



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

FILED 2025 DEC 2 PM12:46  
MACOMB COUNTY CLERK

**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

**140569**

2. Committee Name

**Robert Mijac for City Council**

5. Committee's Mailing Address

**43710 Via Antonio  
Sterling Heights MI 48314**

Area Code and Phone (586) 994-9110

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.

7. Treasurer's Business Address

**43710 Via Antonio  
Sterling Heights MI 48314**

Area Code and Phone \_\_\_\_\_

3. This Statement covers From: 10/20/2025 to 11/24/2025

4. Candidate Last Name **Mijac** First Name **Robert** M.I.

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

**City Council - Sterling Heights**

4b. County of Residence **MACOMB**

6. Treasurer's Name & Residential Address

**Robert Mijac  
43710 Via Antonio  
Sterling Heights MI 48314**

Area Code & Phone (586) 994-9110

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

Area Code and Phone \_\_\_\_\_

Area Code and Phone \_\_\_\_\_

**9. TYPE OF STATEMENT**

9a.  Pre-Election OR  Post-Election

Pre-Election or Post-Election Statement relates to:

Primary

General

Convention

Special

School

Caucus

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.

Date of Election, Convention or Caucus

11/04/2025

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.

Current Treasurer or  
Designated Record keeper

**Robert Mijac**

Type or Print Name

Signature

12-02-2025

Date

Candidate

**Robert Mijac**

Type or Print Name

Signature

12-02-2025

Date



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 140569

2. Committee Name Robert Mijac for City Council

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>6,600.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$6,600.00</u>	(18.) \$ <u>\$32,980.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. <b>TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$6,600.00</u>	(20.) \$ <u>\$32,980.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
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>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$4,767.94</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>\$0.00</u>	
9. <b>TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$4,767.94</u>	(23.) \$ <u>\$25,416.82</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (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. <b>TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$5,731.12</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$6,600.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$12,331.12</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$4,767.94</u>	
17. <b>ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$7,563.18</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140569  
2. Committee Name Robert Mijac for City Council

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 11/20/2025

Name & Address:

David Bonior  
1000 New Jersey Ave SE Apt 1107  
Washington DC 20003

\$ 250.00 \$ 250.00

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

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/24/2025

Name & Address:

Rebecca Chamberlain Creanga  
3315 Witherbee  
Troy MI 48084

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Tiim Hamlin  
36519 Rowe  
Sterling Heights MI 48312

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/20/2025

Name & Address:

Kathryne Baker  
1615 Beaufield  
Ferndale MI 48220

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$550.00

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

\$550.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140569  
2. Committee Name Robert Mijac for City Council

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.

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 10/16/2025  
Name & Address:  
Leo Lalonde  
24801 Rosalind Ave  
Eastpointe MI 48021  
\$ 150.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:  
Occupation Retired Employer \_\_\_\_\_ [Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/10/2025

Name & Address:  
William Sowerby  
3380 Woodhill Circle  
Superior Twp MI 48198  
\$ 200.00 \$ 200.00

5. If over \$100.00 cumulative, please provide:  
Occupation Retired Employer \_\_\_\_\_ [Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/28/2025

Name & Address:  
CTE Michael Notte  
PO Box 182444  
Utica MI 48318  
\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_ [Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:  
Fred Miller  
51 Grosse Pines  
Rochester Hills MI 48309  
\$ 250.00 \$ 250.00

5. If over \$100.00 cumulative, please provide:  
Occupation Deputy Clerk Employer Oakland County [Click Here for Memo Itemization](#)

Business Address 1200 N Telegraph Pontiac MI 48341  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$700.00

\$1,250.00

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 140569

2. Committee Name Robert Mijac for City Council

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 10/28/2025

Name & Address:

Joseph Nowaczok  
44121 Dylan  
Sterling Heights MI 48314

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Robert Becker  
40847 Colony  
Sterling Heights MI 48313

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 3 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Friends of Nate Shannon  
43313 Interlaken  
Sterling Heights MI 48313

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt 10/20/2025

Name & Address:

Debra Dorosh  
44188 Rina Lane  
Clinton Twp MI 48038

\$ 50.00 \$ 50.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$ 350.00

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

\$ 1,600.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140569  
2. Committee Name Robert Mijac for City Council

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: Jordan Tasich 3631 Aynsley Rochester Hills MI 48306	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/20/2025</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: Frank Cuncich 11750 Cavalier Sterling Heights MI 48313	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/2025</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 Name & Address: Walter Nowinski 150 Van Ness Ave Apt 616 San Francisco CA 94102	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/2025</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: Joyce Lalonde 24801 Rosalind Eastpointe MI 48021	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/2025</u>	\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$ <u>450.00</u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)	
\$ <u>2,050.00</u>	

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140569

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6. Amount

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

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 10/25/2025

Name & Address:

Gary Cynowa  
45451 Fielding  
Macomb Twp MI 48042

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/18/2025

Name & Address:

Jane Gabler  
35611 Grayfield  
Sterling Heights MI 48312

\$ 25.00 \$ 25.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/17/2025

Name & Address:

Dennis Bruck  
16249 Conifer Lane  
Clinton Twp MI 48038

\$ 50.00 \$ 50.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/16/2025

Name & Address:

Ed Bruley  
38157 Radde  
Clinton Twp MI 48036

\$ 100.00 \$ 100.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$ 275.00

\$ 2,325.00

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 140569  
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3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 10/17/2025

Name & Address:  
Michelle DeBeaussaert  
39856 Brylor Court  
Clinton Twp MI 48038

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

\$ 150.00 \$ 150.00

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

Occupation Retired Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/22/2025

Name & Address

Saima Khalil  
12101 Volpe  
Sterling Hts MI 48312

\$ 200.00 \$ 200.00

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

Occupation Attorney Employer Khalil Law

[Click Here for Memo Itemization](#)

Business Address 134 Market Mt Clemens MI 48043

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/17/2025

Name & Address:

Kevin Johnson  
3316 Marc  
Sterling Heights MI 48310

\$ 50.00 \$ 50.00

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

Occupation  Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/17/2025

Name & Address

Dianne Mijac  
40583 Turnberry  
Sterling Heights MI 48314

\$ 200.00 \$ 350.00

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

Occupation Retired Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$600.00

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

\$2,925.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
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3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 10/24/2025

Name & Address:  
Luiza Kontic  
47860 Lighthouse  
Macomb Twp MI 48044

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

\$ 50.00 \$ 50.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/21/2025

Name & Address

Rick Flynn  
43225 Chardonnay  
Sterling Heights MI 48314

\$ 250.00 \$ 250.00

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

[Click Here for Memo Itemization](#)

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 10/24/2025

Name & Address

Mike Rajkovic  
10080 Gulf Shore  
Naples FL 34108

\$ 100.00 \$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/28/2025

Name & Address

Barbara Kasom  
13259 Highland Circle  
Sterling Heights MI 48312

\$ 50.00 \$ 50.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$450.00

\$3,375.00

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

Enter this total on  
line 3a of Summary  
Page.



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

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 11/02/2025

Name & Address:

Dorothy Popovich  
2188 W Wattles Road  
Troy MI 48098

\$ 50.00 \$ 50.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Judy Hartwell  
25921 Maritime Circle S  
Harrison Twp MI 48045

\$ 25.00 \$ 25.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 10/27/2025

Name & Address:

Beth Pyden  
39547 Donahue  
Clinton Twp MI 48038

\$ 100.00 \$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Julie Matuzak  
38250 Fairway Ct #71B  
Clinton Twp MI 48038

\$ 100.00 \$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$ 275.00

\$ 3,650.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

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

3. Contribution #1 PAC Receipt?  YES 4. Date of Receipt 10/27/2025

Name & Address:  
Flo Hayman  
53540 Grace  
New Baltimore MI 48047

\$ 25.00 \$ 25.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 11/01/2025

Name & Address:

Mark Brewer  
37414 Stonegate  
Clinton Twp MI 48036

\$ 50.00 \$ 50.00

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

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 11/03/2025

Name & Address:

Barbara Milczynski  
3521 Leason  
Sterling Heights MI 48310

\$ 150.00 \$ 150.00

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

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 10/29/2025

Name & Address:

Robert Mijac  
43710 Via Antonio  
Sterling Heights MI 48314

\$ 2,500.00 \$ 27,500.00

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

Occupation Owner Employer Mass Mailing

[Click Here for Memo Itemization](#)

Business Address 35468 Mound Sterling Heights MI 48310

Type of Contribution:  Direct  Loan from a person  Fund Raiser

Page Subtotal \$2,725.00

\$6,600.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

140569

1. Committee I. D. Number

2. Committee Name Robert Mijac for City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1  Name <b>Postmaster</b>  Address <b>7007 Metro Parkway</b> <b>Sterling Heights MI 48211</b>	Purpose: <u>Postage</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/27/25</u> Date	\$ <u>390.00</u>
 <input type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2  Name <b>Rogers Roost</b>  Address <b>33626 Schoenherr</b> <b>Sterling Heights MI 48313</b>	Purpose: <u>Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/25</u> Date	\$ <u>500.00</u>
 <input type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3  Name <b>The Original Print Shoppe</b>  Address <b>270 S Telegraph</b> <b>Pontiac MI 48341</b>	Purpose: <u>Printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/21/25</u> Date	\$ <u>3,604.00</u>
 <input type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4  Name <b>Office Max</b>  Address <b>32251 John R Road</b> <b>Madison Hts MI 48071</b>	Purpose: <u>Supplies</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/25/25</u> Date	\$ <u>273.94</u>
 <input type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5  Name  Address	Purpose: _____	Date	\$ _____
 <input type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization Type</a>
			<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement

Subtotal this page

**\$4,767.94**

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

**\$4,767.94**

Enter this total  
on line 8a of  
Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

**140569**

1. Committee I.D. Number

2. Committee Name Robert Mijac for City Council

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>10/25</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>20</u>	5. Type of Fund Raising Activity <u>Fundraiser - Food</u>	6. Address and Name (if any) of the place where the activity was held. Rogers Roost 33626 Schoenherr Sterling Hts MI 48313 <input type="checkbox"/> Private Residence
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7. Total Contributions \$6,600.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$6,600.00

10. Total Cost of Event \$500.00  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11.  Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split  
(%)

Expenditure Split  
(%)

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- 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.