



**CANDIDATE 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) and candidate.

1. Committee I.D. Number 69954-50		3. This Statement covers From: <u>10-20-25</u> to <u>11-24-25</u>		
2. Committee Name COMMITTEE TO RE ELECT DEANNA KOSKI		4. Candidate Last Name KOSKI First Name DEANNA M.I. 4a. Office Sought Including District # or Community Served (If applicable) CITY COUNCIL		
5. Committee's Mailing Address 15079 HARVEST MEADOWS DR. STERLING HTS. MI. 48313 Area Code and Phone <u>586-718-5559</u> 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 DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS. MI. 48313 Area Code & Phone <u>586-718-5559</u>		
7. Treasurer's Business Address 15079 HARVEST MEADOWS STERLING HTS. MI. 48313 Area Code and Phone <u>586-718-5559</u>		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. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: Primary General <input checked="" type="checkbox"/> Convention Special School Caucus Date of Election, Convention or Caucus <u>11-4-25</u>		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. 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 <u>11-12-25</u> 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 <u>DEANNA KOSKI</u> Type or Print Name _____ Signature _____ Date <u>11/12/25</u> Candidate <u>DEANNA KOSKI</u> Type or Print Name _____ Signature _____ Date <u>11/12/25</u>				



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

SUMMARY PAGE
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50

2. Committee Name Committee to RE ELECT DEANNA KOSKI

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>10333.28</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>10333.28</u>	
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>10333.28</u>	
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>19,330.24</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>19,330.24</u>	(23.) \$ <u>32,368.33</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>8996.96</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>10333.28</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>19,330.24</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>19,330.24</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>0</u>	



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

COMMITTEE TO RE-ELECT

2. Committee Name

DEANNA KOSKI

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/29/25

Name & Address:

YATOCMA MICHAEL
13323 EAGLE NEST TRAIL, SHELBY, MI, 48315

\$ 2450.00 \$ 2450.00

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

Occupation OWNER Employer YATOCMA OIL

Business Address 51300 DANVIEW TECH, SHELBY MI, 48315

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/29/25

Name & Address:

YATOCMA MARVIN
16392 VIA MERA, MACOMB, MI, 48042

\$ 2450.00 \$ 2450.00

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

Occupation OWNER Employer YATOCMA OIL

Business Address 51300 DANVIEW TECH, SHELBY MI, 48315

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/29/25

Name & Address:

YATOCMA JIMMY
12933 RED MAPLE DR. SHELBY, MI, 48315

\$ 2450.00 \$ 2450.00

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

Occupation OWNER Employer YATOCMA OIL

Business Address 51300 DANVIEW TECH, SHELBY MI, 48315

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/29/25

Name & Address:

YATOCMA NORMAN
56392 VIA SERBELLONI, MACOMB, MI, 48042

\$ 2450.00 \$ 2450.00

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

Occupation OWNER Employer YATOCMA OIL

Business Address 51300 DANVIEW TECH, SHELBY MI, 48315

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

9800.00

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 69954-50
2. Committee Name COMMITTEE TO RE-ELECT DEANNA KOSKI

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 Name & Address: UJUC PASHKO 38346 PHYLLIS CT. STERLING HTS. MI. 48312	PAC Receipt? YES 4. Date of Receipt <u>10/29/25</u>		\$ 300.	\$ 300.
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>DODGE PARK CONEY ISLAND</u> Business Address <u>35252 DODGE PARK RD. STERLING HTS. MI. 48312</u>				
Type of Contribution: Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <input type="checkbox"/>				
3. Contribution #2 Name & Address: DEANNA KOSKI 15079 HARVEST MEADOWS. STERLING HTS. MI. 48313	PAC Receipt? YES 4. Date of Receipt <u>11/5/25</u>		\$ 233.28	\$ 233.28
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____				
Type of Contribution: Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <input type="checkbox"/>				
3. Contribution #3 Name & Address: Occupation _____ Employer _____ Business Address _____	PAC Receipt? YES 4. Date of Receipt _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <input type="checkbox"/>				

Page Subtotal

533.28
10333.28

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 69954-50
2. Committee Name COMMITTEE TO ELECT DEANNA KOSKI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Dominic Moceri</u> Address <u>3495 Moceri Ct OAKLAND, MI, 48306</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>RETURN EXCESS CONTRIBUTION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/31/25</u> Date	<u>\$ 4,350.00</u>
Expenditure #2 Name <u>DEREK KOSKI</u> Address <u>33885 KENNEDY DR. STERLING HTS, MI, 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SIGN DELIVERY + Pickup</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 100.00</u>
Expenditure #3 Name <u>BRITTANY KOSKI</u> Address <u>15079 HARVEST MEADOWS STERLING HTS, MI, 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SIGN DELIVERY + Pickup</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 100.00</u>
Expenditure #4 Name <u>DEREK KOSKI</u> Address <u>33885 KENNEDY DR. STERLING HTS, MI, 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POLL SNACKS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 50.00</u>
Expenditure #5 Name <u>GEOFF GARIEPY</u> Address <u>35015 CAVANT DR. STERLING HTS, MI, 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAGN FACEBOOK ACT.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 150.00</u>

Subtotal this page

4,750.00

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

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 69954-50

2. Committee Name COMMITTEE TO RE-ELECT DEANNA KOSKI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>MARY MARCINAK</u> Address <u>42752 VAN DYKE STERLING HTS. MI. 48314</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ELECTION FUNDRAISER DESSERTS, ETC.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 300.00</u>
Expenditure #2 Name <u>ADRIANNA KOSKI</u> Address <u>33885 KENNEDY DR STERLING HTS. MI. 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>EARLY VOTING + ELECTION POLL WORK → GAS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 100.00</u>
Expenditure #3 Name <u>BRITTANY KOSKI</u> Address <u>15079 HARVEST MEADOWS STERLING HTS. MI. 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>GRAPHIC DESIGN FLYER + ADS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 500.00</u>
Expenditure #4 Name <u>BRITTANY KOSKI</u> Address <u>15079 HARVEST MEADOWS STERLING HTS. MI. 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADMINISTRATIVE ASSISTANT - NEWSPAPERS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 500.00</u>
Expenditure #5 Name <u>ADRIANNA KOSKI</u> Address <u>33885 KENNEDY DR STERLING HTS. MI. 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL MEDIA MARKETING (TIKTOK)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 500.00</u>

Subtotal this page

1900.00

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

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 69954-50
2. Committee Name COMMITTEE TO RE-ELECT DEANNA KOSKI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ADRIANNE KOSKI</u> Address <u>33885 KENNEDY DR. STERLING Hts. MI. 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL MEDIA MARKETING (FACEBOOK)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 500.00</u>
Expenditure #2 Name <u>DEANNA KOSKI</u> Address <u>15079 HARVEST MEADOWS STERLING Hts. MI. 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>REIMBURSEMENT</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 8664.50</u>
Expenditure #3 Name <u>DEANNA KOSKI</u> Address <u>15079 HARVEST MEADOWS STERLING Hts. MI. 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>STAMP - INK - BANK CHARGES REIMBURSEMENT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/25</u> Date	<u>\$ 233.28</u>
Expenditure #4 Name <u>SH. K-9 UNIT</u> Address <u>C/o JEREMY WALLEMAN SHPD 40335 DODGE PARK STERLING Hts. MI. 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation - K-9 UNIT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/12/25</u> Date	<u>\$ 3282.46</u>
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	\$ _____

Subtotal this page

12,680.24

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

19,330.24

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

Committee to REElect DEANNA Koski

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.	4. Type of Obligation (Description)	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)
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.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
Debt #1 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 7-7-00 6. Original Amount of Debt: \$ 749.58	11-10-25 \$ 749.58 \$ \$ \$ \$	\$ 749.58	\$ 0 FORGIVEN

Debt #2 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: ADS 5. Date Debt Was Incurred: 10-17-09 6. Original Amount of Debt: \$ 486.00	11-10-25 \$ 486.00 \$ \$ \$ \$	\$ 486.00 \$ 0 FORGIVEN
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Debt #3 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: CANDY TREAT 5. Date Debt Was Incurred: 3-31-10 / 10-19-10 6. Original Amount of Debt: \$ 109.67	11-10-25 \$ 109.67 \$ \$ \$ \$	\$ 109.67 \$ 0 FORGIVEN
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If bank loan, name of endorser or guarantor:	Amount Endorsed: \$

Page Subtotal (Outstanding debt)

0

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

Committee to REElect DEANNA Koski

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.	4. Type of Obligation (Description)	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)
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.				
Debt #1 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 4-6-99 6. Original Amount of Debt: \$ 337.00	11-10-25 337.00 \$ \$ \$ \$	\$ 337.00	\$ FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: FO 5. Date Debt Was Incurred: 10-19-99 6. Original Amount of Debt: \$ 385.81	11-10-25 385.81 \$ \$ \$ \$	\$ 385.81 \$ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____			

Debt #3 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: FO 5. Date Debt Was Incurred: 6-16-00 6. Original Amount of Debt: \$ 900.00	11-10-25 900.00 \$ \$ \$ \$	\$ 900.00 \$ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____			

Page Subtotal (Outstanding debt)

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 69954-50
2. Committee Name Committee To ReElect DEANNA Koski

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.	4. Type of Obligation (Description)	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)
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.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
Debt #1 Corp? Yes Owed to or by: <u>DEANNA Koski</u> <u>15079 HARVEST MEADOWS</u> <u>STERLING Hts MI 48313</u>	4. Type: <u>NLC</u> 5. Date Debt Was Incurred: <u>5-24-99</u> 6. Original Amount of Debt: <u>\$ 241.00</u>	11-10-25 <u>\$ 241.00</u> \$ \$ \$ \$	<u>\$ 241.00</u>	<u>\$ 0.00</u> FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Corp? Yes Owed to or by: <u>DEANNA Koski</u> <u>15079 HARVEST MEADOWS</u> <u>STERLING Hts MI 48313</u>	4. Type: <u>NLC</u> 5. Date Debt Was Incurred: <u>6-4-99</u> 6. Original Amount of Debt: <u>\$ 664.13</u>	11-10-25 <u>\$ 664.13</u> \$ \$ \$ \$	<u>\$ 664.13</u>	<u>\$ 0.00</u> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Corp? Yes Owed to or by: <u>DEANNA Koski</u> <u>15079 HARVEST MEADOWS</u> <u>STERLING Hts MI 48313</u>	4. Type: <u>FO</u> 5. Date Debt Was Incurred: <u>2-16-99</u> 6. Original Amount of Debt: <u>\$ 595.00</u>	11-10-25 <u>\$ 595.00</u> \$ \$ \$ \$	<u>\$ 595.00</u>	<u>\$ 0.00</u> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt) 0.00

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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE to REElect DEANNA Koski

This Schedule itemizes:

a. Debts and obligations owed by or forgiven by 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.	4. Type of Obligation (Description)	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)
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.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
Debt #1 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts, MI 48313	4. Type: <u>COST FR</u> 5. Date Debt Was Incurred: <u>5-15-13</u> 6. Original Amount of Debt: <u>\$ 337.05</u>	11-10-25 <u>\$ 337.00</u> \$ \$ \$ \$	\$ <u>337.05</u>	\$ <u>0</u> FORGIVEN

Debt #2 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: <u>COST FR</u> 5. Date Debt Was Incurred: <u>9-9-15</u> 6. Original Amount of Debt: <u>\$ 692.96</u>	11-10-25 <u>\$ 692.96</u> \$ \$ \$ \$	\$ <u>692.96</u>	\$ <u>0</u> FORGIVEN
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Debt #3 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: <u>COST FR</u> 5. Date Debt Was Incurred: <u>10-24-19</u> 6. Original Amount of Debt: <u>\$ 250.00</u>	11-10-25 <u>\$ 250.00</u> \$ \$ \$ \$	\$ <u>250.00</u>	\$ <u>0</u> FORGIVEN
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If bank loan, name of endorser or guarantor:	Amount Endorsed: \$
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Page Subtotal (Outstanding debt)	
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

2. Committee Name

69954-50

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 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: DEANNA KOSK 15079 HARVEST MEADOWS STERLING Hts, MI 48313	4. Type: <u>Ad - NEWS</u> 5. Date Debt Was Incurred: <u>7-18-25</u> 6. Original Amount of Debt: <u>\$ 545.00</u>	<u>11-10-25 \$ 545.00</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 545.00</u> <u>\$</u>	<u>Q</u> <u>\$</u> FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	Corp? Yes	4. Type: <u>REIMB CC</u>	11-035 \$ 1871. ³⁰	
		5. Date Debt Was Incurred: <u>10-3-25</u>	\$	
		6. Original Amount of Debt: <u>\$ 1871.30</u>	\$	\$ 1871. ³⁰
			\$	\$ <u>0</u>
				FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	Corp? Yes	4. Type: <u>BASIC CHARGES</u>	11-10-25 \$ 233.28	
		5. Date Debt Was Incurred: <u>11/5/25</u>	\$ <u></u>	
		6. Original Amount of Debt: <u>\$ 233.28</u>	\$ <u>233.28</u>	\$ <u></u>
				FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

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.