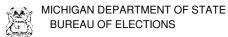
3. This Statement covers From: 01/01/2025 Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. to 07/20/2025 1. Committee I.D. Number 4. Candidate Last Name M.I. **HENRY** YANF7 139728 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name **COUNCIL, STERLING HEIGHTS** CTE HENRY YANEZ 4b. County of Residence MACOMB COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 14052 BERY **HENRY YANEZ** STERLING HGTS, MI 48312 14052 BERY STERLING HGTS, MI 48312 Area Code and Phone (586) 580-1918

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (586) 321-3058 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) 14052 BERY STERLING HGTS, MI 48312 Area Code and Phone (586) 321-3058 Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. X 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, X Primary owes no lates fees or has any oustanding debt. October Quarterly General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement ( 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 08/05/2025 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 07/25/2025 Designated Record keeper Date Type or Print Name Signature Submitted electronically, 07/25/2025 signature on file Candidate Date Signature Type or Print Name

1. Committee I.D. Number 139728

#### **SUMMARY PAGE CANDIDATE COMMITTEE**

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Sumulative this election by the
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 13,441.78	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 13,441.78	(18.) \$ 18,946.78
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.) \$ _13,441.78	(20.) \$ 18,946.78
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 0.00	(21.) \$ 0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0.00	(22.) \$ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 6,773.11	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>50.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 6,823.11	(23.) \$ 12,406.43
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS		
(Add Line 10a + Line 10b)	(11.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed <b>by</b> the Committee (Schedule 1E)	(12a.) \$ 7,786.78	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 3,121.75	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ 13,441.78	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ <u>16,563.53</u>	
<ul><li>15. SUBTOTAL Add lines 13 and 14</li><li>16. Amount expended during reporting period</li></ul>		
(Add lines 9 and 11)	(16.) - \$ 6,823.11	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 9,740.42	•



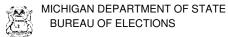
CANDIDATE COMMITTEE 2. C

1. Committee I.D. Number \_\_\_\_139728

2. Committee Name

CTE HENRY YANEZ

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 02/10/2025  Name & Address: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	<sub>\$</sub> 1,500.00	<sub>\$</sub> 7,005.00
5. If over \$100.00 cumulative, please provide:  Occupation COUNCIL MEMBER Employer CITY OF STERLING HEIGHTS  Business Address 40555 UTICA RD, STERLING HEIGHTS, MI 48313  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/25/2025  Name & Address  SHE'S THE FUTURE PAC  P. O. BOX 10043  LANSING, MI 48901	<sub>\$</sub> 100.00	<sub>\$</sub> 100.00
5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address  Type of Contribution:  Loan from a person  Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/20/2025  Name & Address: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	<sub>\$</sub> 750.00	<sub>\$</sub> 7,755.00
5. If over \$100.00 cumulative, please provide:  Occupation COUNCIL MEMBER Employer CITY OF STERLING HEIGHTS  Business Address 40555 UTICA 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 03/31/2025  Name & Address  ANDREW NADHIR  888 W BIG BEAVER RD  TROY, MI 48084	<sub>\$</sub> 2,000.00	<sub>\$_</sub> 2,000.00
5. If over \$100.00 cumulative, please provide:  Occupation DEVELOPER Employer SELF		
Business Address 888 W BIG BEAVER RD, TROY, MI 48084		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)  1 11	4,350.00  Enter this total on line 3a of Summary	-
Page of	Page.	

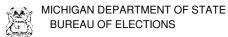


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**CANDIDATE COMMITTEE** 

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/01/2025  Name & Address: WAAD NADHIR  888 W BIG BEAVER RD  TROY, MI 48084	<sub>\$</sub> 2,450.00	<sub>\$</sub> 2,450.00
5. If over \$100.00 cumulative, please provide:  Occupation DEVELOPER Employer SELF  Business Address 888 W BIG BEAVER RD, TROY, MI 48084		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/05/2025  Name & Address  DOUGLAS SHEPHERD  46112 TALLY HO DR  MACOMB, MI 48044	<sub>\$</sub> 200.00	<sub>\$</sub> 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 06/04/2025  Name & Address:  JOE NAGEL  11720 15 MILE RD  APT A-15  STERLING HEIGHTS, MI 48312  5. If over \$100.00 cumulative, please provide:	<sub>\$</sub> 40.00	<sub>\$</sub> 40.00
Occupation UNEMPLOYED Employer		
Business Address  Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/05/2025  Name & Address  PAUL CALMI 7253 RIDGEVIEW LN  WASHINGTON, MI 48095	<sub>\$</sub> 250.00	<sub>\$</sub> 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation CFO Employer CASADEI STRUCTURAL STEEL		
Business Address 40625 MOUND RD, STERLING HEIGHTS, MI 48310		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,940.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 2 of 11	line 3a of Summary Page.	



1. Committee I.D. Number

139728

CTE HENRY YANEZ CANDIDATE COMMITTEE 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/16/2025 Name & Address: **HENRY YANEZ** 14052 BERY DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation COUNCIL MEMBER Employer CITY OF STERLING HEIGHTS Business Address 40555 UTICA RD, STERLING HEIGHTS, MI 48313 Type of Contribution: Direct **Fund Raiser** Loan from a person 3. Contribution #2 YES 4. Date of Receipt 06/22/2025 PAC Receipt? Name & Address RICK MCKIDDY § 50.00 \$ 50.00 43586 PERIGNON DR STERLING HEIGHTS, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation FLIGHT ATTENDANT Employer FRONTIER Business Address 4545 AIRPORT WAY, DENVER, CO 80239 **Fund Raiser** Loan from a person 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/23/2025 Name & Address: RONNIE MCCABE \$ 40.00 \$ 40.00 34546 MAPLE LN DR STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer **Business Address** Direct Type of Contribution: Loan from a person **Fund Raiser** 3. Contribution # 4 PAC Receipt? 4. Date of Receipt 06/23/2025 Name & Address WAAD TALLOU 38306 SLEIGH DR <sub>s</sub> 140.00 <sub>s</sub> 140.00 STERLING HEIGHTS, MI 48310 5. If over \$100.00 cumulative, please provide: Occupation\_BUSINESS OWNER **Employer METRO PRINTS** Business Address 5580 GATEWOOD DR, STERLING HEIGHTS, MI 48310

> Page Subtotal 261.78

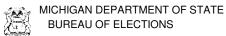
Grand Total of All Schedules 1A (Complete on last page of Schedule)

**Fund Raiser** 

Loan from a person

Enter this total on line 3a of Summary Page.

Type of Contribution: | | Direct

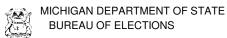


1. Committee I.D. Number

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**CANDIDATE COMMITTEE** 

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/23/2025  Name & Address: ERIC SHEPHERD  15335 SPRUCE DR  MACOMB, MI 48044	<sub>\$</sub> 80.00	<sub>\$</sub> 80.00
5. If over \$100.00 cumulative, please provide:  Occupation JUDGE Employer 41-A DISTRICT COURT  Business Address 40111 DODGE PARK RD, STERLING HEIGHTS, MI 48313  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/23/2025  Name & Address  GEORGE ESCHENBURG  11739 WHEATON DR  STERLING HEIGHTS, MI 48313	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:  Occupation HELP DESK Employer EDUSTAFF  Business Address 4120 BROCKTON DR SE, GRAND RAPIDS, MI 49512  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/2025  Name & Address:  LEA KACZANOWSKI 14587 TOPSAIL DR NAPLES, FL 34114	\$80.00	<sub>\$</sub> 80.00
5. If over \$100.00 cumulative, please provide:  Occupation NOT EMPLOYED Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/2025  Name & Address  JAMES DENARDIS  36664 RIDGECROFT DR  STERLING HEIGHTS, MI 48312	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:  Occupation NOT EMPLOYED 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)  Page 4 of 11	Enter this total on line 3a of Summary Page.	_

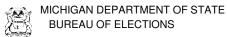


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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/24/2025  Name & Address: RICHARD BROUGHTON 13866 BISCAYNE DR STERLING HEIGHTS, MI 48313	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:  Occupation NOT EMPLOYED Employer		
Business Address  Type of Contribution:   Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/2025		
Name & Address JOANNA DENNIS 38750 MONTEREY DR STERLING HEIGHTS, MI 48312	<sub>\$</sub> 40.00	<sub>\$</sub> 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation TEACHER Employer WARREN WOODS		
Business Address 12900 FRAZHO RD, WARREN, MI 48089		
Type of Contribution:  Loan from a person Fund Raiser  3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/25/2025		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/25/2025  WALLACE BRONSON 36239 MELBOURNE DR STERLING HEIGHTS, MI 48312	<sub>\$</sub> 70.00	<sub>\$</sub> 70.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address  Type of Contribution:	_	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address  JAMES MOSLEY  4805 N HEMPSTEAD CT  STERLING HEIGHTS, MI 48310	<sub>\$</sub> 140.00	<sub>\$</sub> _140.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 5 of 11	Enter this total on line 3a of Summary Page.	

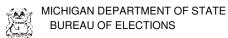


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**CANDIDATE COMMITTEE** 

1. Committee I.D. Number

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address: ROBERT PHILLIPS 21977 HIGHLANDS DR MACOMB, MI 48044	<sub>\$</sub> 100.00	<sub>\$</sub> 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation FINANCIAL ADVISOR Employer JP MORGAN WEALTH MANAGEMENT		
Business Address 480 PIERCE ST, BIRMINGHAM, MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address		
TERI DENNINGS		
P. O. BOX 46528	<sub>\$</sub> 40.00	<sub>\$</sub> 40.00
MOUNT CLEMENS, MI 48046	φ	\$ <u></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 # 3 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address:  MARC KASZUBSKI 1096 BROMPTON RD  ROCHESTER HILLS, MI 48309	\$ 100.00	<sub>\$</sub> 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer O'REILLY RANCILIO P.C.		
Business Address 12900 HALL 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 06/26/2025		
Name & Address CONNOR BERDY 11259 PAIGE AVE WARREN, MI 48089	<sub>\$</sub> 40.00	<sub>\$</sub> _40.00
5. If over \$100.00 cumulative, please provide:		
Occupation SELF EMPLOYED Employer SELF		
Business Address 11259 PAIGE AVE, WARREN, MI 48089		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	280.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	ا
Page 6 of 11	line 3a of Summary Page.	

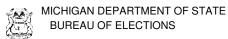


#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number

139728

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address: YVONNE D KNIAZ  14016 PERNELL DR STERLING HEIGHTS, MI 48313	<sub>\$</sub> 100.00	<sub>\$</sub> 100.00
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 #2 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address		
CHRISTINE PIERCE 891 N CHANNEL DR HARSENS ISLAND, MI 48028	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution:  Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address:  ROBERT BECKER  40847 COLONY DR  STERLING HEIGHTS, MI 48313	<sub>\$</sub> 100.00	<sub>\$</sub> _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/26/2025		
Name & Address PHILIP PANNECOUCK 38347 CHARWOOD DR STERLING HEIGHTS, MI 48312	<sub>\$</sub> 50.00	<sub>\$_</sub> 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	300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Entor this total as	
Page 7 of 11	Enter this total on line 3a of Summary Page.	



### SCHEDULE 1A

1. Committee I.D. Number

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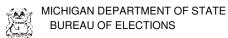
CANDIDATE COMMITTEE

2. Committee Name CTE HENRY YANEZ

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address: THOMAS SZATKOWSKI 33229 VICEROY DR STERLING HEIGHTS, MI 48310  5. If over \$100.00 cumulative, please provide: Occupation Employer	<sub>\$</sub> 60.00	<sub>\$</sub> 60.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address  MICHAEL NOTTE  48728 JAMIE CIR  SHELBY TWP, MI 48317	\$ 40.00	<sub>\$</sub> 40.00
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 06/26/2025  NICK NAJJAR  850 STEPHENSON HWY  TROY, MI 48083	<u>\$ 100.00</u>	<sub>\$</sub> 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation BUSINESS OWNER Employer SELF		
Business Address 850 STEPHENSON HWY, TROY, MI 48083  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address  PAUL MANNI 42778 FLIS DR STERLING HEIGHTS, MI 48314	<sub>\$</sub> 50.00	<sub>\$</sub> 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  Grand Total of All Schedules 1A (Complete on last page of Schedule)	250.00  Enter this total on	

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Enter this total on line 3a of Summary Page.

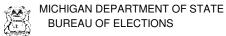


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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/26/2025  NANCY SZATKOWSKI  BLOSSOM LN  CLINTON TWP, MI 48038	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address		
SCOTT LOCKWOOD 950 SOUTHDOWN RD BLOOMFIELD HILLS, MI 48304	\$ 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation ENGINEER Employer ANDERSON ECKSTEIN & WESTRICK		
Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address:  STEPHEN PANGORI  8106 ROSEBUD LN  CLARKSTON VLG, MI 48348	<sub>\$</sub> 200.00	<sub>\$</sub> 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation ENGINEER Employer ANDERSON ECKSTEIN & 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 06/26/2025  Name & Address  BRUCE KENNEDY  40651 RIVERBEND DR  STERLING HEIGHTS, MI 48310	<sub>\$</sub> 50.00	<sub>\$</sub> _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	500.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 9 of 11	line 3a of Summary Page.	



1. Committee I.D. Number

139728

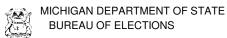
**CANDIDATE COMMITTEE** 

2. Committee Name CTE HENRY YANEZ

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 06/26/2025  Name & Address: DOUGLAS SHEPHERD  46112 TALLY HO DR  MACOMB, MI 48044	<sub>\$</sub> 200.00	<sub>\$</sub> 400.00
5. If over \$100.00 cumulative, please provide:  Occupation RETIRED Employer		
Business Address  Type of Contribution:   Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/26/2025  Name & Address  PIYUSH ANAM  5361 LIVERNOIS RD  TROY, MI 48098	<sub>\$</sub> 200.00	<sub>\$</sub> 200.00
5. If over \$100.00 cumulative, please provide:  Occupation BUILDER Employer SELF  Business Address 5361 LIVERNOIS RD, TROY, MI 48098  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/28/2025  Name & Address:  DIANE HUDSON 28173 COTTONWOOD CT CHESTERFIELD, MI 48047	\$ 50.00	<sub>\$</sub> 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 06/28/2025  Name & Address  DINO JUNCAJ  43500 UTICA RD  STERLING HEIGHTS, MI 48314	<sub>\$</sub> 2,000.00	<sub>\$</sub> 2,000.00
5. If over \$100.00 cumulative, please provide:  Occupation BUSINESS OWNER Employer UTICA VAN DYKE TOWING  Business Address 43500 UTICA RD, STERLING HEIGHTS, MI 48314		
Type of Contribution: Loan from a person Fund Raiser  Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)	2,450.00  Enter this total on line 3a of Summary	

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line 3a of Summary Page.



## SCHEDULE 1A

1. Committee I.D. Number

139728

CANDIDATE COMMITTEE

2. Committee Name CTE HENRY YANEZ

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 07/08/2025  VERONICA PAIZ  20052 HUNT CLUB DR  HARPER WOODS, MI 48225	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100.00 cumulative, please provide:  Occupation  STATE REPRESENTATIVE Employer MICHIGAN HOUSE OF REPRESENTATIVES		
Business Address P. O. BOX 30014, LANSING, MI 48909		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/12/2025  Name & Address		
REALTORS PAC OF MICHIGAN I 720 N WASHINGTON AVE LANSING, MI 48906	\$ 500.00	<sub>\$</sub> 500.00
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 07/12/2025  Name & Address:  REGISTRARS PAC LOCAL 58 IBEW  1358 ABBOTT ST  DETROIT, MI 48216	\$ 1,000.00	<sub>\$</sub> 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address  Type of Contribution:		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt  Name & Address	-	
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Cilidit Flore 10	. Monte nonneadon
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota  Grand Total of All Schedules 1A  (Complete on last page of Schedule)	1,550.00 13,441.78	

Page 11 of 11

Enter this total on line 3a of Summary Page.



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number 139728

2. Committee Name CTE HENRY YANEZ

			· · · · · · · · · · · · · · · · · · ·
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name MACOMB COUNTY CLERK/REGISTER OF DEEDS		02/10/2025	
MACONID COOKET CELETIVITE GIOTEIT OF BEEDO	EINIEO		\$ <u>1,500.00</u>
Address	Purpose: FINES	Date	
120 N MAIN ST			
MT CLEMENS, MI 48043			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #2			
Name MICHIGAN DEMOCRATIC PARTY		03/20/2025	• 7EO OO
	4 00 F00 T0 VAN	Date	\$ <u>750.00</u>
Address	Purpose: ACCESS TO VAN	Date	
606 TOWNSEND ST			
LANSING, MI 48933			
	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name BLAZE INVESTMENTS LLC			
DLAZE INVESTIVIENTS LLC		06/06/2025	\$ 866.81
Address	Purpose: DOOR HANGERS	Date	
115 W ALLEGAN ST	1 diposo.		
LANSING, MI 48933			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #4			
Name POLISH CENTURY CLUB		06/15/2025	
. 02.01. 02.11.011. 02.02			\$ 150.00
Address	Purpose:	Date	
33204 MAPLE LN DR			
STERLING HEIGHTS, MI 48312			
,	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name VOLLIC			
Name KOHL'S		06/16/2025	¢ 21 70
Address	Purpose: CAMPAIGN SHIRTS	Date	\$ <u>31.78</u>
44200 SCHOENHERR RD	- F-551		
STERLING HEIGHTS, MI 48313			
•	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	otal this page	3,298.59
	Grand Total of all	Schedules 1B	
	(Complete on last page		

Enter this total on line 8a of Summary Page



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number 139728

2. Committee Name CTE HENRY YANEZ

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name SAWICKI & SON		06/20/2025	± 1 026 62
CANTOIN & CON	Purpose: 2 X 6 SIGNS	Date	\$ <u>1,936.6</u> 2
Address 1521 W LAFAYETTE BLVD	Purpose: Z X O SIGNS	24.0	
DETROIT, MI 48216			
DETITION, WII 40210	Check box if this expenditure is payment of		
Cond Daises	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name ACT BLUE		06/26/2025	\$ 21.90
	Purpose: FEES	Date	Ψ <u>Ζ1.50</u>
Address	Purpose: I LLO		
366 SUMMER ST			
SOMERVILLE, MA 02144			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name CENTURY BANQUET CENTER		07/01/2025	
OLIVIONI BANGOLI OLIVILIN			\$ <u>780.00</u>
Address 33204 MAPLE LN DR	Purpose: FUNDRAISER DINNER	Date	
STERLING HEIGHTS, MI 48312			
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name ACT BLUE		07/08/2025	
	FFFC	Date	\$ <u>0.75</u>
Address	Purpose: FEES	- 5.1.0	
366 SUMMER ST			
SOMERVILLE, MA 02144			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name IMAGE AMERICA			
IIVIAGE AWEI IIOA	L AVAINT CLONIC	07/09/2025	\$ 500.00
Address	Purpose: LAWN SIGNS	Date	000.00
44479 PHOENIX DR			
STERLING HEIGHTS, MI 48314	Check box if this expenditure is payment of		
Fund Baiser	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	3,239.27
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	

Enter this total on line 8a of Summary Page



# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139728

2. Committee Name CTE HENRY YANEZ

2. 0	ommittee rame		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			<del></del>
		07/10/2025	
Name WIX		07/12/2025	\$ 235.25
	Purpose: WEBSITE	Date	
Address	Purpose: VVLDSIIL	24.0	
235 W 23 ST			
NEW YORK, NY 10011			
	<u> </u>		
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #2			
Name			
Name			\$
		Date	·
Address	Purpose:		
	Click	Here for Memo	Itemization Type
			,,
	Check box if this expenditure is payment of	;	
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Exponditure no			
Name			
			\$
Address		Date	· <del></del>
Address	Purpose:		
	Ol' I		
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	;	
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Experialitare #4			
Name			
			\$
Addison		Date	<u> </u>
Address	Purpose:		
	Click	Here for Memo	Itemization Type
			• •
	Check box if this expenditure is payment of		
Final Daises	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
			\$
Address	Purpose:	Date	· ——
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
<u> </u>	Statement		
	Subt	otal this page	235.25
			200.20
	Grand Total of all	Schedules 1B	6 772 11

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



## DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

139728

SCHEDULE 1E	CTF HF	NRY YANEZ		
CANDIDATE COMMITTEE 2. C.	ommittee Name OTLITE			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the common (Check	mittee <b>OR</b> b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the cor	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 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: HENRY YANEZ 14052 BERY DR	4. Type: LOAN  5. <u>Date Debt Was Incurred</u> :	\$		
STERLING HEIGHTS, MI 48312	03/01/2022 6. Original Amount of Debt: \$ 1,500.00	\$	\$ 0.00	\$_1,500.00
If bank loan, name of endorser or guarantor:		\$ Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: LOAN  5. Date Debt Was Incurred: 03/09/2022  6. Original Amount of Debt: \$ 5.00	\$ \$ \$ \$ \$	\$ 0.00	\$_5.00
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. Date Debt Was Incurred:  03/29/2022 6. Original Amount of Debt:  \$ 500.00	\$ \$ \$ \$	\$_0.00	\$ 500.00
If bank loan, name of endorser or guarantor:	\$_500.00	\$A	mount Endorsed: \$_	FORGIVEN
		Page Subtotal	I (Outstanding debt)	2,005.00
(Co	omplete on last page of Schedule s	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	

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 1 of 3



## DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

139728

SCHEDULE 1E	CTE HE	NRY YANEZ	7	
CANDIDATE COMMITTEE 2. C	ommittee Name	INITI I AINLE	<u>-</u>	
This Schedule itemizes:				
Debts and obligations owed <u>by</u> or forgiven the compact (Chec	mittee <b>OR</b> b. Debt ck either a or b. Use only for the pu	es and obligations owed <u>to</u> urpose checked.)	or forgiven <u>by</u> the cor	mmittee.
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: HENRY YANEZ 14052 BERY DR	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 02/08/2023	\$	-	
STERLING HEIGHTS, MI 48312	6. Original Amount of Debt:  \$ 2,000.00	\$ \$ \$	\$ 0.00	\$_2,000.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	- mount Endorsed: \$ —	
Debt #2 Corp? Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 01/19/2024 6. <u>Original Amount of Debt</u> : \$\frac{1,500.00}{}	\$ \$ \$ \$ \$	\$_0.00	\$_1,500.00
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> :	\$ \$ \$ \$	\$_0.00	\$_1,500.00
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
		Page Subtot	tal (Outstanding debt)	5,000.00
(C.	omplete on last page of Schedule	Grand Tota	al of all Schedules 1E	

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 2 of 3



## DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

139728

CTE HENRY YANEZ 2. Committee Name **CANDIDATE COMMITTEE** This Schedule itemizes: a Debts and obligations owed by or forgiven the committee Debts and obligations owed to or forgiven by the committee. OR (Check either a or b. Use only for the purpose checked.) 4. Type of Obligation 7. Date and amount of 3. Name and Mailing Address of person, vendor or 8. Cumulative 9. Outstanding financial institution to whom debt is owed. (Description) each payment payment to Balance at close 5. Indicate date debt was of this period date on debt (Item 6 minus Check box to indicate whether debt is owed to an incurred incorporated business. If debt is a bank loan, please 6. Indicate original amount Item 8) provide information regarding the endorsers or of debt guarantors, if any. Debt #1 Corp? Yes 4. Type: LOAN Owed to or by: HENRY YANEZ 5. Date Debt Was Incurred: 14052 BERY DR 03/20/2025 STERLING HEIGHTS, MI 48312 \$ 750.00 \$ 0.00 6. Original Amount of Debt: 750.00 **FORGIVEN** If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 4. Type: LOAN Owed to or by: HENRY YANEZ \$ 5. Date Debt Was Incurred: 14052 BERY DR 06/16/2025 STERLING HEIGHTS, MI 48312 \$ 31.78 6. Original Amount of Debt: \$ 0.00 \$ \$ 31.78 **FORGIVEN** \$ If bank loan, name of endorser or quarantor: Amount Endorsed: \$-Debt #3 Corp? Yes 4. Type: \$ Owed to or by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ 781.78 Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E 7.786.78 (Complete on last page of Schedule showing amounts owed by or to the committee) Enter this total on line 12a "owed by"" or line 12b A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of "owed to" of the

Summary Page

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

Page 3 of 3



### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 139728

	- USE A SEPARATE SH	EET FOR EACH EVENT	-	
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	
6/26/2025	50	DINNER	33204 MAPLE LN DR STERLING HEIGHTS, MI 4831 Private Residence	
Fotal Contributions	4,910.00			
Other Receipts	0.00			
Gross Receipts (Add lines 7	and 8) 4,910.00			
Total Cost of Event	780.00  ntributions and All Expenditures	s Made For the Event		
	int fund raiser and complete the			
		e following:	Expenditure Split (%)	
Check if event was a jo	int fund raiser and complete the	e following:		
Check if event was a jo	int fund raiser and complete the	e following:		
Check if event was a jo	int fund raiser and complete the	e following:		
Check if event was a jo	int fund raiser and complete the	e following:		
Check if event was a jo	int fund raiser and complete the	e following:		
Check if event was a jo	int fund raiser and complete the	e following:		

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

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Page	- 1	of I	