

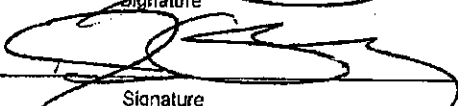


MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**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.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>1. Committee I.D. Number<br/><b>135880</b></p> <p>2. Committee Name<br/><b>Citizens To Elect James M. Perna</b></p> <p>5. Committee's Mailing Address<br/><b>38180 Saddle Lane<br/>Clinton Township, MI 48036</b></p> <p>Area Code and Phone <b>(586) 286-3504</b><br/>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.</p> <p>7. Treasurer's Business Address<br/><b>600 E. Lafayette<br/>Detroit, MI 48226</b></p> <p>Area Code and Phone <b>(313) 225-9755</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <p>3. This Statement covers From: <b>10/18/10</b> to <b>11/22/10</b></p> <p>4. Candidate Last Name <b>Perna</b> First Name <b>James</b> M.I. <b>M</b></p> <p>4a. Office Sought Including District # or Community Served (If applicable)<br/><b>County Commissioner</b></p> <p>4b. County of Residence <b>Macomb</b></p> <p>6. Treasurer's Name &amp; Residential Address<br/><b>James M. Perna<br/>38180 Saddle Lane<br/>Clinton Township, MI 48036</b></p> <p>Area Code &amp; Phone <b>(586) 286-3504</b></p> <p>8. Designated Record keeper's Name and Mailing Address (If the Committee has a Designated Record keeper)<br/><b>James M. Perna<br/>38180 Saddle Lane<br/>Clinton Township, MI 48036</b></p> <p>Area Code and Phone _____</p> |  |
| <p><b>9. TYPE OF STATEMENT</b></p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Convention <input type="checkbox"/> School<br/> <input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus<br/><b>11/02/10</b></p> <p>9c. <input type="checkbox"/> Annual Statement ( _____ Coverage Year)<br/> 9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)<br/> 9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution _____</p> <p>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.<br/> Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <p>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.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <p><b>10. Verification:</b> 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.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <p>Current Treasurer or Designated Record keeper <b>James Perna</b><br/>Type or Print Name</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | <p><br/>Signature Date <b>12/15/10</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <p>Candidate <b>James Perna</b><br/>Type or Print Name</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <p><br/>Signature Date <b>12/15/10</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number

135880

2. Committee Name

CTE James Perna

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

| RECEIPTS                                                                                        |            | Column I<br>This Period | Column II<br>Cumulative this election cycle |
|-------------------------------------------------------------------------------------------------|------------|-------------------------|---------------------------------------------|
| <b>3. Contributions</b>                                                                         |            |                         |                                             |
| a. Itemized (Schedule 1A - Column 6)                                                            | (3a.) \$   | <u>13,980.00</u>        |                                             |
| b. Unitemized (less than \$20.01 each - no Schedule)                                            | (3b.) \$   | <u>NOT APPLICABLE</u>   |                                             |
| c. Subtotal of "Contributions"                                                                  | (3c.) \$   | <u>13,980.00</u>        | (18.) \$ <u>33794.00</u>                    |
| 4. Other Receipts (Schedule 1A -1, Column 6)                                                    | (4.) \$    | <u>0</u>                | (19.) \$ <u>0</u>                           |
| <b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b><br>(Add Line 3c + Line 4)                      | (5.) \$    | <u>13,980.00</u>        | (20.) \$ <u>33794.00</u>                    |
| <b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>                                                 |            |                         |                                             |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7)                                              | (6.) \$    | <u>0</u>                | (21.) \$ <u>0</u>                           |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6)                                              | (7.) \$    | <u>253.33</u>           | (22.) \$ <u>1216.13</u>                     |
| <b>EXPENDITURES</b>                                                                             |            |                         |                                             |
| <b>8. Expenditures</b>                                                                          |            |                         |                                             |
| a. Itemized (Schedule 1B, Column 6)                                                             | (8a.) \$   | <u>8158.03</u>          |                                             |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G)                                                    | (8b.) \$   | <u>0</u>                |                                             |
| c. Unitemized (less than \$50.01 each - no Schedule)                                            | (8c.) \$   | <u>0</u>                |                                             |
| <b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)                                  | (9.) \$    | <u>8158.03</u>          | (23.) \$ <u>27949.18</u>                    |
| <b>INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(Officeholders Only)                                 |            |                         |                                             |
| <b>10. Disbursements</b>                                                                        |            |                         |                                             |
| a. Itemized (Schedule 1C, Column 6)                                                             | (10a.) \$  |                         |                                             |
| b. Unitemized (less than \$50.01 each - no Schedule)                                            | (10b.) \$  |                         |                                             |
| <b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(Add Line 10a + Line 10b)                  | (11.) \$   |                         | (24.) \$ <u>0</u>                           |
| <b>DEBTS AND OBLIGATIONS</b>                                                                    |            |                         |                                             |
| <b>12. Debts and Obligations</b>                                                                |            |                         |                                             |
| a. Owed by the Committee (Schedule 1E)                                                          | (12a.) \$  | <u>71,425.76</u>        |                                             |
| b. Owed to the Committee (Schedule 1E)                                                          | (12b.) \$  |                         |                                             |
| <b>BALANCE STATEMENT</b>                                                                        |            |                         |                                             |
| 13. Ending Balance of last report filed<br>(Enter zero if no previous reports have been filed.) | (13.) \$   | <u>62.19</u>            |                                             |
| 14. Amount received during reporting period<br>(Line 5, Total Contributions & Other Receipts)   | (14.) + \$ | <u>13980.00</u>         |                                             |
| 15. SUBTOTAL Add lines 13 and 14                                                                | (15.) = \$ | <u>14042.19</u>         |                                             |
| 16. Amount expended during reporting period<br>(Add lines 9 and 11)                             | (16.) - \$ | <u>8158.03</u>          |                                             |
| <b>17. ENDING BALANCE</b><br>(Subtract line 16 from line 15)                                    | (17.) \$   | <u>5884.16</u>          |                                             |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

135880

2. Committee Name

CTE James Perna

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 10.18.10

Name & Address:

James Perna  
38180 Saddle Lane  
Clinton Township, MI 48036

\$2000.00

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

Occupation CEO

Employer Health One Credit Union

[Click Here for Memo Itemization](#)

Business Address 1000 E. Lafayette Detroit, MI 48226

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 10.19.10

Name & Address:

John Becker  
20129 Windham Dr.  
Macomb, MI 48044

\$100.00

\$100.00

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

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

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

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 10.19.10

Name & Address:

James Perna  
38180 Saddle  
Clinton Township, MI 48036

\$30.00

\$

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

Occupation CEO

Employer Health One Credit Union

[Click Here for Memo Itemization](#)

Business Address 1000 E. Lafayette Detroit, MI 48226

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 10.19.10

Name & Address:

Joseph Monahan  
38352 Delta  
Clinton Township, MI 48036

\$100.00

\$100.00

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

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

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

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

Page Subtotal

2230.00

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

135880

2. Committee Name

CTE James Perna

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>10.20.10</u> |                                                                                 |
| Name & Address:<br><u>Yousif Ghafari</u><br><u>17101 Michigan Ave.</u><br><u>Dearborn, MI 48126</u>                                                                                                                                                                            |                                           | \$ <u>100.00</u>                   | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                             |                                           | Click Here for Memo Itemization    |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                         |                                           |                                    |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                              |                                           |                                    |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>10.20.10</u> |                                                                                 |
| Name & Address:<br><u>John Brandenburg</u><br><u>37596 Huron Pointe Dr.</u><br><u>Harrison Township, MI 48045</u>                                                                                                                                                              |                                           | \$ <u>200.00</u>                   | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Owner</u> Employer <u>Blue Water Industrial</u>                                                                                                                                                               |                                           | Click Here for Memo Itemization    |                                                                                 |
| Business Address <u>25 Eldredge St #2 Mount Clemens, MI 48043</u>                                                                                                                                                                                                              |                                           |                                    |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                              |                                           |                                    |                                                                                 |
| 3. Contribution #3                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>10.20.10</u> |                                                                                 |
| Name & Address:<br><u>Patricia Stumb</u><br><u>467 Lakeland St.</u><br><u>Grosse Pointe, MI 48230</u>                                                                                                                                                                          |                                           | \$ <u>100.00</u>                   | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                             |                                           | Click Here for Memo Itemization    |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                         |                                           |                                    |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                              |                                           |                                    |                                                                                 |
| 3. Contribution #4                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>10.21.10</u> |                                                                                 |
| Name & Address:<br><u>William Ducomb</u><br><u>2850 Hounds Chase</u><br><u>Troy, MI 48098</u>                                                                                                                                                                                  |                                           | \$ <u>100.00</u>                   | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                             |                                           | Click Here for Memo Itemization    |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                         |                                           |                                    |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                              |                                           |                                    |                                                                                 |

Page Subtotal

500.00

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 135880

2. Committee Name CTE James Perna

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 10-21-10

Name & Address: Vince Bellamo  
39737 MT. ELLIOTT  
Clinton Township, MI 48038

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

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

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 10-21-10

Name & Address: Don Gooley  
P.O. Box 509  
St. Clair Shores, MI 48080

\$ 50.00 \$ 50.00

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

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

[Click Here for Memo Itemization](#)

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

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

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt \_\_\_\_\_

Name & Address: \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

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

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

[Click Here for Memo Itemization](#)

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

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

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 10-22-10

Name & Address: Joe Lentine  
29377 Hoover Rd  
Warren, MI 48093

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

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

Page Subtotal

250.00

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 135880

2. Committee Name CTE James Perna

| 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<br>Name & Address: <u>Anthony Lentine</u><br><u>29377 Hoover Rd.</u><br><u>Warren, MI 48093</u>                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.22.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                          |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address: <u>Sam Lentine</u><br><u>29377 Hoover Rd.</u><br><u>Warren, MI 48093</u>                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.22.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                          |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 3<br>Name & Address: <u>Dominic Abbate</u><br><u>2500 Royal View Dr.</u><br><u>Oakland, MI 48363</u>                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.22.10</u> | \$ <u>100.00</u>                | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Consultant</u> Employer <u>SELF</u><br>Business Address <u>2500 Royal View Dr. Oakland, MI 48363</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 4<br>Name & Address: <u>Douglas Pertzsch</u><br><u>8017 Banner St.</u><br><u>Taylor, MI 48180</u>                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.22.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                          |                                                                                 | Click Here for Memo Itemization |                                                                                 |

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

135880

2. Committee Name

CTE James Perna

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

10.22.10

Name &amp; Address:

Conrad Sobczynski  
72 Handy  
Grosse Pointe Farms, MI 48236

\$200.00\$450.00

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

Occupation

Director

Employer

Glacial Energy

Click Here for Memo Itemization

Business Address

74631 Jefferson St Clair Shrs, MI 48080

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

10.22.10

Name &amp; Address

Duane Beeman  
78572 Cryderman Rd.  
Richmond, MI 48062

\$200.00\$200.00

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

Occupation

ATTORNEY

Employer

SELF

Click Here for Memo Itemization

Business Address

78572 Cryderman Rd. Richmond, MI 48062

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

10.22.10

Name &amp; Address:

Sharon Concell  
69900 Hicks  
Armada Twp, MI 48005

\$200.00\$200.00

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

Occupation

Housewife

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

Name &amp; Address

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

Occupatio

Employe.

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☐ Fund Raiser

Page Subtotal

600.00

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

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

135880

2. Committee Name

CTE James Perna

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

10-22-10

Name &amp; Address:

Sam Vagnetti  
53688 Riveridge Dr.  
Shelby Twp, MI 48316

\$100.00\$100.00

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

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

10-22-10

Name &amp; Address

Louis James  
17154 Fairway Dr.  
Detroit, MI 48221

\$200.00\$200.00

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

Occupation

Owner

Employer

SELF

Click Here for Memo Itemization

Business Address

17154 Fairway Dr. Detroit, MI 48221

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

10-22-10

Name &amp; Address:

Curtis Hertel  
1464 Blairmoor Ct.  
Grosse Pointe, MI 48236

\$200.00\$200.00

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

Occupation

Director

Employer

Port Authority

Click Here for Memo Itemization

Business Address

Jefferson, Detroit, MI 48226

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

10-22-10

Name &amp; Address

Paul Youngblood  
1027 Audubon Road  
Grosse Pointe Park, MI 48230

\$100.00\$100.00

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

Occupation

Employee:

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

Page Subtotal

600.00

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

135880

2. Committee Name

CTE James Perna

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? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

John Rademaker  
18740 Devisscher St  
Clinton Twp, MI 48036

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser3. Contribution #2 PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Michael Locricchio  
38202 Saddle Lane  
Clinton Twp, MI 48036

\$ 150.00 \$ 150.00

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

Occupation Attorney Employer SELF[Click Here for Memo Itemization](#)Business Address 38202 Saddle Lane Clinton Twp MI 48036Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser3. Contribution #3 PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

William Kingsley  
529 W. Frank St.  
Birmingham, MI 48009

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser3. Contribution #4 PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Timothy Caughlin  
183 Longford Drive  
Rochester Hills, MI 48309

\$ 100.00 \$ 100.00

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

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

[Click Here for Memo Itemization](#)

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

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

Page Subtotal

450.00

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 135880  
2. Committee Name CIE James Perna

| 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 <u>all</u> contributions regardless of amount. |                                                                                 | 6. Amount                       | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------|
| 3. Contribution #1<br>Name & Address:<br><u>Steven McCarty</u><br><u>2654 Invitational Dr.</u><br><u>Oakland Township, MI 48363</u>                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-22-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:<br><u>Thomas Campau</u><br><u>3120 Andora Dr.</u><br><u>Superior Township, MI 48198</u>                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-22-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3<br>Name & Address:<br><u>Charles Baker</u><br><u>72 Vernier Rd.</u><br><u>Grosse Pointe, MI 48236</u>                                                                                                                                                              | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-22-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4<br>Name & Address:<br><u>Daniell Patterson</u><br><u>15594 Jonas</u><br><u>Allen Park, MI 48101</u>                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-22-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |

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

135880

2. Committee Name

CTE James Perna

| 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 <u>all</u> contributions regardless of amount. |                                           | 6. Amount                       | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------|---------------------------------------------------------------------------------|
| 3. Contribution #1                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              | <u>10-22-10</u>                                                                 |
| Name & Address:<br><u>Marsha Santicchia</u><br><u>23811 Oxford</u><br><u>Dearborn, MI 48124</u>                                                                                                                                                                                       |                                           | <u>\$100.00</u>                 | <u>\$100.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                                    |                                           | Click Here for Memo Itemization |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                 |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                 |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              | <u>10-22-10</u>                                                                 |
| Name & Address:<br><u>Mark Mueller</u><br><u>29350 Jefferson Ave.</u><br><u>St. Clair Shores, MI 48081</u>                                                                                                                                                                            |                                           | <u>\$200.00</u>                 | <u>\$200.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Owner</u> Employer <u>TMR Associates</u>                                                                                                                                                                             |                                           | Click Here for Memo Itemization |                                                                                 |
| Business Address <u>38 W Adams Ave STE 300 Detroit, MI 48226</u>                                                                                                                                                                                                                      |                                           |                                 |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                 |                                                                                 |
| 3. Contribution #3                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              | <u>10-22-10</u>                                                                 |
| Name & Address:<br><u>Todd Bensley</u><br><u>11197 Chapman Court</u><br><u>Bruce Township, MI 48065</u>                                                                                                                                                                               |                                           | <u>\$100.00</u>                 | <u>\$100.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                                    |                                           | Click Here for Memo Itemization |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                 |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                 |                                                                                 |
| 3. Contribution #4                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              | <u>10-22-10</u>                                                                 |
| Name & Address:<br><u>Gerald Grady JR.</u><br><u>42071 Hunters Rdg</u><br><u>Canton, MI 48188</u>                                                                                                                                                                                     |                                           | <u>\$100.00</u>                 | <u>\$100.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____                                                                                                                                                                                                    |                                           | Click Here for Memo Itemization |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                 |                                                                                 |
| Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                 |                                                                                 |

Page Subtotal

500.00

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

135880

2. Committee Name

CRE James Perna

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? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Chris Peterson  
9201 Davisburg Rd.  
Clarkston, MI 48348

\$ 100.00 \$ 100.00

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

Click Here for Memo Itemization

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

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

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Pamela Callan  
1117 Edgewood Dr.  
Royal Oak, MI 48067

\$ 100.00 \$ 100.00

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

Click Here for Memo Itemization

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

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

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Stephen Cheaney  
44075 Galway Dr.  
Northville, MI 48167

\$ 100.00 \$ 100.00

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

Click Here for Memo Itemization

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

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

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Cleatus Spacht  
5055 Mansfield Apt 335  
Royal Oak, MI 48073

\$ 100.00 \$ 100.00

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

Click Here for Memo Itemization

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

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

Type of Contribution:

☒ Direct☐

Loan from a person

☐

Fund Raiser

Page Subtotal

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

135880

2. Committee Name

CTE James Perna

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? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address:

Robert Fitzpatrick  
5445 Shoshoni Pass  
Pinckney, MI 48169

\$ 200.00 \$ 400.00

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

Occupation

Consultant

Employer

Self-employed

Click Here for Memo Itemization

Business Address

5445 Shoshoni Pass Pinckney MI 48169

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES4. Date of Receipt 10-22-10

Name &amp; Address

Deborah Bari  
55387 Rifle Court  
Macomb Twp, MI 48042

\$ 100.00 \$ 100.00

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

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES4. Date of Receipt 10-25-10

Name &amp; Address:

Patrick Gregory  
P.O. Box 5004  
Southfield, MI 48086

\$ 100.00 \$ 100.00

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

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES4. Date of Receipt 10-25-10

Name &amp; Address

Scott Earls  
47300 Labana Dr.  
Canton, MI 48187

\$ 100.00 \$ 100.00

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

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☒ Direct☐ Loan from a person☐ Fund Raiser

Page Subtotal

500.00

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

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Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 135880

2. Committee Name CTE James Perna

| 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<br>Name & Address:<br><u>Dennis Petri</u><br><u>3005 Clearwood Ct.</u><br><u>Shelby Twp, MI 48316</u>                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser              |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:<br><u>Michele LaPorte</u><br><u>3234 Kenwood</u><br><u>Rochester Hills, MI 48309</u>                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser              |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3<br>Name & Address:<br><u>James Batters</u><br><u>13300 Pebble Creek Dr.</u><br><u>Plymouth, MI 48170</u>                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser              |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4<br>Name & Address:<br><u>Peter Meagher III</u><br><u>593 Woodledge</u><br><u>White Lake, MI 48386</u>                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser              |                                                                                 | Click Here for Memo Itemization |                                                                                 |

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 135880

2. Committee Name CRE James Perna

| 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 <u>all</u> contributions regardless of amount. |                                                                                 | 6. Amount                       | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------|
| 3. Contribution #1<br>Name & Address:<br><u>Ralph Zerbonia</u><br><u>25201 Bridlepath</u><br><u>Farmington Hills, MI 48335</u>                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:<br><u>Marc Lichtman</u><br><u>46036 Sainsborough Dr.</u><br><u>Canton, MI 48187</u>                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3<br>Name & Address:<br><u>Jesse Cardello</u><br><u>21 Hawthorne Rd.</u><br><u>Grosse Pointe, MI 48236</u>                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4<br>Name & Address:<br><u>Mario Petitta</u><br><u>21307 E. 11 mile Rd.</u><br><u>St Clair Shores, MI 48081</u>                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10.25.10</u> | \$ <u>50.00</u>                 | \$ <u>50.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |

Page Subtotal

350.00

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 135880  
2. Committee Name CIE James Perna

| 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 <u>all</u> contributions regardless of amount. |                                                                                 | 6. Amount                       | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------|
| 3. Contribution # 1<br>Name & Address:<br><u>Vincent Brennan</u><br><u>30078 Schoenherr Rd. STE 150</u><br><u>Warren, MI 48088</u>                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-25-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:<br><u>John Louisell</u><br><u>374 Kerby Road</u><br><u>Grosse Pointe Farms, MI 48236</u>                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-25-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3<br>Name & Address:<br><u>F. SCOTT Miller</u><br><u>1598 Stoney Creek Dr.</u><br><u>Rochester, MI 48307</u>                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-25-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4<br>Name & Address:<br><u>Robert Potter</u><br><u>9313 West Circle Dr.</u><br><u>Stanwood, MI 49346</u>                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>10-25-10</u> | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                     |                                                                                 | Click Here for Memo Itemization |                                                                                 |

Page Subtotal 400.00

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

Enter this total on  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 1358802. Committee Name CTE James Perna

| 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<br>Name & Address:                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10.28.10</u><br><u>Kathleen Reggio</u><br><u>22432 Beach St.</u><br><u>St. Clair Shores, MI 48081</u> | \$ <u>500.00</u>                | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Owner</u> Employer <u>Community Care</u> Click Here for Memo Itemization<br>Business Address <u>22432 Beach St. St. Clair Shores, MI 48081</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                                                                                                                                                       |                                 |                                                                                 |
| 3. Contribution #2<br>Name & Address:                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10.29.10</u><br><u>Thomas Frazee</u><br><u>5137 Aintree Rd.</u><br><u>Rochester, MI 48306</u>         | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                    |                                                                                                                                                                       | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3<br>Name & Address:                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10.29.10</u><br><u>Anthony Antoun</u><br><u>68485 meadowood ct</u><br><u>Washington, MI 48095</u>     | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                    |                                                                                                                                                                       | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4<br>Name & Address:                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11.1.10</u><br><u>David Sacchetti</u><br><u>763 Pear Tree Lane</u><br><u>Grosse Pointe, MI 48236</u>  | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                    |                                                                                                                                                                       | Click Here for Memo Itemization |                                                                                 |

Page Subtotal

800.00Grand Total of All Schedules 1A  
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Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

135880

2. Committee Name

CTE James Perna

| 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<br>Name & Address:                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-25-10</u><br><u>Carolyn Clark</u><br><u>4415 Rolling Pine Dr.</u><br><u>West Bloomfield, MI 48323</u> | \$ <u>500.00</u>                | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Retired</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                             |                                                                                                                                                                          | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-25-10</u><br><u>Curtis Clark</u><br><u>4415 Rolling Pine Dr.</u><br><u>West Bloomfield, MI 48323</u>  | \$ <u>500.00</u>                | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Retired</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                             |                                                                                                                                                                          | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 3<br>Name & Address:                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-26-10</u><br><u>Joseph Vicari</u><br><u>5001 Enterprise Ct.</u><br><u>Warren, MI 48092</u>            | \$ <u>200.00</u>                | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Owner</u> Employer <u>Andiamo</u><br>Business Address <u>7096 E. 14 Mile Rd Warren, MI 48312</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                                                                                                                                                          | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 4<br>Name & Address:                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-27-10</u><br><u>Patrick Melton</u><br><u>924 Claremont St.</u><br><u>Dearborn, MI 48124</u>           | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                      |                                                                                                                                                                          | Click Here for Memo Itemization |                                                                                 |

Page Subtotal

1300.00

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 135880  
2. Committee Name CTE James Perna

| 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<br>Name & Address:<br><u>Local 3317 PAC</u><br><u>P.O. Box 111</u><br><u>Garden City, MI 48136</u>                                                                                                                                                                                                           | PAC Receipt? <input checked="" type="checkbox"/> YES<br>4. Date of Receipt <u>11-5-10</u>  | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                |                                                                                            | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2<br>Name & Address:<br><u>Paul Illich</u><br><u>34285 Groesbeck Hwy</u><br><u>Clinton Township, MI 48035</u>                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>11-1-10</u>             | \$ <u>100.00</u>                | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                |                                                                                            | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 3<br>Name & Address:<br><u>James Perna</u><br><u>38480 Saddle Lane</u><br><u>Clinton Twp, MI 48036</u>                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES<br>4. Date of Receipt <u>11-16-10</u>            | \$ <u>2500.00</u>               | \$ _____                                                                        |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>Ceo</u> Employer <u>HealthOne Credit Union</u><br>Business Address <u>606 E Lafayette Detroit MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                                                                            | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution # 4<br>Name & Address:<br><u>Blue Cross Blue Shield PAC</u><br><u>602 W. Ionia St - Bldg</u><br><u>Lansing, MI 48933</u>                                                                                                                                                                                         | PAC Receipt? <input checked="" type="checkbox"/> YES<br>4. Date of Receipt <u>11-19-10</u> | \$ <u>200.00</u>                | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                |                                                                                            | Click Here for Memo Itemization |                                                                                 |

Page Subtotal

2900.00

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

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Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number

35880

2. Committee Name

CIE James Perna

| 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? <input type="checkbox"/> YES | 4. Date of Receipt              | 11-19-10                                                                        |
| Name & Address:<br>James Perna<br>38180 Saddle Lane<br>Clinton Twp, MI 48036                                                                                                                                                                                                                                         |                                           | \$ 800.00                       | \$                                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation: CIO Employer: HeathOne Credit Union<br>Business Address: 600 E Lafayette St Detroit MI 48226<br>Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser     |                                           | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              | 11-19-10                                                                        |
| Name & Address:<br>John Oram<br>30760 Vernon Dr.<br>Beverly Hills, MI 48025                                                                                                                                                                                                                                          |                                           | \$ 200.00                       | \$ 200.00                                                                       |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation: Consultant Employer: SELF-employed<br>Business Address: 30760 Vernon Dr. Beverly Hills, MI 48025<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                           | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #3                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              |                                                                                 |
| Name & Address:                                                                                                                                                                                                                                                                                                      |                                           | \$                              | \$                                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation: Employer:<br>Business Address:<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                              |                                           | Click Here for Memo Itemization |                                                                                 |
| 3. Contribution #4                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt              |                                                                                 |
| Name & Address:                                                                                                                                                                                                                                                                                                      |                                           | \$                              | \$                                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation: Employer:<br>Business Address:<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                              |                                           | Click Here for Memo Itemization |                                                                                 |

Page Subtotal

1000.00

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

13,980.00

Enter this total on  
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Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED IN-KIND EXPENDITURES  
SCHEDULE 1B - IK**

**CANDIDATE COMMITTEE**

1. Committee I. D. Number

135880

2. Committee Name

CTE James Perna

| 3. Name and Address of person to whom goods or services were donated or transferred.                                                                           | 4. Type of In-Kind Expenditure<br>(Check appropriate box and fill in description)                                                                                                                                                                                                                                        | 5. Date:        | 6. Fair Market Value |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------|
| Expenditure #1<br>Name <u>Rite To Life</u><br><u>OF Michigan</u><br>Address <u>2340 Porter St. S.W.</u><br><u>P.O. Box 901</u><br><u>Grand River, MI 49509</u> | 4. <input type="checkbox"/> Donation of goods or services to a Ballot Question Committee<br><input type="checkbox"/> Donation of assets to tax exempt charitable Institution<br><input type="checkbox"/> Donation of assets to Political Party Committee<br><input type="checkbox"/> Other<br>Description <u>Mailing</u> | <u>10.27.10</u> | <u>253.33</u>        |
| Expenditure #2<br>Name<br>Address                                                                                                                              | 4. <input type="checkbox"/> Donation of goods or services to a Ballot Question Committee<br><input type="checkbox"/> Donation of assets to tax exempt charitable Institution<br><input type="checkbox"/> Donation of assets to Political Party Committee<br><input type="checkbox"/> Other<br>Description                |                 |                      |
| Expenditure #3<br>Name<br>Address                                                                                                                              | 4. <input type="checkbox"/> Donation of goods or services to a Ballot Question Committee<br><input type="checkbox"/> Donation of assets to tax exempt charitable Institution<br><input type="checkbox"/> Donation of assets to Political Party Committee<br><input type="checkbox"/> Other<br>Description                |                 |                      |

Page Subtotal  
Grand Total of all Schedules 1B-IK  
(Complete on last page of Schedule)

253.33  
253.33

Enter this total  
on line 7 of  
the Summary  
Page

CITIZENS TO ELECT JAMES PERNA  
38180 SADDLE LN.  
CLINTON TOWNSHIP, MI 48036

DATE 12/15/10 1104

PAY TO THE  
ORDER OF

Robert Agar \$200 <sup>00</sup>/<sub>100</sub>  
Two Hundred DOLLARS



Health One  
Credit Union  
600 LAFAYETTE EAST DETROIT, MICHIGAN 48226

MEMO

Return

*[Signature]*

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CITIZENS TO ELECT JAMES PERNA  
38180 SADDLE LN.  
CLINTON TOWNSHIP, MI 48036

DATE 12/15/10 1105

PAY TO THE  
ORDER OF

Gordon Follmer \$200 <sup>00</sup>/<sub>100</sub>  
Two Hundred DOLLARS



Health One  
Credit Union  
600 LAFAYETTE EAST DETROIT, MICHIGAN 48226

MEMO

Return

*[Signature]*

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