MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
24 OCT 2025 PM 12:17
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: 08/26/2025 to 10/19/2025

1. Committee I.D. Number
139377

2. Committee Name
CITIZENS FOR MICHAEL RADTKE

4. Candidate Last Name: RADTKE First Name: MICHAEL M.I.: V

4a. Office Sought Including District # or Community Served (If applicable)
COUNCIL, STERLING HEIGHTS

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

5. Committee's Mailing Address
34205 BARRETT
STERLING HEIGHTS, MI 48312

Area Code and Phone (586) 873-8427
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
VIRGINIA LA ROSA
13515 PARKRIDGE
SHELBY TWP, MI 48315

Area Code & Phone (586) 739-8885

7. Treasurer's Business Address
13515 PARKRIDGE
SHELBY TWP, MI 48315

Area Code and Phone (586) 739-8885

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. [X] Pre-Election **OR** 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

- [ ] Primary
- [X] General
- [ ] Convention
- [ ] Special
- [ ] School
- [ ] Caucus

Date of Election, Convention or Caucus
11/04/2025

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 oustanding assets, owes no lates fees or has any oustanding debt.

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

Effective date of dissolution
_____

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 _____ / _____ Submitted electronically, signature on file Date 10/24/2025
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date 10/24/2025
Type or Print Name Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139377

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name CITIZENS FOR MICHAEL RADTKE

		Column I This Period	Column II Cumulative this election cycle
RECEIPTS			
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	14,654.05	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	14,654.05	(18.) $ 86,229.05
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.) $	14,654.05	(20.) $ 86,229.05
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	9,986.46	(21.) $ 29,629.09
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.) $	691.51	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	691.51	(23.) $ 42,587.59
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 **by** the Committee (Schedule 1E)	(12a.) $	47,838.94	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	42,544.96
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	14,654.05
15. SUBTOTAL Add lines 13 and 14	(15.) = $	57,199.01
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	691.51
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	56,507.50 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 08/29/2025

Name & Address:
ALAN CASMERE
28836 PANAMA ST
WARREN, MI 48092

$ 400.00 $ 2,540.00

5. If over $100.00 cumulative, please provide:

Occupation SELF EMPLOYED Employer FRIENDLY OUTDOOR STORAGE

Business Address 33400 MAPLE LN DR, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/04/2025

Name & Address
GRACE FUNG
2841 YOSEMITE AVE S
MINNEAPOLIS, MN 55416

$ 50.00 $ 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/2025

Name & Address:
TIMOTHY ZOLLNER
54421 IROQUOIS LN
SHELBY TWP, MI 48315

$ 60.00 $ 210.00

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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/2025

Name & Address
PATRICIA BELANGER
1924 NW FEDERAL HWY., APT 2318
STUART, FL 34994

$ 100.00 $ 560.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 610.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/09/2025

Name & Address:
JOE DISANO
2162 BANYON TRAIL
EAST LANSING, MI 48823

$ 400.00 $ 1,170.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer DISANO STRATEGIES

Business Address 5859 W SAGINAW HWY, LANSING, MI 48917

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/2025

Name & Address
JIM MCNULTY
5065 BAYLEAF DR
STERLING HEIGHTS, MI 48314

$ 100.00 $ 700.00

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 09/10/2025

Name & Address:
JOHN BOLOGNA
19135 SAXON DR
BEVERLY HILLS, MI 48025

$ 400.00 $ 1,850.00

5. If over $100.00 cumulative, please provide:

Occupation REAL ESTATE DEVELOPER Employer BMRS PROPERTY

Business Address 33100 SCHOENHERR RD, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/2025

Name & Address
BRIAN KERN
54482 RIDGEVIEW DR
SHELBY TOWNSHIP, MI 48316

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SUPERVISOR Employer J G KERN

Business Address 44044 MERRILL RD, STERLING HEIGHTS, MI 48314

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,000.00

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 CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/10/2025

Name & Address:
DAVID BRELOSKI
33555 CORNELISSEN DR
STERLING HEIGHTS, MI 48312

$ 100.00 $ 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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/2025

Name & Address
FLORENCE HAYMAN
53540 GRACE DR
NEW BALTIMORE, MI 48047

$ 20.00 $ 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 09/10/2025

Name & Address:
PLUMBERS' LOCAL 98 STATE PAC FUND
700 TOWER DR
TROY, MI 48098

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 09/10/2025

Name & Address
WARREN STERLING HEIGHTS DEMOCRATS PAC
31428 SARATOGA AVE
WARREN, MI 48093

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 470.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/10/2025

Name & Address:
WARREN STERLING HEIGHTS DEMOCRATS PAC
31428 SARATOGA AVE
WARREN, MI 48093

$ 350.00 $ 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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/2025

Name & Address
CYNDI PELTONEN
318 BROADACRE AVE
CLAWSON, MI 48017

$ 10.00 $ 10.00

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 09/10/2025

Name & Address:
LUKE BONNER
4875 SAWGRASS DR W
ANN ARBOR, MI 48108

$ 100.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation CEO Employer THE BONNER ADVISORY GROUP

Business Address 1054 S MAIN ST, ANN ARBOR, MI 48104

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/16/2025

Name & Address
STEVE BENEDETTINI
2250 AVON LAKE LN
ROCHESTER HILLS, MI 48307

$ 400.00 $ 900.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer SPALDING DEDECKER ASSOCIATES

Business Address 905 E SOUTH BLVD, ROCHESTER HILLS, MI 48307

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 860.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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3. Contribution # 1 PAC Receipt? ☑ YES 4. Date of Receipt 09/21/2025

Name & Address:
MICHIGAN LABORERS' POLITICAL LEAGUE PAC
1118 CENTENNIAL WAY
LANSING, MI 48917

$ 1,000.00 $ 2,000.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/21/2025

Name & Address
PHILIP RUGGERI
55764 ST REGIS DR
SHELBY TWP, MI 48315

$ 400.00 $ 1,650.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer PHILIP P. RUGGERI AND ASSOCIATES

Business Address 43231 SCHOENHERR RD, STERLING HEIGHTS, MI 48313

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/21/2025

Name & Address:
JOHN FENN
13288 LILLIAN LN
STERLING HEIGHTS, MI 48313

$ 100.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 09/21/2025

Name & Address
CHALDEAN CHAMBER P.A.C.
2075 WALNUT LAKE RD
WEST BLOOMFIELD, MI 48323

$ 500.00 $ 3,000.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 2,000.00

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/21/2025

Name & Address:
BARBARA PECKHAM
42217 ARCADIA DR
STERLING HEIGHTS, MI 48313

$ 100.00 $ 300.00

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 09/21/2025

Name & Address
DENNIS BRUCK
16249 CONIFER LN
CLINTON TOWNSHIP, MI 48038

$ 15.00 $ 60.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/22/2025

Name & Address:
ALYSA DIEBOLT
23225 OAKWOOD AVE
EASTPOINTE, MI 48021

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/23/2025

Name & Address
GARY CYNOWA
45451 FIELDING ST
MACOMB, MI 48042

$ 50.00 $ 410.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 190.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 09/24/2025

Name & Address:
JONATHAN COHN
333 COLUMBUS AVE
BOSTON, MA 02116

$ 25.00 $ 25.00

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 10/01/2025

Name & Address
NATE HATTON
22844 ROXANA AVE
EASTPOINTE, MI 48021

$ 200.00 $ 720.00

5. If over $100.00 cumulative, please provide:

Occupation CONDUCTOR Employer AMTRAK

Business Address 23908 TALBOT ST, ST CLAIR SHORES, MI 48082

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/01/2025

Name & Address:
MINDY MOORE
11530 SHORT DR
WARREN, MI 48093

$ 200.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Occupation COURT REPORTER Employer FREELANCE REPORTERS, INC..

Business Address 11530 SHORT DR, WARREN, MI 48093

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/02/2025

Name & Address
JENNY STANCZYK
4550 BIRD DOG LN
SPRUCE, MI 48762

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 450.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/02/2025

Name & Address:
MICHAEL MACDONALD
18890 SAN QUENTIN DR
LATHRUP VILLAGE, MI 48076

$ 200.00 | $ 700.00

5. If over $100.00 cumulative, please provide:

Occupation CIVIL ENGINEER Employer HUBBELL ROTH & CLARK INC.

Business Address 555 HULET DR, BLOOMFIELD HILLS, MI 48302

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/02/2025

Name & Address
SAIF YOUSIF
37898 ASHLAND MEADOWS CT
STERLING HEIGHTS, MI 48312

$ 400.00 | $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation SELF-EMPLOYED Employer CARSTAR COLLISION

Business Address 6309 15 MILE RD, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/05/2025

Name & Address:
BARBARA GECK
39526 WALDORF DR
CLINTON TWP, MI 48038

$ 100.00 | $ 450.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/06/2025

Name & Address
NATHAN INKS
11848 ANGUS CIR
STERLING HEIGHTS, MI 48312

$ 500.00 | $ 2,000.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer BLOOM SLUGGETT, PC

Business Address 161 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,200.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/06/2025

Name & Address:
CAROLE CHI
35325 MORAVIAN DR
STERLING HEIGHTS, MI 48312

$ 50.00 $ 240.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/07/2025

Name & Address
GEORGE CHAPP
4753 STILWELL DR
WARREN, MI 48092

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/07/2025

Name & Address:
LISA BLAZEVSKI
31253 GAY ST
ROSEVILLE, MI 48066

$ 200.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ASSISTANT PROSECUTING ATTORNEY Employer MACOMB COUNTY PROSECUTOR'S OFFICE

Business Address 1 S MAIN ST, MT CLEMENS, MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
DOMINIC LA ROSA
13515 PARKRIDGE DR
SHELBY TWP, MI 48315

$ 729.05 $ 2,450.00

5. If over $100.00 cumulative, please provide:

Occupation ADVERTISING EXECUTIVE Employer SELF EMPLOYED

Business Address 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

Page Subtotal 1,079.05

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2025

Name & Address:
VIRGINIA LA ROSA
13515 PARKRIDGE DR
SHELBY TWP, MI 48315

$ 1,150.00 | $ 2,450.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
MARC KASZUBSKI
1096 BROMPTON RD
ROCHESTER HILLS, MI 48309

$ 100.00 | $ 500.00

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address:
BIRDIE NASH
29484 ASHLAND AVE
HARRISON TOWNSHIP, MI 48045

$ 20.00 | $ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
DEREK MILLER
4350 CREEKWOOD CT
ROCHESTER, MI 48306

$ 100.00 | $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer SELF-EMPLOYED

Business Address 38600 VAN DYKE AVE, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,370.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2025

Name & Address:
ZSA-ZSA BOOKER
23811 VIRGINIA
WARREN, MI 48091

$ 50.00 | $ 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 10/08/2025

Name & Address
CITGO MAPLE LLC
1654 LIVERNOIS RD
TROY, MI 48083

$ 1,000.00 | $ 1,000.00

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 10/08/2025

Name & Address:
SHEET METAL WORKERS LOCAL 80 PAC
17100 W 12 MILE RD
SOUTHFIELD, MI 48076

$ 480.00 | $ 1,900.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
MICHAEL GILSON
37378 VAN DYKE AVE
STERLING HEIGHTS, MI 48312

$ 400.00 | $ 1,280.00

5. If over $100.00 cumulative, please provide:

Occupation EXECUTIVE Employer CROSSROADS PLAZA

Business Address 37378 VAN DYKE AVE, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 1,930.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2025

Name & Address:
PASHKO UJKIC
38346 PHYLLIS CT
STERLING HEIGHTS, MI 48312

$ 300.00 $ 1,990.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer DODGE PARK CONEY ISLAND

Business Address 35252 DODGE PARK RD, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☑ YES 4. Date of Receipt 10/08/2025

Name & Address
MICHIGAN LIST
PO BOX 531482
LIVONIA, MI 48153

$ 250.00 $ 250.00

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 10/08/2025

Name & Address:
ALEXANDER HISHON
69753 CRIMSON CT
BRUCE TOWNSHIP, MI 48065

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
SCOTT LOCKWOOD
950 SOUTHDOWN RD
BLOOMFIELD HILLS, MI 48304

$ 100.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation CIVIL ENGINEER Employer ANDERSON ECKSTEIN AND WESTRICK INC.

Business Address 51301 SCHOENHERR RD, SHELBY TOWNSHIP, MI 48315

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 750.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2025

Name & Address:
STEPHEN PANGORI
8106 ROSEBUD LN
CLARKSTON, MI 48348

$100.00 | $1,000.00

5. If over $100.00 cumulative, please provide:

Occupation CIVIL ENGINEER Employer ANDERSON ECKSTEIN AND WESTRICK

Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
LARRY SCOTT
12900 HALL RD
STERLING HEIGHTS, MI 48313

$100.00 | $400.00

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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address:
DINA SHARGABIAN STUBER
5784 LIMESTONE DR
TROY, MI 48085

$100.00 | $200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
CHARLES TURNBULL
2640 BARBERRY DR
SHELBY TOWNSHIP, MI 48316

$100.00 | $200.00

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

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Page Subtotal 400.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/08/2025

Name & Address:
VERONICA KLINEFELT FOR STATE SENATE
18143 WILSON AVE
EASTPOINTE, MI 48021

$ 100.00 $ 100.00

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 10/08/2025

Name & Address
ARVIN ZORA
6884 HAYMARKET
SHELBY TOWNSHIP, MI 48317

$ 100.00 $ 100.00

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 10/08/2025

Name & Address:
CAROL HOGAN
26653 TOM ALLEN DR
WARREN, MI 48089

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/08/2025

Name & Address
YVONNE KNIAZ
14016 PERNELL DR
STERLING HEIGHTS, MI 48313

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 275.00

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 CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/09/2025

Name & Address:
MINDY MOORE
11530 SHORT DR
WARREN, MI 48093

$ 200.00 $ 800.00

5. If over $100.00 cumulative, please provide:

Occupation COURT REPORTER Employer FREELANCE REPORTERS, INC..

Business Address 11530 SHORT DR, WARREN, MI 48093

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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

Name & Address
DANIEL LIPTAK
8889 CHERRYLAWN DR
STERLING HEIGHTS, MI 48313

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer DLUX PAINTING

Business Address 8889 CHERRYLAWN DR, STERLING HEIGHTS, MI 48313

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

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

Name & Address:
NABIL YOUSIF
38765 MOUND RD
STERLING HEIGHTS, MI 48310

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

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

Name & Address
MARIE TOKAR
37747 GREGORY DR
STERLING HEIGHTS, MI 48312

$ 120.00 $ 570.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer CLUB 54

Business Address 37722 VAN DYKE AVE, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 520.00

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 CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/10/2025

Name & Address:
PAUL SLIFCO
36623 MAAS DR
STERLING HEIGHTS, MI 48312

$ 250.00 $ 850.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer SLIFCO ELECTRIC LLC

Business Address 6353 E 14 MILE RD, STERLING HEIGHTS, MI 48312

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/15/2025

Name & Address
MARK J PLAWECKI
26736 CECILE ST
DEARBORN HEIGHTS, MI 48127

$ 50.00 $ 100.00

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 10/15/2025

Name & Address:
JOHN H JOHNSON
48637 SHADY GLEN DR
CHESTERFIELD, MI 48051

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT AND CEO Employer SOUTHEAST MICHIGAN CHAMBER OF COMMERCE

Business Address 22600 HALL RD, CLINTON TOWNSHIP, MI 48036

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/15/2025

Name & Address
ROBERT W KIRK
19500 HALL RD
CLINTON TOWNSHIP, MI 48038

$ 250.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer CENTRE COURT PROPERTIES, LLC

Business Address 19500 HALL RD, CLINTON TOWNSHIP, MI 48038

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 750.00

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 CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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 10/15/2025

Name & Address:
ROBERT S HUTH, JR.
19500 HALL RD
CLINTON TOWNSHIP, MI 48038

$ 250.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer CENTRE COURT PROPERTIES, LLC

Business Address 19500 HALL RD, CLINTON TOWNSHIP, MI 48038

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☑ YES 4. Date of Receipt 10/15/2025

Name & Address
REALTORS POLITICAL ACTION COMMITTEE OF MICHIGAN
720 N WASHINGTON AVE
LANSING, MI 48906

$ 500.00 $ 1,000.00

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 10/15/2025

Name & Address:
TERRI LESOCK
11228 FAIRWAY DR
STERLING HEIGHTS, MI 48312

$ 50.00 $ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

$ _____ $ _____

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

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Page Subtotal	800.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	14,654.05

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MUSIC IN THE PARK FOOD 5. Date Of Receipt: 08/28/2025 6. **Vendor Name & Address:** ALMONDS R NUTS NO STREET ADDRESS, OAK PARK, MI 48237	$ 7.42	$ 19,158.08
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MUSIC IN THE PARK FOOD 5. Date Of Receipt: 08/28/2025 6. **Vendor Name & Address:** HEAVENLY HOT DOGS 1110 ABBEY CT, WESTLAND, MI 48185	$ 6.00	$ 19,164.08
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description PRINTER INK 5. Date Of Receipt: 09/02/2025 6. **Vendor Name & Address:** INK GENIE 1011 US-22, MOUNTAINSIDE, NJ 07092	$ 95.62	$ 19,259.70
	Page Subtotal	109.04	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/06/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 18.90	$ 19,278.60
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/09/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 7.06	$ 19,285.66
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MEETING / FOOD 5. Date Of Receipt: 09/09/2025 6. **Vendor Name & Address:** MACKENZIE TAVERN 40860 VAN DYKE AVE, STERLING HEIGHTS, MI 48313	$ 43.44	$ 19,329.10
	Page Subtotal	69.40	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MEETING / FOOD 5. Date Of Receipt: 09/09/2025 6. **Vendor Name & Address:** AL'S HIDEAWAY 43126 VAN DYKE AVE, STERLING HEIGHTS, MI 48314	$ 18.00	$ 19,347.10
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/11/2025 6. **Vendor Name & Address:** C&G PUBLISHING 13650 E 11 MILE RD, WARREN, MI 48089	$ 1,246.00	$ 20,593.10
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/14/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 7.32	$ 20,600.42
	Page Subtotal	1,271.32	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/14/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 2.38	$ 20,602.80
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description STORAGE 5. Date Of Receipt: 09/14/2025 6. **Vendor Name & Address:** APPLE ONE APPLE PARK WAY, CUPERTINO, CA 95014	$ 0.99	$ 20,603.79
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MEETING / FOOD 5. Date Of Receipt: 09/17/2025 6. **Vendor Name & Address:** AMWAY GRAND RENDEZVOUS 187 MONROE AVE NW, GRAND RAPIDS, MI 49503	$ 10.08	$ 20,613.87
	Page Subtotal	13.45	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description WEBSITE 5. Date Of Receipt: 09/19/2025 6. **Vendor Name & Address:** SQUARESPACE 225 VARICK ST, NEW YORK, NY 10014	$ 276.00	$ 20,889.87
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description MEETING / FOOD 5. Date Of Receipt: 09/19/2025 6. **Vendor Name & Address:** FOUNDERS BREWING 235 CESAR E. CHAVEZ AVE SW, GRAND RAPIDS, MI 49503	$ 41.98	$ 20,931.85
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description HALLOWEEN CANDY 5. Date Of Receipt: 09/21/2025 6. **Vendor Name & Address:** COSTCO 45460 MARKET ST, SHELBY TOWNSHIP, MI 48315	$ 77.46	$ 21,009.31
	Page Subtotal	395.44	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/25/2025 6. **Vendor Name & Address:** C&G PUBLISHING 13650 E 11 MILE RD, WARREN, MI 48089	$ 1,246.00	$ 22,255.31
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/25/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 421.38	$ 22,676.69
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description POSTAGE 5. Date Of Receipt: 09/29/2025 6. **Vendor Name & Address:** USPS 7007 METRO PKWY, STERLING HEIGHTS, MI 48311	$ 546.00	$ 23,222.69
	Page Subtotal	2,213.38	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 09/30/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 660.46	$ 23,883.15
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description YARD SIGNS 5. Date Of Receipt: 10/02/2025 6. **Vendor Name & Address:** SAWICKI & SON 1521 W LAFAYETTE BLVD, DETROIT, MI 48216	$ 1,582.05	$ 25,465.20
Contribution #3 PAC Receipt? ☐ Yes Name & Address: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315 **If over $100.00 cumulative, please provide:** Occupation: ADVERTISING EXECUTIVE Employer Name & Address: SELF EMPLOYED 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/04/2025 6. **Vendor Name & Address:** ITALIAN TRIBUNE PO BOX 380407, CLINTON TOWNSHIP, MI 48038	$ 400.00	$ 1,692.96
	Page Subtotal	2,642.51	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/04/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 561.47	$ 26,026.67
Contribution # 2 PAC Receipt? ☐ Yes Name & Address DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315 **If over $100.00 cumulative, please provide:** Occupation: ADVERTISING EXECUTIVE Employer Name & Address: SELF EMPLOYED 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 ☑ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description FUNDRAISER FOOD 5. Date Of Receipt: 10/08/2025 6. **Vendor Name & Address:** COSTCO 45460 MARKET ST, SHELBY TOWNSHIP, MI 48315	$ 27.99	$ 1,720.95
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☑ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description VOUCHER FOR POLISH CENTURY CLUB 5. Date Of Receipt: 10/08/2025 6. **Vendor Name & Address:** CAPUUCHIN SOUP KITCHEN 1820 MT ELLIOTT ST, DETROIT, MI 48207	$ 675.00	$ 26,701.67
	Page Subtotal	1,264.46	1,720.95
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/08/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 559.57	$ 27,261.24
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description WEBSITE 5. Date Of Receipt: 10/11/2025 6. **Vendor Name & Address:** GO DADDY 14455 HAYDEN RD, SCOTTSDALE, AZ 85260	$ 22.19	$ 27,283.43
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description HALLOWEEN CANDY 5. Date Of Receipt: 10/13/2025 6. **Vendor Name & Address:** COSTCO 45460 MARKET ST, SHELBY TOWNSHIP, MI 48315	$ 48.97	$ 27,332.40
	Page Subtotal	630.73	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/13/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 659.11	$ 27,991.51
Contribution # 2 PAC Receipt? ☐ Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/14/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 76.97	$ 28,068.48
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description STORAGE 5. Date Of Receipt: 10/14/2025 6. **Vendor Name & Address:** APPLE ONE APPLE PARK WAY, CUPERTINO, CA 95014	$ 0.99	$ 28,069.47
	Page Subtotal	737.07	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 **If over $100.00 cumulative, please provide:** Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TOWNSHIP, MI 48315 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- **LOAN** Description ADVERTISING 5. Date Of Receipt: 10/18/2025 6. **Vendor Name & Address:** META FOR BUSINESS 1 HACKER WY, MENLO PARK, CA 94025	$ 639.66	$ 28,709.13
Contribution # 2 PAC Receipt? ☐ Yes Name & Address **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$	$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$	$

Page Subtotal	639.66	28,709.13
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	9,986.46	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALAN CASMERE Address 28836 PANAMA ST WARREN, MI 48092 ☑ Fund Raiser	Purpose: REFUND OF EXCESS CONTRIBUTION ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/30/2025 Date	$ 90.00
Expenditure #2 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/03/2025 Date	$ 15.03
Expenditure #3 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/08/2025 Date	$ 2.08
Expenditure #4 Name MAILCHIMP Address 675 PONCE DE LEON AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: EMAIL SERVICE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/09/2025 Date	$ 92.00
Expenditure #5 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/11/2025 Date	$ 21.41

Subtotal this page	220.52
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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/12/2025 Date	$ 4.53
Expenditure #2 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/18/2025 Date	$ 15.03
Expenditure #3 Name THE MACOMB FUND Address PO BOX 46699 MT CLEMENS, MI 48046 ☐ Fund Raiser	Purpose: DONATION ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/2025 Date	$ 100.00
Expenditure #4 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/24/2025 Date	$ 1.16
Expenditure #5 Name CTE DEANNA KOSKI Address 15079 HARVEST MEADOWS DR STERLING HEIGHTS, MI 48313 ☐ Fund Raiser	Purpose: FUNDRAISER TICKET ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/24/2025 Date	$ 100.00

Subtotal this page	220.72
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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/25/2025 Date	$ 2.08
Expenditure #2 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/26/2025 Date	$ 1.16
Expenditure #3 Name CTE LIZ SIERAWSKI Address 40426 WILLIAM DR STERLING HEIGHTS, MI 48313 ☐ Fund Raiser	Purpose: FUNDRAISER TICKET ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2025 Date	$ 50.00
Expenditure #4 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2025 Date	$ 15.26
Expenditure #5 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/06/2025 Date	$ 32.85

Subtotal this page	101.35
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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/08/2025 Date	$ 24.74
Expenditure #2 Name MAILCHIMP Address 675 PONCE DE LEON AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: EMAIL SERVICE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2025 Date	$ 92.00
Expenditure #3 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2025 Date	$ 11.56
Expenditure #4 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/2025 Date	$ 10.91
Expenditure #5 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/14/2025 Date	$ 7.63

Subtotal this page	146.84
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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2025	$ 2.08
Expenditure #2 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____	$ _____
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____	$ _____
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____	$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____	$ _____

Subtotal this page	2.08
Grand Total of all Schedules 1B (Complete on last page of Schedule)	691.51

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. **Date Debt Was Incurred**: 06/27/2018 6. **Original Amount of Debt**: $ 700.00	11/22/21 $ 656.99 $ $ $ $	$ 656.99	$ 43.01 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 08/24/2018 6. **Original Amount of Debt**: $ 650.00	$ $ $ $ $	$ 0.00	$ 650.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/24/2018 6. **Original Amount of Debt**: $ 485.17	11/20/19 $ 334.73 $ $ $ $	$ 334.73	$ 150.44 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 843.45

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 01/23/2019 6. **Original Amount of Debt**: $ 497.50	$ $ $ $ $	$ 0.00	$ 497.50 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 01/24/2019 6. **Original Amount of Debt**: $ 746.25	$ $ $ $ $	$ 0.00	$ 746.25 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. **Date Debt Was Incurred**: 04/03/2019 6. **Original Amount of Debt**: $ 1,000.00	$ $ $ $ $	$ 0.00	$ 1,000.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 2,243.75

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 09/20/2019 6. **Original Amount of Debt**: $ 386.96	$ $ $ $ $	$ 0.00	$ 386.96 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. **Date Debt Was Incurred**: 10/18/2019 6. **Original Amount of Debt**: $ 2,500.00	$ $ $ $ $	$ 0.00	$ 2,500.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/19/2019 6. **Original Amount of Debt**: $ 3,473.24	$ $ $ $ $	$ 0.00	$ 3,473.24 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 6,360.20

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 11/25/2019 6. **Original Amount of Debt**: $ 2,058.96	$ $ $ $ $	$ 0.00	$ 2,058.96 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/20/2020 6. **Original Amount of Debt**: $ 836.48	$ $ $ $ $	$ 0.00	$ 836.48 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/20/2020 6. **Original Amount of Debt**: $ 322.97	$ $ $ $ $	$ 0.00	$ 322.97 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 3,218.41

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/31/2020 6. **Original Amount of Debt**: $ 618.61	$ $ $ $ $	$ 0.00	$ 618.61 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/18/2021 6. **Original Amount of Debt**: $ 3,625.96	$ $ $ $ $	$ 0.00	$ 3,625.96 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 08/23/2021 6. **Original Amount of Debt**: $ 1,227.48	$ $ $ $ $	$ 0.00	$ 1,227.48 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 5,472.05

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/17/2021 6. **Original Amount of Debt**: $ 4,618.98	$ $ $ $ $	$ 0.00	$ 4,618.98 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 11/02/2021 6. **Original Amount of Debt**: $ 3,362.54	$ $ $ $ $	$ 0.00	$ 3,362.54 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/20/2022 6. **Original Amount of Debt**: $ 408.79	$ $ $ $ $	$ 0.00	$ 408.79 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 8,390.31

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/20/2022 6. **Original Amount of Debt**: $ 821.54	$ $ $ $ $	$ 0.00	$ 821.54 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/31/2022 6. **Original Amount of Debt**: $ 559.16	$ $ $ $ $	$ 0.00	$ 559.16 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/31/2022 6. **Original Amount of Debt**: $ 105.45	$ $ $ $ $	$ 0.00	$ 105.45 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $				

Page Subtotal (Outstanding debt) 1,486.15

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 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/20/2023 6. **Original Amount of Debt**: $ 629.00	$ $ $ $ $	$ 0.00	$ 629.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. **Date Debt Was Incurred**: 07/24/2023 6. **Original Amount of Debt**: $ 300.00	$ $ $ $ $	$ 0.00	$ 300.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: LOAN 5. **Date Debt Was Incurred**: 10/02/2023 6. **Original Amount of Debt**: $ 1,000.00	$ $ $ $ $	$ 0.00	$ 1,000.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 1,929.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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.
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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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/20/2023 6. **Original Amount of Debt**: $ 738.76	$ $ $ $ $	$ 0.00	$ 738.76 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/31/2023 6. **Original Amount of Debt**: $ 811.30	$ $ $ $ $	$ 0.00	$ 811.30 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/20/2024 6. **Original Amount of Debt**: $ 705.36	$ $ $ $ $	$ 0.00	$ 705.36 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $				

Page Subtotal (Outstanding debt) 2,255.42

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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.
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Debt #1 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/20/2024 6. **Original Amount of Debt**: $ 915.25	$ $ $ $ $	$ 0.00	$ 915.25 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 12/31/2024 6. **Original Amount of Debt**: $ 828.42	$ $ $ $ $	$ 0.00	$ 828.42 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 07/20/2025 6. **Original Amount of Debt**: $ 3,090.66	$ $ $ $ $	$ 0.00	$ 3,090.66 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				

Page Subtotal (Outstanding debt) 4,834.33

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

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.
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Debt #1 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 08/25/2025 6. **Original Amount of Debt**: $ 1,247.40	$ $ $ $ $	$ 0.00	$ 1,247.40 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ 0				
Debt #2 Corp? ☐ Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. **Date Debt Was Incurred**: 10/19/2025 6. **Original Amount of Debt**: $ 9,558.47	$ $ $ $ $	$ 0.00	$ 9,558.47 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: 5. **Date Debt Was Incurred**: 6. **Original Amount of Debt**: $	$ $ $ $ $	$	$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 10,805.87

Grand Total of all Schedules 1E 47,838.94
(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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 139377

2. Committee Name CITIZENS FOR MICHAEL RADTKE

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. 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.
10/08/2025	67	40TH BIRTHDAY BASH	CENTURY BANQUET CENTER 33204 MAPLE LN DR STERLING HEIGHTS, MI 48312 ☐ Private Residence

7. Total Contributions 14,857.04

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 14,857.04

10. Total Cost of Event 792.99
(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 (%)

- 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.