



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

12 JAN 30 AM 11:57

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.

This Statement covers From:

01/01/11 to 12/31/11

1. Committee I.D. Number 137332	4. Candidate Last Name REYNOLDS First Name DEAN M.I.
2. Committee Name CTE DEAN REYNOLDS	4a. Office Sought Including District # or Community Served (If applicable) CHARTER TOWNSHIP OF CLINTON TRUSTEE
5. Committee's Mailing Address 38150 WOODCREST CLINTON TWP MI 48036 Area Code and Phone 586 463 9264 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.	4b. County of Residence MACOMB 6. Treasurer's Name & Residential Address GERALDINE REYNOLDS 38595 HIDDEN LN CLINTON TWP MI 48036 Area Code & Phone 586 463 9264
7. Treasurer's Business Address Area Code and Phone	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone

9. TYPE OF STATEMENT

9a. ☐ Pre-Election OR 9b. ☐ Post-Election

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	<u>Geraldine Reynolds</u>	Signature	<u>Geraldine Reynolds</u>	Date	<u>1-30-12</u>
Candidate	<u>DEAN REYNOLDS</u>	Signature	<u>Dean Reynolds</u>	Date	<u>1/30/12</u>



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

131332

2. Committee Name

CTE DEAN REYNOLDS

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$

3927 50

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$

NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$

3927 50

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$

3927 50

Column I
This Period

Column II
Cumulative this election cycle

(18.) \$

9587 50

(19.) \$

(20.) \$

9587 50

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$

(21.) \$

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$

(22.) \$

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$

268 55

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.) \$

268 55

(23.) \$

1731 16

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$

(24.) \$

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$

38,265 45

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.) \$

4224 09

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$

3927 50

15. SUBTOTAL Add lines 13 and 14

(15.) = \$

8151 59

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$

268 55

17. ENDING BALANCE

(17.) \$

7883 04

(Subtract line 16 from line 15)



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137332
2. Committee Name CTE Dem Reynolds

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>06/01/11</u> Name & Address: John Dolan 42850 Garfield Suite 101 Clinton Township, MI 48038		\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Dolan & Tomlinson, PC</u> Business Address <u>42850 Garfield Suite 101 Clinton Township, MI 48038</u> 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>06/01/11</u> Name & Address: Mariann Krieger 5730 Strawberry Cir. Commerce Twp., MI 48382		\$ <u>37.50</u>	\$ <u>37.50</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>06/01/11</u> Name & Address: Tim Tomlinson 42850 Garfield Rd. Suite 101 Clinton Township, MI 48038		\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Dolan & Tomlinson</u> Business Address <u>42850 Garfield Rd. Suite 101 Clinton Township, MI 48038</u> 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>06/01/11</u> Name & Address: Michael Kozak II 1957 Manchester Goose Pointe Woods, MI 48236		\$ <u>175.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Giffels-Webster Engineering, Inc.</u> Business Address <u>2871 Bond Street Rochester, MI 48309</u> 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 \$612.50

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 137332
2. Committee Name CTE DEM REYNOLDS

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 checked="" type="checkbox"/> YES 4. Date of Receipt <u>06/02/11</u></p> <p>Name & Address: Clinton Township Fire Fighters P.A.C. 42601 Romeo Plank Clinton Township, MI 48038</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>175.00</u>	\$ <u>350.00</u>
<p>3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>06/02/11</u></p> <p>Name & Address: Anthony Marrocco Victory PAC P.O. Box 665 Mount Clemens, MI 48046</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>17.50</u>	\$ <u>30.00</u>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/02/11</u></p> <p>Name & Address: Peter Henderson 42450 Garfield Clinton Township, MI 48038</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>35.00</u>	\$ <u>70.00</u>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/02/11</u></p> <p>Name & Address: Scott Chabot 42274 Toddmark LN Clinton Township, MI 48038</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Giffels-Webster Engineering, Inc.</u> Business Address <u>2871 Bond Street Rochester, MI 48309</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>175.00</u>	\$ <u>175.00</u>

Page Subtotal \$402.50

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/06/11</u>	
Name & Address: Roy Rose 55620 Woodbridge Dr. Shelby Township, MI 48316		\$ <u>35.00</u>	\$ <u>110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Anderson, Eckstein & Westrick, Inc.</u> Business Address <u>51301 Schoenherr Road Shelby Township, MI 48315</u> 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>06/10/11</u>	
Name & Address: George Fresard, Jr. 39711 Moravian Dr. Clinton Township, MI 48036		\$ <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>06/10/11</u>	
Name & Address: Sherry Sorrentino 35520 Forton Ct. Clinton Township, MI 48035		\$ <u>35.00</u>	\$ <u>35.00</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>06/10/11</u>	
Name & Address: Chuck Towner 39757 Brylor CT Clinton Township, MI 48038		\$ <u>250.00</u>	\$ <u>900.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Towner & Towner PC</u> Business Address <u>38770 Garfield Suite 100 Clinton Township, MI 48038</u> 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 \$345.00

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/10/11</u> Name & Address: Gordon Wilson 19297 Hickory Ridge Road Rose Township, MI 48430		\$ <u>35.00</u>	\$ <u>95.00</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>06/14/11</u> Name & Address: Leo Lalonde 24801 Rosalind Eastpointe, MI 48021		\$ <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>06/14/11</u> Name & Address: Patrick Moran 26201 Harbour Pointe Dr. Harrison Township, MI 48045		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Moran Chevrolet</u> Business Address <u>35500 Gratiot Clinton Township, MI 48035</u> 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>06/14/11</u> Name & Address: Stephen Swetech 43868 Scoter Ln. Clinton Township, MI 48038		\$ <u>17.50</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	

Page Subtotal \$152.50

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 137832
2. Committee Name CTE DEAN REYNOLDS

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>06/14/11</u>	
Name & Address: Switalski Leadership Fund 31412 Gay Roseville, MI 48066		\$ <u>17.50</u>	\$ <u>67.50</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>06/14/11</u>	
Name & Address: Barry Burnham 40800 Hayes Rd Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>35.00</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>06/14/11</u>	
Name & Address: James George 19634 Westchester Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>47.50</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>06/14/11</u>	
Name & Address: Tony Gallo 37425 Bellagio Ct. Clinton Township, MI 48036		\$ <u>35.00</u>	\$ <u>85.00</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 \$122.50

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 137332
2. Committee Name CTE DEAN REYNOLDS

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 06/21/11

Name & Address:

CTE Denise Aquino
16940 Franziska
Macomb, MI 48044

\$ 25.00

\$ 37.50

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 06/21/11

Name & Address

Gregory Buss
38133 Woodcrest
Clinton Township, MI 48036

\$ 70.00

\$ 172.50

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

Occupation Attorney Employer Gregory A Buss, P.C.

[Click Here for Memo Itemization](#)

Business Address 42657 Garfield Suite 215 Clinton Township, MI 48038

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 06/21/11

Name & Address:

Mark Deldin
22934 Edgewater
St.Clair Shores, MI 48082

\$ 17.50

\$ 52.50

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 06/21/11

Name & Address

Euel Kinsey, Jr.
37418 Fiore Trail
Clinton Township, MI 48036

\$ 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

Page Subtotal \$162.50

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/21/11</u>	
Name & Address: Robert Kirk 19500 Hall Rd STE 100 Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk, Huth & Lange, PLC</u> Business Address <u>19500 Hall Rd STE 100 Clinton Township, MI 48038</u> 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>06/21/11</u>	
Name & Address: William Sowerby 37860 Saddle LN. Clinton Township, MI 48036		\$ <u>17.50</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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/21/11</u>	
Name & Address: Benjamin Aloia 48 S Main ST STE 3 Mount Clemens, MI 48043		\$ <u>35.00</u>	\$ <u>35.00</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>06/21/11</u>	
Name & Address: Mario Lavinio 18341 Nardy Clinton Township, MI 48036		\$ <u>50.00</u>	\$ <u>122.50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Mario's Body Shop</u> Business Address <u>34607 Gratiot Avenue Clinton Township, MI 48035</u> 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 \$137.50

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/21/11</u> Name & Address: Denise Trombley 4150 Janet Circle Clinton Township, MI 48038		\$ <u>17.50</u>	\$ <u>35.00</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>06/21/11</u> Name & Address: Dominic Abbate 2500 Royal View Dr. Oakland, MI 48363		\$ <u>70.00</u>	\$ <u>270.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Wakely Associates</u> Business Address <u>30500 Van Dyke Avenue Suite M-7 Warren, MI 48093</u> 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>06/21/11</u> Name & Address: Frank Bednard 41001 Hidden Oaks Clinton Township, MI 48038		\$ <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 #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/21/11</u> Name & Address: Robert Campbell 41830 Kentvale Dr. Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>70.00</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 \$147.50

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 137332
2. Committee Name ITE DEAN REYNOLDS

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>06/21/11</u>	
Name & Address: Fred Posavetz 46132 Ben Franklin Drive Shelby Township, MI 48315		\$ <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>06/21/11</u>	
Name & Address: Chuck Towner 39757 Brylor CT Clinton Township, MI 48038		\$ <u>100.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Towner & Towner PC</u> Business Address <u>38770 Garfield Suite 100 Clinton Township, MI 48038</u> 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>06/21/11</u>	
Name & Address: George Fitzgerald 43377 Rivergate DR Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>90.00</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>06/21/11</u>	
Name & Address: Joseph Ciaramitaro 38954 Santa Barbara Clinton Township, MI 48036		\$ <u>35.00</u>	\$ <u>70.00</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 \$220.00

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/21/11</u>	
Name & Address: Marilyn Lane 16558 Woodlane Fraser, MI 48026		\$ <u>17.50</u>	\$ <u>52.50</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>06/21/11</u>	
Name & Address: Sephen Saph, Jr. 44 Macomb PL. Mt. Clemens, MI 48046		\$ <u>70.00</u>	\$ <u>170.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Agency Principle</u> Employer <u>Nickel & Saph Inc</u> Business Address <u>44 Macomb Place Mt. Clemens, MI 48046</u> 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>06/21/11</u>	
Name & Address: Ernest Hornung 15663 Stockton Clinton Township, MI 48038		\$ <u>35.00</u>	\$ <u>95.00</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>06/21/11</u>	
Name & Address: Peter Thomas 5018 Seven Lakes Drive South Washington Township, MI 48095		\$ <u>70.00</u>	\$ <u>70.00</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 \$192.50

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/21/11</u>	
Name & Address: Mary Jo Imbronone 52034 Heatherstone Macomb, MI 48042		\$ <u>35.00</u>	\$ <u>35.00</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>06/21/11</u>	
Name & Address: Vincenza Digiuseppe 40707 Ruggero ST. Clinton Township, MI 48038		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/21/11</u>	
Name & Address: Patrick Meagher 51278 Caroline Dr. Chesterfield, MI 48047		\$ <u>35.00</u>	\$ <u>95.00</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>06/21/11</u>	
Name & Address: Mrs. Ronald Michaels 26299 Tucker Harrison Township, MI 48045		\$ <u>35.00</u>	\$ <u>105.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Uni-Dig, Inc.</u> Business Address <u>21600 Quinn Rd Clinton Township, MI 48035</u> 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 \$155.00

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>06/21/11</u>	
Name & Address: Ndue Ftoni 38756 Westchester Sterling Heights, MI 48310		\$ <u>175.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>IMPERIAL HOUSE</u> Business Address <u>34701 GROESBECK Hwy CLINTON TWP</u> 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>06/21/11</u>	
Name & Address: Gary Kukuk 39887 Coalport Dr. Clinton Township, MI 48038		\$ <u>120.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER / V.P.</u> Employer <u>GARFIELD + CANAL SERVICE</u> Business Address <u>116933 CANAL RD CLINTON TWP MI 48038</u> 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>06/21/11</u>	
Name & Address: John Lesser 13401 Hawk Drive Shelby Township, MI 48315		\$ <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>06/21/11</u>	
Name & Address: Terry Mill 38578 Gainsborough Dr. Clinton Township, MI 48038		\$ <u>37.50</u>	\$ <u>37.50</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 **\$382.50**

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 137332
2. Committee Name CTE DEAN REYNOLDS

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>8/20/11</u>	
Name & Address: <u>UAW REGION 1</u> <u>27800 GEORGE MERFELL DR</u> <u>WARREN MI 48092</u>		\$ <u>70.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: 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 checked="" type="checkbox"/> YES	4. Date of Receipt <u>12/21/11</u>	
Name & Address: <u>CLINTON TWP FIREFIGHTERS PAC</u> <u>43601 ROMEO PLANK</u> <u>CLINTON TWP MI 48038</u>		\$ <u>325.00</u>	\$ <u>675.00</u>
5. If over \$100.00 cumulative, please provide: 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 #3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>1/5/11</u>	
Name & Address: <u>CLINTON TOWNSHIP POLICE OFFICERS ASSOCIATION PAC</u> <u>37985 GROESBECK</u> <u>CLINTON TWP MI 48038</u>		\$ <u>500.00</u>	\$ <u>675.00</u>
5. If over \$100.00 cumulative, please provide: 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 _____	
Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

895.00
3927.50

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 137332
2. Committee Name CTE DEAN REYNOLDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>AMERICAN GRAPHICS PRINTING</u> Address <u>34895 GLOESBECK HWY</u> <u>CLINTON TWP MI 48035</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FUNDRAISER TICKETS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/19/11</u> Date	\$ <u>18.55</u>
Expenditure #2 Name <u>CJ BARRYMORES</u> Address <u>21750 HALL RD</u> <u>CLINTON TWP MI 48038</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FOOD + SERVICES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/11</u> Date	\$ <u>250.00</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 268.55
Grand Total of all Schedules 1B
(Complete on last page of Schedule) 268.55

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 137332
2. Committee Name Committee to Elect Dean Reynolds

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. <small>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 guarantor, if any.</small>	4. Type of Obligation (Indicate type and you may assign an expenditure code) 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: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>1-23-04</u> 6. Original Amount of Debt: <u>\$ 2,000.00</u>	<u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u>	<u>\$</u>	<u>\$2,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6/30/04</u> 6. Original Amount of Debt: <u>\$ 3,500.00</u>	<u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u>	<u>\$</u>	<u>3,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6/11/04</u> 6. Original Amount of Debt: <u>\$ 2,500.00</u>	<u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u> <u>1 / 1 / \$</u>	<u>\$</u>	<u>2,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

8000.00

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137332

2. Committee Name Committee to Elect Dean Reynolds

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 guarantor, if any.

4. Type of Obligation (Indicate type and you may assign an expenditure code)

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 5 minus item 8)

Debt #1 Corp? ☐ Yes

Owed to or by:

Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type: LOAN

5. Date Debt Was Incurred:

7-14-04

6. Original Amount of Debt:

\$ 5,500⁰⁰

1 / 1

1 / 1

1 / 1

1 / 1

1 / 1

\$

\$5,500⁰⁰

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #2 Corp? ☐ Yes

Owed to or by:

Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type: LOAN

5. Date Debt Was Incurred:

8-31-04

6. Original Amount of Debt:

\$ 3,000⁰⁰

1 / 1

1 / 1

1 / 1

1 / 1

1 / 1

\$

3,000⁰⁰

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #3 Corp? ☐ Yes

Owed to or by:

Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type: LOAN

5. Date Debt Was Incurred:

10-6-04

6. Original Amount of Debt:

\$ 2,000⁰⁰

1 / 1

1 / 1

1 / 1

1 / 1

1 / 1

\$

2,000⁰⁰

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Page Subtotal (Outstanding debt)

10,500⁰⁰

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.

Page 2 of 5



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332
2. Committee Name Committee to Elect Dean Reynolds

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 guarantor, if any.

Debt #1 Corp? ☐ Yes
Owed to or by:
Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type of Obligation (Indicate type and you may assign an expenditure code)
5. Indicate date debt was incurred
6. Indicate original amount of debt

4. Type: LOAN
5. Date Debt Was Incurred: 10-12-04
6. Original Amount of Debt: \$ 1,000.00

7. Date and amount of each payment

1/1/5
1/1/5
1/1/5
1/1/5
1/1/5

8. Cumulative payment to date on debt

\$

9. Outstanding Balance at close of this period (Item 6 minus Item 8)

\$ 1,000.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Debt #2 Corp? ☐ Yes
Owed to or by:
Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type: LOAN
5. Date Debt Was Incurred: 10-11-04
6. Original Amount of Debt: \$ 2,000.00

1/1/5
1/1/5
1/1/5
1/1/5
1/1/5

Amount Endorsed: \$

\$

2,000.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Debt #3 Corp? ☐ Yes
Owed to or by:
Dean Reynolds
20040 White Oaks
Clinton Twp. MI 48036

4. Type: LOAN
5. Date Debt Was Incurred: 10-21-04
6. Original Amount of Debt: \$ 6,000.00

1/1/5
1/1/5
1/1/5
1/1/5
1/1/5

Amount Endorsed: \$

\$

6,000.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Page Subtotal (Outstanding debt)

9,000.00

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

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 3 of 6

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

**MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS**

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332
2. Committee Name Committee to Elect Dean Reynolds

This Schedule Covers:

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.		4. Type of Obligation (Indicate type and you may assign an expenditure code)	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)
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. Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>		4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>10-25-04</u> 6. Original Amount of Debt: <u>\$ 8,000.00</u>	<u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u>	\$ <u> </u>	<u>\$ 8,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>		4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>10-26-04</u> 6. Original Amount of Debt: <u>\$ 2,100.00</u>	<u>3/19/05 1900.00</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u>	Amount Endorsed: \$ <u>1900.00</u>	<u>200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>		4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>11-10-04</u> 6. Original Amount of Debt: <u>\$ 300.00</u>	<u>3/21/05 300.00</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u> <u>1 / 1 / 8</u>	Amount Endorsed: \$ <u>300.00</u>	<u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Page Subtotal (Outstanding debt): <u>8,200.00</u> Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by 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.

Page 4 of 5

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

2. Committee Name Committee to Elect Dean Reynolds

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 (Indicate type and you may assign an expenditure code) 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) <input type="checkbox"/> FORGIVEN
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp, MI 48036</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>12-17-04</u> 6. Original Amount of Debt: <u>\$ 3200.00</u>	<u>1/28/05 \$ 600.00</u> <u>2/12/05 \$ 1500.00</u> <u>3/14/05 \$ 1100.00</u> <u>1/1 \$</u> <u>1/1 \$</u>	<u>\$ 3200.00</u>	<u>\$ 0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp, MI 48036</u>	4. Type: <u>LOAN</u> <u>1-11-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>\$ 315.45</u>	<u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u>	<u>\$</u>	<u>315.45</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp, MI 48036</u>	4. Type: <u>LOAN</u> <u>10-10-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>\$ 350.00</u>	<u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u> <u>1/1 \$</u>	<u>\$</u>	<u>350.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____				

Page Subtotal (Outstanding debt)

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

665.45

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 5 of 6

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

2. Committee Name Committee to Elect Dean Reynolds

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 (Indicate type and you may assign an expenditure code) 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 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOAN</u> <u>10-19-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>\$ 100⁰⁰</u>	<u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u>	<u>\$</u>	<u>\$ 100⁰⁰</u> <input type="checkbox"/> FORGIVEN
Debt #2 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOAN</u> <u>9-10-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>\$ 900⁰⁰</u>	<u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u>	<u>\$</u>	<u>900⁰⁰</u> <input type="checkbox"/> FORGIVEN
Debt #3 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOAN</u> <u>11-3-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>\$ 900⁰⁰</u>	<u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u> <u>1 / 1 \$</u>	<u>\$</u>	<u>900⁰⁰</u> <input type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt)

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

1900⁰⁰
38265.45
Enter this total
on line 12a
"owed by" or
line 12b "owed
to" of the
Summary Page

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137332

2. Committee Name

CTE DEAN REYNOLDS

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

6/21/11

4. Number of Individuals Attending
or Participating (whichever is
greater)

96

5. Type of Fund Raising Activity

BARBECUE

6. Address and Name (If any) of the
place where the activity was held.

CTE BARLYNKE
21750 HALL
☐ CLINTON TWP MI 48058
Private Residence

7. Total Contributions

\$6,065⁰⁰

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

\$6,065⁰⁰

10. Total Cost of Event

\$537¹⁰

(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)

CTE KEN PERAL

Contribution Split
(%)

50

Expenditure Split
(%)

50

- 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.