

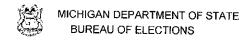
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CANDIDATE COMMITTEE COVER PAGE

11 DEC -8 AMII: 16

FOR OFFICIAL USE ONLY

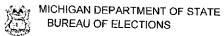
Poport must be desired.	SABAUCAK
	1.3/Fhis Statement covers/Mom: 10 - 24 - 11 to 11 - 28 - 11
14 0	4. Candidate Last Name First Name M.1. KOSKI DEANNA
2. Committee Name HEE TO REELECT	4a. Office Sought Including District # or Community Served (If applicable) CITY COUNCIL
DEANNA KOSKI	4b. County of Residence MACOMB
5. Committee's Mailing Address 15079 HARVEST MEADOWS	6. Treasurer's Name & Residential Address DEANNA KOSK MEDIANS
STERLING HEIGHTS MI	JEANNH NOSA 15079 HARVEST MEADOWS STERLING HEIGHTS MI 48313
483/3 Area Code and Phone <u>586 566 2388</u>	STERLING HEIGHTS I'M
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.	Area Code & Phone <u>586</u> <u>566</u> <u>2388</u>
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a
15079 HARVEST MEADOWS	
Sterling Heights Mi	
483/3	
Area Code and Phone _586 5662388	Area Code and Phone
9. TYPE OF STATEMENT	
9a. Pre-Election OR 9b. Post	st-Election 9c. Annual Statement (Coverage Year)
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
Primary	eneral 9e. Dissolution of Candidate Committee
Convention	chool Effective Date of Dissolution
Special Cau	ucus
Date of Election, Convention or Caucus	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
11-8-11	the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, to	required Campaign Statements. The Campaign Statements must include all applicable penditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If a since the information was shown on the committee's Statement of Organization, an this Campaign Statement. If a request for a Reporting Waiver is not received on or that campaign statement cannot be waived.
 Verification: I\We certify that all reasonable diligence was used my\our knowledge and belief the contents are true, accurate and co 	d in the preparation of this statement and attached schedules (if any) and to the best of complete.
Current Treasurer or Designated Record keeper DEANNA KOSK Type or Print Name	Signature Date 11-29-11
Candidate DEANNA Koski	Signature Date 11-29-11 Date 11-29-11
Type or Print Name	Signature



SUMMARY PAGE CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
Committee To RE EIECT
2. Committee Name DEANNA KOSKI

DESCRIPTO		
RECEIPTS 3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 1000,00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 1000,00	(18.) \$ 6395,00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 1000, 00	(20.) \$ 6395.
IN-KIND CONTRIBUTIONS & EXPENDITURES		- 00
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ 50.
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	2 9	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 53,89	(23.) \$ <u>66 70.06</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(40)- \ 0	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	-Q
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 4968.19	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ /483.//	
14. Amount received during reporting period	(14.) + \$ 1000,00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ <u>2483.97</u>	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.)- \$ <u>53,89</u>	
(Add lines 9 and 11) 17. ENDING BALANCE	(17.) \$ <u>2430.08</u> *	
(Subtract line 16 from line 15)		



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name EANNA KOSKI

F-1				_	2. Committee Name 32 2	7 1707 - 7 1	
Enter contributor's na middle initial. Check Committee (PAC) Rep	oox to indicate it cor	itrinui	iion is trom a Political C	dual, e commit	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
21800 WARREN		7 E 48	MERREILI DI 3092		1/-4-11	\$/000.ª	date of receipt)
5. If over \$100.00 cur	nulative, please pr	ovide) :				
Occupation		_ E	Employer			Click Here f	or Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		·
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of F	Receipt		,	
						\$	\$
5. If over \$100.00 cun	nulative, please pro	vide				Oliale I I = F-	
Occupation			nployer			Click Here to	or Memo Itemization
Business Address		-					
Type of Contribution:	Direct		Loan from a person	П	Fund Raiser		·
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of I	Receip	t .		
5. If over \$100.00 cum	nulativa nloaso pro	wido				\$Click Here for	\$r Memo Itemization
Occupation		- E	mployer				
Business Address Type of Contribution:	Direct		Loan from a person	П	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	Receip			
						\$	\$
5. If over \$100.00 cum	nulative, please pro	vide:	:			Click Horo for	Memo Itemization
Occupation		_	Employer			Click Here for	Wellio iternization
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
Page <u>3</u> of 7			(C		Page Subtotal d Total of All Schedules 1A te on last page of Schedule)	1000. December 10000. December 1000. December 10000. December 1000. December 10000. December 1000. December 1000. December 1000. December 1000. December 1000. December 100	



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 69954-50

Committee To REELECT

2. Committee Name DEALONA KOSKI

3 Nama and address of	SEPPER TO SEP		
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Name AMERICAN GRAPHICS Address 34895 GROESBECK Clinton Two M: 48035	Purpose: PRINTING	10 /31/11 Date	\$ <u>53,</u> 89
Fund Raiser Expenditure #2	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name			
Address	Purpose:	Date	\$
	Click ⊦	lere for Memo	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Address	Purpose:	Date	\$
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo I	temization Type
Expenditure #4			
Address Address	Purpose:	Date	\$temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Metho i	remization Type
Expenditure #5			
Address Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	Date lere for Memo I	\$temization Type
	statement Subtot	tal this page	G2 89

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

53.89

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 69954-50

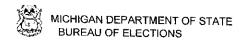
2. Committee Name Committee To REELECT DEANNA Koski

OANDIDATE COMMITTEE	ommittee Name (O1-(N))	<u>C 70 - (CD) C4</u>		NOOKE
This Schedule itemizes:				
	mittee OR b. Debt	s and obligations owed <u>to</u> or urpose checked.)	forgiven <u>by</u> the cor	nmittee.
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	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount	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)
provide information regarding the endorsers or guarantors, if any.	of debt			
Debt #1 Corp? Yes Owed to or by:	4. Type: NLC	\$		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DEANNA KOSKI	5. Date Debt Was Incurred:	\$.	
15079 HARVEST MEADOWS	5-24-99	\$		241 00
STERLING HTS MI	6. Original Amount of Debt	\$	\$	\$\alpha \tau I I I
48313	\$ 241.	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amc	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: NLC	\$		
DEANNA KOSKI	5. Date Debt Was Incurred:	\$./2
15079 HARVEST MEADOWS	6. Original Amount of Debt:	\$	e e	s 664.
Sterling Hts MI	s 664, 13	\$	Ψ	FORGIVEN
48313		\$		II ONGIVEN
If bank loan, name of endorser or guarantor:		Am	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: <u>FO</u>	<u> </u>		
DEANNA KOSKI	5. Date Debt Was Incurred:	\$		
15079 HARVEST MEADOWS	2-/6-77	\$		59500
StERLING Hts MI	6. Original Amount of Debt:	\$	I \$	T COROLVEN
48313	\$	\$		FORGIVEN
if bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	1500.13
(Cc	omplete on last page of Schedule s	Grand Total of Showing amounts owed by o	of all Schedules 1E or to the committee)	

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.

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

Page <u>5</u> of <u>7</u>



DEBTS AND OBLIGATIONS SCHEDULE 1E

CANDIDATE COMMITTEE

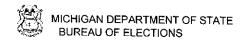
1. Committee I.D. Number 69954-50
2. Committee Name Committee To REELECT DEANNA KOSKI

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	millon OD h			
(Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> irpose checked.)	or forgiven <u>by</u> the co	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding Balance at close of this period
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	incurred 6. Indicate original amount of debt	-		(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type:_FO	\$		
DEANNA KOSKI	5. Date Debt Was Incurred:	\$:
15079 HARVEST MEADOUS	4-6-77	\$	\$	\$337.00
STERLING HTS MI	6. Original Amount of Debt:	\$\$	- ^Ψ	FORGIVEN
#8313 If bank loan, name of endorser or guarantor:	1 4	\$	- -	
72-14-40		Ar	nount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: <i>FO</i>	\$		
DEANNA KOSKI	5. Date Debt Was Incurred:	\$		91
15079 HARVEST MEADOWS	6. Original Amount of Debt:	\$	 	\$885,"
Sterling Hts MI	<u>\$ 885, 81</u>	\$	Ψ	FORGIVEN
48313 If bank loan, name of endorser or guarantor:		<u> </u>		, or correct
		<u> </u>	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: <u>FO</u>	\$		
DEANNA KOSKI	5. Date Debt Was Incurred:	\$		ופיית
15079 HARVEST MEADOWS	6. Original Amount of Debt:	\$	 s	s 900.
Sterling Hts MI	\$ 900, °°	\$	' \$	FORGIVEN
48313	,	<u> </u>		
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
		Page Subtot	al (Outstanding debt)	2122,81
· (Co	omplete on last page of Schedule s	Grand Tota Showing amounts owed by	of all Schedules 1E	
,5.	, and page of confedere		to the sommittee).	Enter this total

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.

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

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DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee 1.D. Number 69954-50
2. Committee Name Committee To REELECT DEANNA KOSKI

This Schedule itemizes:	174 - 244 -			
	mittee OR b. Debts	s and obligations owed <u>to</u> rpose checked.)	or forgiven <u>by</u> the cor	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation	7. Date and amount of	8. Cumulative	9. Outstanding
	(Description) 5. Indicate date debt was	each payment	payment to date on debt	Balance at close of this period
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please	incurred 6. Indicate original amount			(Item 6 minus Item 8)
provide information regarding the endorsers or	of debt			nem o)
guarantors, if any. Debt #1 Corp? Yes				
Owed to or by:	4. Type: <u>FO</u>	\$		
DEANNA KOSKI	5. <u>Date Debt Was Incurred:</u>	\$	·	
15079 HARVEST MEADOWS STERLING HTS MI	1-7-00	\$		n119 58
SLEDLING HTS MI	6. Original Amount of Debt		\$	\$ 17-11
JAEKCHOO III	s 749, 58	<u> </u>	-	FORGIVEN
48313	· · · · · · · · · · · · · · · · · · ·	\$		<u> </u>
If bank loan, name of endorser or guarantor:	7	Ar	nount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: ADS	\$		
DEANNA KOSKI	5. Date Debt Was Incurred:	<u> </u>		-
15099 HARVEST MEADOWS	6. Original Amount of Debt:	\$		\$486.
Sterling Hts MI	\$ 486.00	\$	Φ	Topour Th
483/3		\$\$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. TYNCANDY TREAT	\$		
DEANNA KOSKI	5. <u>Date Debt Was Incurred</u> :	\$, 77
TM TO THE TOTAL THE	5-31-10 + 10-19-10	<u> </u>		10961
15079 HARVEST MEADOWS	6. Original Amount of Debt:	<u> </u>	\$	\$ 10 1,
Sterling Hts MI	\$ 109,67	\$		FORGIVEN
48313	• •	\$		
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
				1711-25

Page Subtotal (Outstanding debt)

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

on line 12a "owed by"" or line 12b "owed to" of the

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.

Page _____ of ______

Enter this total Summary Page