



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

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

FILED
06 AUG 29 PM 3:37
CARROLL A. SABAUGH
MACOMB COUNTY CLERK
MACOMB COUNTY, MICHIGAN

FOR OFFICIAL USE ONLY

This Statement covers From: 1-1-06 to 7-23-06
Mo Day Year Mo Day Year

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROWN

4. Candidate Last Name

BROWN

First Name

DON

M.I.

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

MACOMB COUNTY COMMISSIONER, DISTRICT 13

4b. County of Residence

Macomb

5. Committee's Mailing Address

64647 NORWICH
WASHINGTON MI 48095

Area Code and Phone

586-752-5968

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

DON BROWN

64647 NORWICH CIRCLE

WASHINGTON MI 48095

Area Code & Phone

(586) 752-5968

7. Treasurer's Business Address

10 S. MAIN

MT. CLEMENS MI

48093

Area Code and Phone

(586) 469-5125

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

N/A

Area Code and Phone ()

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

8-8-06

Month Day Year

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

Effective Date of Dissolution

Month Day Year

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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

Don Brown

Type or Print Name

Don Brown

Signature

Date

8-28-06

Mo Day Year

Candidate

Don Brown

Type or Print Name

Don Brown

Signature

Date

8-28-06

Mo Day Year

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROWN

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	7,975.00	(18.) \$
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	(19.) \$
c. Subtotal of "Contributions"	(3c.) \$		(20.) \$ 7,975.00
4. Other Receipts (Schedule 1A -1, Column 6)			
(4.) \$			
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)			
(5.) \$			
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)			
(6.) \$		111.68	(21.) \$ 111.68
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)			
(7.) \$			(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	13,943.34	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)			
(9.) \$			(23.) \$ 13,943.34
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)			
(11.) \$			(24.) \$ 0
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)			
(13.) \$		8626.00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)			
(14.) + \$		7,975.00	
15. SUBTOTAL Add lines 13 and 14			
(15.) = \$		16,601	
16. Amount expended during reporting period (Add lines 9 and 11)			
(16.) - \$		13,943.34	
17. ENDING BALANCE (Subtract line 16 from line 15)			
(17.) \$		2,657.66	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BREWER

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 from committees 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 <u>5-10-06</u> Name: <u>DERMIS STEVENSON</u> Address: <u>59837 GLADIER SPRING</u> <u>80575 HOLMES ARMADA MI 48094</u> <u>WASHINGTON MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>KEN BELOCK</u> Address: <u>80575 HOLMES ARMADA MI 48005</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>WILLIAM SCULLY</u> Address: <u>421-29 TODDMARK CLINTON TWP MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DONALD KEHRIG</u> Address: <u>19441 ARMADA COAST ARMADA MI 48005</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		300.00	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE Donor

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 from committees 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 5-10-06

Name:

ROBERT CLANCY

Address: 6963 TIMBERCREST WASHINGTON MI 48094

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

Occupation _____ Employer _____

Business Address _____

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

50.00

50.00

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 5-10-06

Name:

CYRIL RAPEZZI

Address: 8661 N. FERNWOOD CT. WASHINGTON MI 48094-1832

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

Occupation _____ Employer _____

Business Address _____

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

50.00

50.00

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 5-10-06

Name:

GARY SCHOCKE

Address: 8960 PIPPEN P.O. BOX 176 Romeo MI 48065

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

Occupation _____ Employer _____

Business Address _____

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

100.00

100.00

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 5-10-06

Name:

Carl DALLG

Address: 41544 RED OAK STERLING HEIGHTS MI 48314

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

Occupation _____ Employer _____

Business Address _____

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

100.00

100.00

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

300.00

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line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROW

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 from committees 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 <u>5-10-06</u> Name: <u>Jeffery Fritz</u> Address: <u>64471 VANDYKE WASHINGTON MI 48095</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-12-06</u> Name: <u>COMMITTEE FOR RESPONSIBLE GOVERNMENT</u> Address: <u>444 MICHIGAN AVE RM 1570 DETROIT MI 48226</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>GARY ANTHONY</u> Address: <u>11050 WEALTHY LN ROMEO MI 48065</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>JAMES KULPA</u> Address: <u>4612 RIVERS EDGE TROY MI 48098</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		300.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE Now Board

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 from committees 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 <u>5-10-06</u> Name: <u>FRAN GILLET</u> Address: <u>8351 PARKLA SHELBY TWP MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>JOHN ROE</u> Address: <u>21 KERCHVAL, GROSSE POINTE FARMS MI 48136</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>RALPH MACCARONE</u> Address: <u>13921 BASILISK CHASE DR SHELBY TWP MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>CHESTER KEMPA</u> Address: <u>67422 HIDDEN OAK LN. WASHINGTON MI 48095</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		350.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROWN

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 from committees 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 <u>5-10-06</u> Name: <u>LYLE WINT</u> Address: <u>67263 HIDDEN OAK WASHINGTON MI 48095</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>KEITH RENGETT</u> Address: <u>34080 ARMADA RIDGE RICHMOND MI 48062</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		25.00	25.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>ALAN POLACK</u> Address: <u>45684 VILLAGE SHELBY MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DOVE DIEGAL</u> Address: <u>3270 GRANDVIEW CT SHELBY MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		175.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE Dan Brown

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 from committees 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 <u>5-10-06</u> Name: <u>PAUL LEMLEY</u> Address: <u>6542 WESTRIDGE WASHINGTON MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DAVID DEREES</u> Address: <u>134 W. ST. CLAIR ROMEO MI 48065</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>GORDON WENTHERHEAD</u> Address: <u>4491 N. RIVER ROAD FORT GRATIOT MI 48059</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DONALD M. BROWN</u> Address: <u>1022 EAGLE NEST CT. ROCHASTER MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address <u>N/A</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		150.00	150.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		450.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROWN

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 from committees 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 <u>5-10-06</u> Name: <u>William Black</u> Address: <u>6164 Wedgewood Washington MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>Henry Mather</u> Address: <u>61294 Wedgewood Dr. Washington MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		100.00	100.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>William Bellaire</u> Address: <u>2161 Willow Circle Shelby MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>GASTANO RIZZO</u> Address: <u>44899 Centre Court, STE 101 Clinton Twp MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		300.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE BOB BREWER

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 from committees 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 <u>5-10-06</u> Name: <u>ANTHONY BENEVATI</u> Address: <u>58955 MOUND, WASHINGTON MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>PAUL COLLINS</u> Address: <u>52353 MOUND SHELBY TWP MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>RANDY JACKSON</u> Address: <u>12300 30 MILE ROAD WASHINGTON MI 48095</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	50.00	50.00	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DOUGLAS COLOMBO</u> Address: <u>70322 MOUNTAIN CREEK CT. ROMEO MI 48065</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	25.00	25.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		<u>275.00</u>	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69898

2. Committee Name

CTE Don Brown

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 from committees 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 <u>5-10-06</u> Name: <u>MICHAEL HOLYCRASS</u> Address: <u>220 PARK STREET, STE 220 BIRMINGHAM MI 48009-3477</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>ROBERT SPWACK</u> Address: <u>23273 DOREMUS ST. CLAIR SHORES, MI 48086</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>ARM WELSH</u> Address: <u>79720 KROEN RD Romeo MI 48065</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00	
3. Contribution #4 PAC Receipt? ☒ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>DETROIT REGIONAL CHAMBER PAC</u> Address: <u>1 WOODWARD AVE, P.O. Box 33840 DETROIT MI 48232-0840</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	50.00	50.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		350.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

~~69598~~ 69598

2. Committee Name

CTE Dan Brown

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? ☐ YES Name: <u>ANTONINO SCAVO</u> Address: <u>67209 HIDDEN OAK W WASHINGTON MI 48095</u> 4. Date of Receipt: <u>5-10-06</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00	
3. Contribution #2 PAC Receipt? ☐ YES Name: <u>GORDON WERTHERHEAD</u> Address: <u>555 ST. CLAIR DR. ALGONAC MI 48001-1802</u> 4. Date of Receipt: <u>5-10-06</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00	
3. Contribution #3 PAC Receipt? ☐ YES Name: _____ Address: _____ 4. Date of Receipt: _____ 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 Name: _____ Address: _____ 4. Date of Receipt: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00		

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69598

2. Committee Name

CTE DON BROWN

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 from committees 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 <u>5-10-06</u> Name: <u>KATHLEEN YAZBECK</u> Address: <u>59071 MOONCRECK CT. WASHINGTON MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		40.00	40.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>RICHARD ZETTIE</u> Address: <u>12359 MOERS STERLING HTS MI 48313-2581</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>JOHN REID</u> Address: <u>1010 GENESEE ROYAL OAK MI 48073</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>GREAT LAKES AIR SYSTEMS</u> Business Address <u>1238 ANDERSON CT CLAWSON MI 48012</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		150.00	150.00
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>5-10-06</u> Name: <u>JAMES VANSTEENKISTE</u> Address: <u>21541 25 MILE RD MACOMB MI 48042</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		290.00	
		2,975	

Enter this total on
line 3 of Summary
Page.