



FILED

03 SEP 2025 AM 10:57

MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 07/21/2025 to 08/25/2025

1. Committee I.D. Number

139728

4. Candidate Last Name

First Name

M.I.

YANEZ

HENRY

4a. Office Sought Including District # or Community Served (If applicable)

COUNCIL, STERLING HEIGHTS

4b. County of Residence **MACOMB COUNTY**

2. Committee Name

CTE HENRY YANEZ

5. Committee's Mailing Address

**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 be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

**HENRY YANEZ
14052 BERY
STERLING HGTS, MI 48312**

Area Code & Phone (586) 321-3058

7. Treasurer's Business Address

**14052 BERY
STERLING HGTS, MI 48312**

Area Code and Phone (586) 321-3058

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone () -

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

08/05/2025

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement ()
Coverage Year

9d. ☐ Amendment to Campaign Statement
(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

☐ 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 outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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.

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

09/03/2025

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

09/03/2025



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139728

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE HENRY YANEZ

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>4,357.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>4,357.00</u>	(18.) \$ <u>23,303.78</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>4,357.00</u>	(20.) \$ <u>23,303.78</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,956.90</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>2.08</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1,958.98</u>	(23.) \$ <u>14,365.41</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>7,786.78</u>	
b. Owed to the Committee (Schedule 1E)	(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>9,740.42</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>4,357.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>14,097.42</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,958.98</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>12,138.44</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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? <input type="checkbox"/> YES 4. Date of Receipt <u>07/25/2025</u> Name & Address: E. PAUL JACOBSON 40 W. HOWARD ST STERLING HEIGHTS, MI 48310		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>07/28/2025</u> Name & Address: STERLING HEIGHTS FIRE FIGHTERS UNION LOCAL 1557 PAC 38911 VAN DYKE AVE STERLING HEIGHTS, MI 48313		\$ <u>1,557.00</u>	\$ <u>1,557.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>08/05/2025</u> Name & Address: COMCAST CORP & NBCUNIVERSAL PAC - USA ONE COMCAST CENTER 1701 JOHN F KENNEDY BLVD PHILADELPHIA, PA 19103		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>08/05/2025</u> Name & Address: UAW MICHIGAN V-PAC 8000 E JEFFERSON AVE DETROIT, MI 48214		\$ <u>2,500.00</u>	\$ <u>2,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 4,307.00

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**

1. Committee I.D. Number 139728
2. Committee Name CTE HENRY YANEZ

<small>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.</small>		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/05/2025</u> Name & Address: DIANE L YOUNG 725 BARCLAY CIR ROCHESTER HILLS, MI 48307		\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			



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 MICROSOFT Address ONE MICROSOFT WAY REDMOND, WA 98052 <input type="checkbox"/> Fund Raiser	Purpose: MICROSOFT OFFICE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	07/25/2025 Date	\$ 105.99
Expenditure #2 Name SAWICKI & SON Address 1521 W LAFAYETTE BLVD DETROIT, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: YARD SIGNS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	07/26/2025 Date	\$ 500.00
Expenditure #3 Name SIGNATURE IMAGEWARE Address 27611 HALSTED RD FARMINGTON HILLS, MI 48331 <input type="checkbox"/> Fund Raiser	Purpose: T-SHIRTS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/08/2025 Date	\$ 290.00
Expenditure #4 Name YVONNE D KNIAZ Address 14016 PERNELL DR STERLING HEIGHTS, MI 48313 <input type="checkbox"/> Fund Raiser	Purpose: BOOKKEEPING <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/08/2025 Date	\$ 35.00
Expenditure #5 Name MACOMB COUNTY DEMOCRATIC COMMITTEE Address 176 S MAIN ST SUITE 4 MT CLEMENS, MI 48043 <input type="checkbox"/> Fund Raiser	Purpose: MEMBERSHIP <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/16/2025 Date	\$ 100.00

Subtotal this page

1,030.99

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

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 INLAND PRESS Address 2001 W LAFAYETTE BLVD DETROIT, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>DOOR HANGERS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/19/2025</u> Date	\$ <u>857.01</u>
Expenditure #2 Name OFFICE DEPOT Address 44835 SCHOENHERR RD STERLING HEIGHTS, MI 48313 <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/21/2025</u> Date	\$ <u>68.90</u>
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
	Click Here for Memo Itemization Type		
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
	Click Here for Memo Itemization Type		
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
	Click Here for Memo Itemization Type		

Subtotal this page	925.91
Grand Total of all Schedules 1B (Complete on last page of Schedule)	1,956.90

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139728
2. Committee Name CTE HENRY YANEZ

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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 endorser 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? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>03/01/2022</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,500.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>1,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>03/09/2022</u> 6. <u>Original Amount of Debt:</u> \$ <u>5.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>5.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>03/29/2022</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

2,005.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by 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



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139728
2. Committee Name CTE HENRY YANEZ

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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 endorser 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? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>02/08/2023</u> 6. <u>Original Amount of Debt:</u> \$ <u>2,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>2,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>01/19/2024</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,500.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>1,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>02/10/2025</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,500.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>1,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

5,000.00

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 by" or line 12b "owed 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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139728
2. Committee Name CTE HENRY YANEZ

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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 endorser 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? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>03/20/2025</u> 6. <u>Original Amount of Debt:</u> \$ <u>750.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>750.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: HENRY YANEZ 14052 BERY DR STERLING HEIGHTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>06/16/2025</u> 6. <u>Original Amount of Debt:</u> \$ <u>31.78</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>31.78</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

781.78

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

7,786.78

Enter this total
on line 12a "owed
by" or line 12b
"owed 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.