MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
10 JUL 28 PM 4:32
CAROLLA SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 01/01/10 To: 07/19/10

1. Committee I.D. Number
135864

2. Committee Name
Robert Mijac for County Commissioner

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

4a. Office Sought Including District # or Community Served (If applicable)
County Commissioner District 5

4b. County of Residence Macomb

5. Committee's Mailing Address
37325 Evergreen Drive
Sterling Heights, MI 48310

Area Code and Phone (586) 979-5696
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
Robert Mijac
37325 Evergreen Drive
Sterling Heights, MI 48310

Area Code & Phone

7. Treasurer's Business Address

Area Code and Phone

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

Area Code and Phone

9. TYPE OF STATEMENT

9a. [✓] Pre-Election OR 9b. [ ] Post-Election

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

Pre-Election or Post-Election Statement relates to:

[✓] Primary [ ] General
[ ] Convention [ ] School
[ ] Special [ ] Caucus

Date of Election, Convention or Caucus
08/03/10

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: Robert Mijac (Type or Print Name) / (Signature) Date: 7-21-10

Candidate: Robert Mijac (Type or Print Name) / (Signature) Date: 7-21-10

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 135864

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Robert Mijac for County Commissioner

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	3,150.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	$3,150.00	(18.) $ $24,150.00
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.) $	$3,150.00	(20.) $ $24,150.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	$0.00	(21.) $ $0.00
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.) $	$750.00	
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.) $	$750.00	(23.) $ $1,545.17
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.) $	$20,000.00	
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.) $	$22,591.38
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	$3,150.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	$25,741.38
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	$750.00
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	$24,991.38 *

Grand Total of All Schedules 1A (Complete on last page of Schedule) $100.00
Enter this total on line 3a of Summary Page.

Page _____ of _____

Business Address _____

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

Page Subtotal $200.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) $300.00
Enter this total on line 3a of Summary Page.

Page _____ of _____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Jon Switalski
31705 Forest Lane
Warren MI 48093

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Anna Djurovic
32716 Exeter
Warren, MI 48092

$ 50 $

6. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Ed Bruley
38157 Radde
Clinton Twp, MI 48036

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

John Axe
21 Kercheval Ave Ste 355
Grosse Pointe, MI 48236

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal	$200.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$500.00

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Violet Sarcevich
35973 Old Homestead
Farmington Hills MI 48335

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Dominic Abbate
2500 Royal View
Oakland, MI 48363

$ 50 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Nikola Maros
20300 Lochmoor St
Harper Woods, MI 48225

$ 50 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Anthony Marrocco Victory PAC
PO Box 665
Mt Clemens MI 48046

$ 50 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	$200.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$700.00

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Dr Peggy Kennard
33336 Jefferson Ave
St Clair Shores MI 48082

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Ray Schauer
43183 Hartwick
Sterling Heights MI 48313

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Slavko Stojanovic
13464 Karl
Plymouth MI 48170

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Vule Trajlov
49736 Cooke Ave
Plymouth MI 48170

$ 50 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal	$200.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$900.00

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Louiza Kontic
47860 Lighthouse Dr
Macomb MI 48044

$ 75 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Roy Rose
55620 Woodridge
Shelby Twp MI 48316

$ 75 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Dave Flynn
8641 Hickory
Sterling Hts MI 48312

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Rick Flynn
43225 Chardonnay
Sterling Hts MI 48314

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

Page Subtotal	$350.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$1,250.00

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 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Spiro Kascelan
36117 Del Ray
Sterling Hts MI 48310

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Robert Leonetti
29528 N Seaway Ct
Harrison Twp MI 48045

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Mike Skorich
4648 Berkshire
Sterling Hts MI 48314

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

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3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Sonja Buffa
8771 Estate Plaze
Warren, MI 48093

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal	$400.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$1,650.00

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 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Louis Burdi
4901 N Grand Oaks Drive
Warren MI 48092

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Joe Lentine
29377 Hoover
Warren MI 48093

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Pete Perovich
8550 E 14 Mile
Warren MI 48093

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Peter Chelovich
117 Marblehead
Bloomfield Hills MI 48304

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal $400.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) $2,050.00

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10

Name & Address:

Dan Dirks
39538 Timberlane
Sterling Hts MI 48310

$ 100 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Click Here for Memo Itemization

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address

Irene Kepler
19530 Stanford Lane
Roseville MI 48066

$ 100 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/10

Name & Address:

Sam Radulovich
3654 Balfour
Detroit MI 48224

$ 100 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10

Name & Address

Steve Saph Jr
44 Macomb Place
Mt Clemens MI 48043

$ 100 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	$400.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$2,450.00

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 135864

2. Committee Name Robert Mijac for County Commissioner

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 04/08/10
Name & Address:

Dianne Mijac
1511 Brandywine Drive
Bloomfield Hills MI 48304

$ 200 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☑ YES 4. Date of Receipt 04/08/10
Name & Address

MEA Local 1 PAC
38550 Garfield Ste B
Clinton Twp, MI 48038

$ 500 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt
Name & Address:

$ $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt
Name & Address

$ $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal	$700.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	$3,150.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Jovans Address Dodge Park Road Sterling Heights, MI ☑ Fund Raiser	Purpose: Fundraiser Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/08/10	$ 750
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	$750.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	$750.00

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 135864

2. Committee Name Robert Mijac for County Commissioner

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: Robert Mijac 37325 Evergreen Sterling Hts MI 48310	4. Type: 5. **Date Debt Was Incurred**: 12/20/09 6. **Original Amount of Debt**: $ 20,000	$ $ $ $ $	$ 0	$ 20000 [ ] FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	
Debt #2 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: $	
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) $20,000.00

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) $20,000.00

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.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 135864

2. Committee Name Robert Mijac for County Commissioner

- 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.
04/08/10	50	Reception	Jovans Dodge Park Sterling Hts MI ☐ Private Residence

7. Total Contributions $3,150.00

8. Other Receipts $0.00

9. Gross Receipts (Add lines 7 and 8) $3,150.00

10. Total Cost of Event $750.00
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)

- 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.