



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

11 OCT 28 PM 2:14

CARABELLA SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 8-23-11 to 10-23-11

1. Committee I.D. Number

138742

2. Committee Name

CTE Kelly Colegio

5. Committee's Mailing Address

4081 Tuxedo
Warren, MI 48092

Area Code and Phone 586-216-7437

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.

4. Candidate Last Name

Colegio

First Name

Kelly

M.I.

J

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

Warren City Council at Large

4b. County of Residence

Macomb

6. Treasurer's Name & Residential Address

Kelly J. Colegio
4081 Tuxedo
Warren, MI 48092

Area Code & Phone

586-216-7437

7. Treasurer's Business Address

5460 Arden
Warren, MI 48092

Area Code and Phone 586-216-7437

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

SAME

Area Code and Phone

9. TYPE OF STATEMENT

9a.



Pre-Election

OR

9b.



Post-Election

Pre-Election or Post-Election Statement relates to:



Primary



General



Convention



School



Special



Caucus

Date of Election, Convention or Caucus

9c.

Annual Statement (2011 Coverage Year)

9d.

Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e.

Dissolution of Candidate Committee

Effective Date of Dissolution

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

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

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

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Kelly Colegio
Type or Print Name

Signature

Kelly Colegio

Date

10-27-11

Candidate

Kelly Colegio
Type or Print Name

Signature

Kelly Colegio

Date

10-27-11



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>12,430.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>12,430.00</u>	(18.) \$ <u>29,305.</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>12,430.00</u>	(20.) \$ <u>29,305.</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>555.57</u>	(21.) \$ <u>555.57</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>13,572.08</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>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>13,572.08</u>	(23.) \$ <u>28,270.06</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>17,359.93</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>2,177.02</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>12,430.00</u>	
	(15.) = \$	<u>14,607.02</u>	
15. SUBTOTAL Add lines 13 and 14			
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>13,572.08</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1,034.94</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

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>10-11-11</u> Name & Address: <u>Richard A. Brodie</u> <u>23500 Sherwood</u> <u>Warren, MI. 48091</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-11-11</u> Name & Address: <u>Thomas M. Miskell</u> <u>5014 Stonehenge Dr.</u> <u>Rochester, MI. 48306</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-11-11</u> Name & Address: <u>Roy Rose</u> <u>55620 Woodridge Dr.</u> <u>Shelby Twp, MI. 48316</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-11-11</u> Name & Address: <u>Jack Doheny</u> <u>P.O. Box 609</u> <u>Northville MI. 48167</u>		\$ <u>50.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 300.00

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 138742
2. Committee Name CTE Kelly Colegio

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-21-11</u></p> <p>Name & Address: <u>James Biernat</u> <u>39724 Berkley</u> <u>Clinton Twp, MI-48038</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-21-11</u></p> <p>Name & Address: <u>Sue Keffer</u> <u>32757 McConnell Ct.</u> <u>Warren, MI-48092</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>25.00</u>	\$ <u>25.00</u>
<p>3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10-21-11</u></p> <p>Name & Address: <u>Warren Professional Firefighters</u> <u>Separate Segregated fund</u> <u>3272 E. 12 mile #107</u> <u>Warren, MI-48092</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ <u>400.00</u>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-21-11</u></p> <p>Name & Address: <u>Michael A. Chirco Living Trust</u> <u>46600 Romeo Plank Rd, Ste. 5</u> <u>Macomb MI-48044</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>150.00</u>

Page Subtotal

375.00

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE. Kelly Colegio

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-21-11</u></p> <p>Name & Address: <u>JoAnn Beste</u> <u>28359 Aline Dr.</u> <u>Warren, MI 48093</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>150.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u></p> <p>Name & Address: <u>Martha McHugh</u> <u>11235 Phal RD.</u> <u>Grass Lake, MI 49240</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u> Employer _____ Business Address <u>SAME</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u></p> <p>Name & Address: <u>Howard Shiftman</u> <u>370 E. Maple, Ste 200</u> <u>Birmingham, MI 48009</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer _____ Business Address <u>370 E. Maple, Ste 200</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300.00</u>	\$ <u>300.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u></p> <p>Name & Address: <u>Warren Professional Firefighters</u> <u>Separate Segregated Fund</u> <u>11304-14 mile - Warren, MI 48093</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ <u>400.00</u> ²
		Click Here for Memo Itemization	

Page Subtotal

1,050

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 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Diane Bowman</u> <u>5444 S. 8800 Chicago Rd.</u> <u>Warren, MI 48093</u>		\$ <u>60.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Jean Dedecker</u> <u>6141 Arden Ave.</u> <u>Warren MI 48092</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Marilyn Warren</u> <u>18536 Woodbine</u> <u>Fraser MI 48026</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Azalia Zuniga</u> <u>8220 Rathbone St.</u> <u>Detroit, MI 48209</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

185.00

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 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Louis Galasso</u> <u>30705 Moroso Dr.</u> <u>Warren MI 48088</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>William Gambill</u> <u>25908 Patricia</u> <u>Warren MI-48092</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Lark Samouelian</u> <u>298 Harvard</u> <u>Howell, MI 48843</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Marcia Smith</u> <u>1711 Weymouth Ave.</u> <u>West Bloomfield, MI 48324</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

200.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138752
2. Committee Name CTE. Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Sere Green</u> <u>14255 Weier</u> <u>Warren, MI 48088</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Delores Pranterg</u> <u>32302 Shawn Dr.</u> <u>Warren, MI 48088</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Nancy Bourgeois</u> <u>7258 Coolidge</u> <u>Centerline, MI 48015</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>James Slater</u> <u>8210 Anchor Bay Dr.</u> <u>Clay, MI 48001</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
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3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>David Hendrickson</u> <u>54807 Joseph Ronald</u> <u>Macomb, MI 48042</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>William Dwyer</u> <u>35862 Lone Pine Lane</u> <u>Farmington Hills, MI 48335</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Janice Hanway</u> <u>50676 Jefferson E-6</u> <u>New Baltimore MI 48047</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Max Fellsman</u> <u>39495 Heatherheath Dr.</u> <u>Clinton Twp. MI 48038</u>		\$ <u>50.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Paul Bakker</u> <u>13712 Castle Ave.</u> <u>Warren, MI, 48088</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Lyla Tanner</u> <u>25073 Maywood</u> <u>Woodhaven MI-48183</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Virgil Tanner</u> <u>25073 Maywood</u> <u>Woodhaven MI 48183</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Elva Diovardi</u> <u>Shawn Dr.</u> <u>Warren MI.</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		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.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name _____

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>10-14-11</u>	
Name & Address: <u>Marlo Wilburt McAdams</u> <u>1235 Dufraign</u> <u>Pontiac, MI. 48342</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Dennis Hertz</u> <u>4782 Brockham Way</u> <u>Sterling Hts, MI. 48310</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Sandra Hertz</u> <u>4418 Bayberry Ct</u> <u>Warren MI. 48092</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Amanda Milka</u> <u>33886 Twickingham</u> <u>Sterling Heights, MI. 48310</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		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.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Denise Williams</u> <u>29410 Grandview ST.</u> <u>Harrison Twp. MI 48045</u>		\$ <u>100.00</u> \$ <u>300.00</u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Ramie Phillips</u> <u>817 Englewood Dr.</u> <u>Rochester, MI 48309</u>		\$ <u>100.00</u> \$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Athena Kovalcik</u> <u>Joseph Kovalcik</u> <u>31990 Aline Dr. Warren, MI 48093</u>		\$ <u>50.00</u> \$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Ricardo Longoria</u> <u>95 Cedar</u> <u>Wyandotte MI 48192</u>		\$ <u>50.00</u> \$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 300.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Thomas Pawellkowski</u> <u>11272 River Dr.</u> <u>Warren MI 48093</u>		<u>\$ 50.00</u>	<u>\$ 125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>David Monette</u> <u>3827 Common</u> <u>Warren MI 48092</u>		<u>\$ 50.00</u>	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Jodi Walny</u> <u>28231 Flanders</u> <u>Warren MI 48088</u>		<u>\$ 50.00</u>	<u>\$ 150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Bernard Nabors</u> <u>27731 Dowland St.</u> <u>Warren MI 48092</u>		<u>\$ 50.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u> Name & Address: <u>Adolphus Cast</u> <u>19195 Eldridge</u> <u>Southfield, MI 48076</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u> Name & Address: <u>Greg Paliczuk</u> <u>32044 Margaret Court</u> <u>Warren MI 48093</u>		\$ <u>100.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u> Name & Address: <u>Kenneth McGreevy</u> <u>25106 Fairgrove</u> <u>Woodhaven MI 48183</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-14-11</u> Name & Address: <u>Eddie Babbie</u> <u>1183 Congress Dr.</u> <u>Troy, MI 48065</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		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.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742

2. Committee Name CTE Kelly Colegio

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 10-14-11

Name & Address:

Terri Sutalo
27060 Lorraine
Warren MI-48093

\$ 70.00 \$ 70.00

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 10-14-11

Name & Address

Robert Huth
19560
Cinton Twp. MI-48038

\$ 200.00 \$ 250.00

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

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

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

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

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

270.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

138742

2. Committee Name

CTE Kelly Colegio

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

9-6-11

Name & Address:

Kelly Colegio
4081 Tuxedo Warren MI.
48092

\$ 3000

\$

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt

9-20-11

Name & Address

Kelly Colegio
4081 Tuxedo
Warren MI. 48092

\$ 4800

\$

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt

Name & Address

\$

\$

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt

Name & Address

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

7,800

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

12,430

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 138742
2. Committee Name CTE Kelly Colegio

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>10-14-11</u>	
Name & Address: <u>Lorenzo Cavaliere</u> <u>30078 Schoenherr suite 300</u> <u>Warren MI. 48035</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Randy McClure</u> <u>one city square</u> <u>Warren MI. 48093</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Lisa Mancini</u> <u>31660 Vandyke</u> <u>Warren MI. 48093</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-14-11</u>	
Name & Address: <u>Dave Anderer</u> <u>32480 Kelly Rd.</u> <u>Roseville, MI 48066</u>		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

138742

CANDIDATE COMMITTEE

2. Committee Name

CTE Kelly Colegio

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Right to life of Michigan 2340 Porter St. SW PO Box 901- Grand Rapids MI 49509 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description List Rental 5. Date Of Receipt: 9-16-11 6. Vendor Name & Address:	\$ 55.57	\$ 55.57
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Dino Tureato 25121 St. Louise Dr. Warren MI 48092 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Pizza Bx 5140 Edwin Hamtramck MI	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description Pizza box printing 5. Date Of Receipt: 6. Vendor Name & Address:	\$ 500.00	\$ 500.00
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$	\$
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal 555.57

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 555.57

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number

138742

2. Committee Name

CTE Kelly Colegio

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Caldwell Graphics</u> Address <u>33490 Groesbeck</u> <u>Fraser, MI. 48026</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-8-11</u> Date	\$ <u>1,500</u>
Expenditure #2 Name <u>Macomb County Clerk</u> Address _____ <input type="checkbox"/> Fund Raiser	Purpose: <u>Late Filing Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-10-11</u> Date	\$ <u>25.00</u>
Expenditure #3 Name <u>Manhattan Mailers</u> Address <u>51132 Milano Drive</u> <u>Macomb, MI. 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-14-11</u> Date	\$ <u>1955.03</u>
Expenditure #4 Name <u>Caldwell Graphics</u> Address <u>33490 Groesbeck</u> <u>Fraser, MI. 48026</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-20-11</u> Date	\$ <u>1,790</u>
Expenditure #5 Name <u>Manhattan Mailers</u> Address <u>51132 Milano Drive</u> <u>Macomb, MI. 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-29-11</u> Date	\$ <u>1955.03</u>

Subtotal this page

7225.06

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

138742

2. Committee Name

CTE Kelly Colegio

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Caldwell Graphics Address 33490 Groesbeck Fraser, MI. 48026 <input type="checkbox"/> Fund Raiser	Purpose: Printing <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9-30-11 Date	\$ 780. ⁰⁰
Expenditure #2 Name The Gazebo Address 31104 Mound Rd. Warren, MI. 48092 <input checked="" type="checkbox"/> Fund Raiser	Purpose: Fundraiser <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10-4-11 Date	\$ 200. ²⁰
Expenditure #3 Name Gazebo Address 31104 Mound Rd. Warren, MI. 48092 <input checked="" type="checkbox"/> Fund Raiser	Purpose: Fundraiser <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10-11-11 Date	\$ 1490. ²³
Expenditure #4 Name Caldwell Graphics Address 33490 Groesbeck Fraser, MI. 48026 <input type="checkbox"/> Fund Raiser	Purpose: Printing <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10-14-11 Date	\$ 950. ⁰⁰
Expenditure #5 Name Manhattan Mailers Address 51132 Milano Drive Macomb, MI. 48042 <input type="checkbox"/> Fund Raiser	Purpose: Mailing <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10-18-11 Date	\$ 2926. ⁷⁹

Subtotal this page

6347.02

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

13572.08

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

138742

2. Committee Name

CTE Kelly Colegio

This Schedule itemizes:

a ☐ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 4081 Tuxedo Warren MI 48092	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>9-6-11</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,000</u>	\$ \$ \$ \$ \$	\$	\$ <u>3,000</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 4081 Tuxedo Warren MI 48092	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>9-20-11</u> 6. <u>Original Amount of Debt:</u> <u>\$ 4,800</u>	\$ \$ \$ \$ \$	\$	\$ <u>4,800</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

7,800

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

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

13872

2. Committee Name

CTE Kelly Colegio

This Schedule itemizes:

a ☐ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 4081 Tuxedo Warren, MI 48092	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>5-27-11</u> 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>5.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 4081 Tuxedo Warren, MI 48092	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>6-3-11</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,000</u>	<u>7-15-11</u> \$ <u>292.37</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>707.63</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 4081 Tuxedo Warren, MI 48092	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>6-13-11</u> 6. <u>Original Amount of Debt:</u> \$ <u>4,480</u>	<u>7-15-11</u> \$ <u>2,432.70</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>2,047.30</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

2759.93

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

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

13872

2. Committee Name

CTE Kelly Colegio

This Schedule itemizes:

a ☐ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 41081 Tuxedo Warren, MI 48092	4. Type: LOAN 5. Date Debt Was Incurred: 7-1-11 6. Original Amount of Debt: \$ 5,000	\$ \$ \$ \$ \$	\$	\$ 5,000 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Kelly Colegio 41081 Tuxedo Warren, MI 48092	4. Type: LOAN 5. Date Debt Was Incurred: 8-17-11 6. Original Amount of Debt: \$ 1,800	\$ \$ \$ \$ \$	\$	\$ 1,800 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt:	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		

Page Subtotal (Outstanding debt)

6,800

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

17,359.93

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 138742
2. Committee Name CTE Kelly Colegio

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10-11-11</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>70</u>	5. Type of Fund Raising Activity <u>Buffet</u>	6. Address and Name (If any) of the place where the activity was held. <u>31104 Mound Rd. Warren, MI 48091</u> <input type="checkbox"/> Private Residence <u>Gazebo</u>
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7. Total Contributions 4,630.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) 4,630.00

10. Total Cost of Event 1690.23
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

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

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.