

12 JAN-3 AM 8:08 Twentfour pages-

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE	WE CIEMPAN
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 01/01/11 to 12/31/11
1. Committee I.D. Number	4. Candidate Last Name First Name M.L.
138800	Flynn Michael J.
2. Committee Name	4a, Office Sought Including District # or Community Served (If applicable)
Michael Flynn for Treasurer	Shelby Township Treasurer
Miorido: Tyrii ioi Tiododioi	4b. County of Residence Macomb
5. Committee's Mailing Address	6. Tressurer's Name & Residential Address
P.O. Box 81522	Michael Flynn
Rochester, MI 48308-1522	53218 Providence East
· .	Shelby Township, MI 48316
(0.40) 600 4500	5 T
Area Code and Phone (248) 608-1506	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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 (248) 608-1506
7. Treasurer's Business Address	
7. Treasurers business Address	8. Designated Record keeper's Name and Mailing Address (If the contributes has an Designated Record keeper)
	Sen o
	Z×
	·
Area Code and Phone	Area Code and Phone
9. TYPE OF STATEMENT	,
_ []	-Election 9c. Annual Statement (2011 Coverage Year)
_ []	-Election 9c. Annual Statement (2011 Coverage Year)
_ []	-Election 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)
9a. Pre-Election OR 9b. Post 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) 9e. Dissolution of Candidate Committee
9a. Pre-Election OR 9b. Post 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) 9e, Dissolution of Candidate Committee
9a. Pre-Election OR 9b. Post 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) 9e. Dissolution of Candidate Committee Effective Date of Dissolution
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen	Paragraphic Property of Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. Dissolution of Candidate Committee eral Effective Date of Dissolution
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. Dissolution of Candidate Committee eral 6ool 6ffective Date of Dissolution 6by checking this item, NWe certify that the committee has no assets or
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch	eral By checking this item, NWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, IWe request that if the dissolution cannot be granted, that this be considered a request for
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch	eral Out 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, NWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, IWe request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch	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, NWe 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 18 and the Summary Page.
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch	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, NWe 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 18 and the Summary Page.
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe	eral 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. Dissolution of Candidate Committee 600 611 621 622 623 624 625 626 626 627 628 628 629 629 629 629 629 629
9a. Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe	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, NWe 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 18 and the Summary Page.
Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-Kind contributions, loans, says if any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, to	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 18 and the Summary Page. quired Campaign Statements. The Campaign Statements must include all applicable additures, and outstanding debts count against the \$1,000 Reporting Waiver threshold, ed since the information was shown on the committee's Statement of Organization, an inst Campaign Statement. If a request for a Reporting Waiver is not received on or nat campaign statement cannot be waived.
Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, it 10. Verification: IWVe certify that all reasonable diligence was used myyour knowledge and belief the contents are true, accurate and or	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 18 and the Summary Page. quired Campaign Statements. The Campaign Statements must include all applicable additures, and outstanding debts count against the \$1,000 Reporting Waiver threshold, ed since the information was shown on the committee's Statement of Organization, an instrument of Organization, an instrument of Campaign Statement. If a request for a Reporting Waiver is not received on or not campaign statement cannot be waived.
Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Statement or Caucus Date of Election, Convention or Caucus Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, experiment of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to the Statement of Organization should accompany to before the filing deadline of a required campalgn.	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, RWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, If 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 18 and the Summary Page. Quired Campaign Statements. The Campaign Statements must include all applicable and since the information was shown on the committee's Statement of Organization, an is Campaign Statement. If a request for a Reporting Waiver is not received on or nat campaign statement cannot be waived. Date O1/02/2012
Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expe if any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, it 10. Verification: INWe certify that all reasonable diligence was used my/your knowledge and belief the contents are true, accurate and of Current Treasurer or Michael J. Fivno	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, NWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, If 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 18 and the Summary Page. Quired Campaign Statements. The Campaign Statements must include all applicable additures, and outstanding debts count against the \$1,000 Reporting Waiver threshold, ed since the information was shown on the committee's Statement of Organization, an is Campaign Statement. If a request for a Reporting Waiver is not received on or last campaign statement cannot be waived. O1/02/2012
Pre-Election OR 9b. Post Pre-Election or Post-Election Statement relates to: Primary Gen Convention Sch Special Cau Date of Election, Convention or Caucus A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, experiment of the information listed in items 2, 4, 5, 6, 7, or 8 has chang amendment to the Statement of Organization should accompany to before the filing deadline of a required campalgn statement, to 10. Verification: NWe certify that all reasonable diligence was used my/our knowledge and belief the contents are true, accurate and of Current Treasurer or Designated Record keeper Michael J. Flynn Michael J. Flynn	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, RWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, If 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 18 and the Summary Page. Quired Campaign Statements. The Campaign Statements must include all applicable and since the information was shown on the committee's Statement of Organization, an is Campaign Statement. If a request for a Reporting Waiver is not received on or nat campaign statement cannot be waived. Date O1/02/2012





1. Committee I.D. Number 138800	
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SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Michael Flynn For Treasurer

CANDIDATE COMMITTEE	Z Continues Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	7004.04	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 7,961.31	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c) \$ \$7,961.31	(18.) \$
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$7,961.31	(20.) \$ \$7,961.31
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.) S	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$4,250.50	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) S	
9. TOTAL EXPENDITURES (Add Line &a + Line 8b + Line 8c)	(9.) \$ \$4,250.50	(23.) \$ \$4 ,250.50
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itamized (Schedule 1C, Column 5)	(10a.) \$	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10s + Line 10b)		
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations	* = .= ==	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$542.96	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	•
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$0.00	_
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$7,961.31	_
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ \$7,961.31	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$4,250.50	•
(Add lines 9 and 11) 17. ENDING BALANCE	(17.) \$ \$3,710.81	_+
(Subtract line 16 from line 15)	- ,	





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

138800 1. Committee I.D. Number

2. Committee Name Michael Flynn for Treasurer

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)
Contribution # 1 PAC Receipt? YES 4, Date of Receipt 01/24/11 Name & Address:		
Michael Flynn		
53218 Providence East	_s 303.24	. 303.24
Shelby Township, MI 48316	§ 303.24	\$ 000.27
5. If over \$100.00 cumulative, please provide:		
Occupation Management Employer Plant Maintenance Direct, LLC	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/11 Name & Address		,
Michael Flynn 53218 Providence East	_{\$} 41.00	s 344.24
Shelby Township, MI 48316		44
5. If over \$100.00 cumulative, please provide: Management France: Plant Maintenance Direct, LLC	Click Here to	r Memo Itemization
Occupation Management Employer Frank Warnerlance Direct, LEC		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		·
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/16/11 Name & Address:		
Michael Flynn 53218 Providence East	s 46.07	، 390.31
	- 1150	
Shelby Township, MI 48316 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Management Employer Plant Maintenance Direct, LLC		٠.
VIV. PORTON		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/19/11 Name & Address		-
Michael Flynn		
53218 Providence East	ູ 39.60	. 429.91
Shelby Township, MI 48316	5	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Management Employer Plant Maintenance Direct, LLC	Click Here for	Memo Itemization
Business Address	. "	• •
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$429.91	
Grand Total of All Schedules 1A	\$7,961.31] .
(Complete on last page of Schedule)	Catar tale tatal an	J.

Page 1 of 13

Enter this total on line 3e of Summary Page.





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number __138800

CANDIDATE COMMITTEE

² Committee Name Michael Flynn for Treasurer

Z. CONSTITUES ROUTE		
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 09/20/11		vale of fecapit
Name & Address: Michael Flynn		
53218 Providence East	404.55	E00.04
Shelby Township, MI 48316	<u> </u>	₂ 590.91
5. If over \$100.00 cumulative, please provide;		
Occupation Management Employer Plant Maintenance Direct, LLC	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct V Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4, Date of Receipt Name & Address		
Christopher Krystek 50515 Corporate Drive	_s 90	_s 90
Shelby Township, MI 48315	3 – –	\$ 00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
deal Technology	Union Figure 10	mento nemetation
Business Address		
Type of Contribution:		
PAC Receipt? YES 4. Date of Receipt Name & Address:		
Ed & Lori Ferrara	s 90	<u>,</u> 90
55410 Parkview Dr.	\$00	\$ 3 U
Shelby Township, MI 48316	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		
Conde Gonzalez		
45649 Custer	_s 100	ູ 100
Utica, MI 48317		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer Jac Products		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$441.00	
Grand Total of All Schedules 1A	\$7,961.31	
(Complete on last page of Schedule)	W. 140 1.01	,i

Enter this total on line 3a of Summary Page.





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number ___138800

CAN	DID/	\TE	COM	MIT	TEE
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Michael Flynn for Treasurer

CANDIDATE COMMITTEE 2. Committee Name	Trial I Tyrice	o
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)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/28/11 Name & Address:		. · · · · ·
David Evans		
1568 Pebble Creek Dr.	_s 90	_s 90
Rochester, MI 48307	\$ 00	
5. If over \$100.00 cumulative, please provide:	Click Here t	or Memo Itemization
Occupation Employer	Olok Here i	or metro remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/29/11 Name & Address	,	
Bill & Lisa Griffin 53248 Wolf	<u>\$</u> 90	<u>\$ 90</u>
Shelby Township, MI 48316		
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/30/11 Name & Address:		
Andy Sakmar	_s 50	_s 50
8899 Mary Ann Avenue	5 00	<u> </u>
Shelby Township, MI 48317	Click Here fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olou Here II	W WICH TO IT OF THE PROPERTY O
Occupation Employer		
Business Address Type of Contribution: Direct		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/01/11 Name & Address		
Richard Wright 8800 23 Mile Road Shelby Township, MI 48316	<u>\$ 100</u>	<u> 100</u>
5. If over \$100.00 cumulative, please provide:	Clinto Have Co	r Memo Itemization
Occupation Engineer Employer Urban Land Consultants, LLC	Click Hele to	it Meuo HatuZaron
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1.0.00	
Page Subtotal	\$330.00	
Grand Total of Ali Schedules 1A	\$7,961.31	
(Complete on last page of Schedule)	41,001.01	1

Enter this total on tine 3a of Summary Page.

Page 3 of 13







ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 138800

CARDIDATE COMMITTEE 2. Committee Name 17	iciaei Fiynn	or reasurer
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
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/03/11		date of receipt)
Dave Share	.	
53137 Gregory Drive		
Macomb, MI 48042	, 4 5	. 45
5. W over \$100.00 cumulative, please provide:		3
Occupation Employer	Click Here f	or Memo Itemization
Business Address	·	
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4, Date of Receipt 10/07/11 Name & Address		•
Elzbieta Sienkiewicz 2263 Barclay Shelby Township, MI 48316	<u>\$ 100</u>	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer_Ela's Salon	Onor rigio to	Metric irentitystoti
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	•	
Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/07/11		
Michael Flynn		
53218 Providence East	_s 775.40	<u>,</u> 1366.31
Shelby Township, MI 48316		*
i. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	:	
kusiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/08/11		
Villiam Lang		٠.
491 Aubum Road	.45	. 4 5
Shelby Township, MI 48317	<u>s</u> TV	<u>\$ 40</u>
. If over \$100.00 cumulative, please provide:	~ !!_1_1	A.A. 11
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$965.40	

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

Enter this total on line 3a of Summary Page.

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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

138800 1. Committee I.D. Number

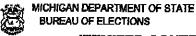
Michael Flynn for Treasurer 2. Committee Name

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 all contributions regardless of amount.	6. Amount	Cumulative for Each Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/08/11 Name & Address:		<i>/</i> *
Tom Jabiro		00
55150 Shelby Road	ş 90	<u>\$ 90</u>
Shelby Township, MI 48316		
5. E 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	····	,
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/08/11 Name & Address		
Thomas Guastello 300 Park Street	ş <u>90</u>	<u>s</u> 90
Birmingham, MI 48009		
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/10/11 Name & Address:	,	
Nick loppolo	_s 500	s 500
29 Woodhill Rd.	\$ 000	_ <u>\$ 300</u>
Milford, CT 06461-2367	Click Here f	or Memo Itemization
5. If over \$100.90 cumulative, please provide:		CA TAILOTTIC TECHNICATION
Occupation Management Employer sikorsky helicopter		
Business Address	•	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/11/11 Name & Address		
Phillip Ruggeri	- - -	
55764 St. Regis	، 450	ູ 450
Shelby Township, MI 48315		- 4 <u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Attorney Employer	when the f	
Business Address	6.5	•
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,130.00	

Grand Total of All Schedules 1A \$7,961.31 (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number <u>138</u>800

CANDID	ATE (COMM	ITTEE

Michael Flynn for Treasurer

CANDIDATE COmmittee 2. Committee	Name Whorldoll lythin for Treasurer
Enter contributor's name and address. If contribution is from an individual, enter last name, t middle initial. Check box to indicate if contribution is from a Political Committee or an Indepe Committee (PAC) Report all contributions regardless of amount.	first name, endent 6. Amount 7. Cumulative for Election Cycle for Eac Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/11/11	
Name & Address:	
Gary D. Alessandro & Rose Torres 28135 Groesbeck Hwy.	
Roseville, MI 48066	s 90 s 90
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	NAMES 18
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/11/11 Name & Address	
Harry Awdey PO Box 331	<u>\$45</u> <u>\$45</u>
Armada, MI 48005	Pillala I I a va Fan Mariana (Maria) - Nara
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
OccupationEmployer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/11/11 Name & Address:	
Eric C. Vantiegham	s 25 c 25
2876 Crows Nest Cir.	§25 _{\$} 25
Uniontown, OH 44685	Click Here for Memo Itemization
5. If over \$100.60 cumulative, please provide:	
Occupation Employer	·
Business Address	<u></u>
Type of Contribution: Direct. Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address	· · · · · · · · · · · · · · · · · · ·
Paula C. Filar	00
5500 24 Mile Rd.	¸90
Shelby Township, MI 48316	V
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	<u> </u>
Type of Contribution: Direct Loan from a person Fund Raiser	
Pa	age Subtotal \$250.00
A 17-31-740 A	47 004 04

Grand Total of All Schedules 1A (Complete on last page of Schedule) \$7,961.31

Enter this total on line 3a of Summary Page.

Page 6 of 13





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number _

138800

CANDIDATE COMMITTEE 2. Committee Name	vichaei Flynn f	or Treasurer
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)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address:		
Donna & Joe Kohn 53971 Shelby Road	_ s 100	. 100
Shelby Township, MI 48316 5. If over \$160.00 cumulative, please provide:		<u></u>
Occupation Retired Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		
Ray Krakowski 50515 Corporate Drive Shelby Township, MI 48315	<u>\$</u> 90	, 90
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 10/12/11 Name & Address:		
Simone Mauro 48657 Hayes Shelby Township, MI 48315	\$ 100	s 100
5. If over \$100.60 cumulative, please provide:		
Occupation Engineer Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		
Dave Kiurski 42816 Willsharon Sterling Heights, MI 48314	<u>\$90</u>	<u>, 90</u>
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 Subto	\$380.00	,
Grand Total of All Schedules 1	A \$7 061 31	1

(Complete on last page of Schedule) \$7,961.31

Enter this total on line 3a of Summary Page.

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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

138800

CANDIDATE COMMITTEE

Michael Flynn for Treasurer

		Tor Treasurer
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 10/12/11		CONC. OF FEMALES
Robert Murray		
765 Passive		
Rochester, MI 48306	_s 100	_s 100
5. If over \$100.00 cumulative, please provide:		
Occupation Marketing Employer Meritz	Click Here	for Memo Itemization
Business Address	•	
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		
	_	
Craig Lange 3301 Medford Drive	۶90 s	00
Troy, MI 48084	\$ 90	<u>\$ 90</u>
5. If over \$100.90 cumulative, please provide:	Of all III	eda na na
Attornov	Crick Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address:	_	
Jeff English	00	00
53162 Manchester Ave	<u>\$ 90</u>	_
Shelby Township, MI 48316	Click Hore fr	or Memo Itemization
5. If over \$100.00 cumulative, please provide:	Ollow Field II	A METHO REPRESENT
Occupation Employer]
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<u></u>	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address	_	
Danny Hutchins Sr.	**	· · ·
40833 Brentwood St.	_{\$} 90	_s 90
Sterling Heights, MI 48310	,	
5. If over \$100.00 cumulative, please provide:	Click Here fo	x Memo Itemization
Occupation Employer		1
Business Address	•	
Type of Contribution: Direct Loan from a person Fund Raiser		1
	s370.00	

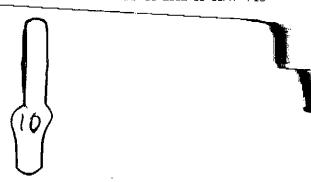
Grand Total of All Schedules 1A (Complete on last page of Schedule)

\$7,961.31

Enter this total on line 3a of Summary Page.

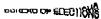
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Page _8 of _13









ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number	138800
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CANDIDATE COMMITTEE	2 C	Michael Elvas	f T
Enter contributor's name and a dr	2. Committee Name	Michael Flynn	for freasurer
3. Contribution # 1	ter last name, first nam se or an Independent	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
Name & Address: PAC Receipt? YES 4. Date of Receipt	10/12/11		date of receipt)
Eugene D'Agostini			
38700 Vandyke Ste 200			
Sterling Heights, MI 48312		_s 200	. 200
5. If over \$100.00 cumulative, please provide:		<u></u>	
Cocupation Real Estate Employer		Click Here	for Memo Itemization
Businese Address			•
Type of Contribution: V Direct Loan from a person V F	und Raiser	•	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4			
	10) 12) 11	1 M	
Robert Silveri			
49160 Driftwood Drive		_{\$} 90	. 90
Shelby Township, MI 48317			<u> </u>
5. If over \$190.00 cumulative, please provide:		Click Here fo	r Memo Itemization
OccupationEmployer			
Business Address			
Type of Contribution: 1 Direct Loan from a person 1 F	und Raiser		
3. Contribution # 3 PAC Receipt? YES 4, Date of Receipt 1	0/12/11		
Jean Silveri		00	
49160 Driftwood Drive		<u>, 90</u>	s 90
Shelby Township, MI 48316		Öü-ti II	
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
	und Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 1	0/12/11	-	
Marigien Hoti 964 Barclay Drive			
Troy, MI 48085		₄ 500	500
K man \$400 cm		\$ 000	\$ 000
5. If over \$100.00 cumulative, please provide:		Click Here for I	Memo Itemization
Occupation Engineer Employer	.,		THE THE PARTY OF T
Business Address			
Type of Contribution: Direct Loan from a person Fun	d Reiser		

Page Subtotal \$880.00

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

Street this total of the local of the lo





ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 138800

CANDIDATE COMMITTEE

2. Committee Name Michael Flynn for Treasurer

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 recept)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address:		
Faziullah M. Kahn 5238 Windmill Troy, MI 48085 5. If over \$100.00 cumulative, please provide:	§ 450	_{\$} 450
Occupation Engineer Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser	WILDER AND TO THE REST OF THE PARTY OF THE P	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		
Paul Nuccilli 2168 Allard Ave Grosse Point Woods, MI 48236	<u>\$ 300</u>	_s 300
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Retired Employer		
Susiness Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address:	· · · · · ·	
Michael Hardy 8273 22 Mile Road Shelby Township, MI 48317 5. If over \$190.00 cumulative, please provide:	\$45 Click Here t	_ s 45 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 10/12/11 Name & Address		
Wayne Oehrnke 17610 21 Mile Rd Macomb, MI 48044 5. If over \$100.00 cumulative, please provide:	\$45	s 45
	Click Hele to	or Memo Itemization
Occupation Employer		·
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		

Grand Total of All Schedules 1A \$7,961.31 (Complete on last page of Schedule)

Enter this total on

line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 138800

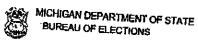
CANDIDATE COMMITTEE

2 Committee Name Michael Flynn for Treasurer

2. Sprinkling Family		
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 10/12/11		
Name & Address:		
Rob Huth	•	
19500 Hall Road Clinton Township, MI 48038	,200	, 200
5. If over \$100.00 cumulative, please provide:	<u> </u>	<u> </u>
- Afformov -	Click Here fo	or Memo Itemization
Occupation Autoritey Employer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		
Bob Kirk	200	000
19500 Hall Road	_s 200	₅ 200
Clinton Township, MI 48038		-
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Attorney Employer		
Business Address		
Type of Combibution: V Direct Loan from a person V Fund Raiser	•	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address:		
Rachel Badalmeti	200	
19500 Hall Road	<u>s</u> 200	<u>\$ 200</u>
Clinton Township, MI 48038		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Attorney Employer		
Business Address	•	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/12/11 Name & Address		,
Mark Schnieder		
945 Barmtom Road	₂ 500	. 500
Grosse Point, MI 48230	•	3
5. If over \$100.00 cumulative, please provide:	Clink Hara for	Memo Itemization
Cooupetion Insurance Agent Employer	CHICK CHETE IOI	Wellio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,100.00	
•	~	-
Grand Total of All Schedules 1A	¢7 061 31	i

(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 138800

Michael Flynn for Treasurer

				onder i lyrai i	Or rieasurer
Enter contributor's nam middle initial. Check be Committee (PAC) Repo	X to indicate it car	contribution is from an individua stribution is from a Political Con regardless of amount.	al, enter last name, first name, imittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt?	YES 4. Date of Rec	ceipt 10/14/11	····	Cate of Tecept)
Name & Address:			1	-	
Michael A. Chiro 46600 Romeo P	-				
Macomb, MI 480		ole o		_s 100	. 100
5. If over \$100,00 cum		Witter			3
_				Click Here fo	or Memo Itemization
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of Rec	eipt 10/14/11		
Gregory E. Avsh 8980 Oak Run D	rive			_{\$} 100	<u>, 100</u>
Shelby Township					
5. If over \$100.00 cumu	zuve, piesse pro	vide:	•	Click Here fo	r Memo Itemization
Occupation		_ Employer			
Business Address	· · · · · · · · · · · · · · · · · · ·				
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?	YES 4. Date of Rec	elpt 10/17/11		
Damiano Dimero	urio			400	
20383 Hall Road				_{\$} 100	_s 100
Macomb, MI 480	44		,	ora II. a	B. C. and D. and D. and
5. If over \$160,00 cumul	ative, please pro	vide:		Click Here for	Memo Itemization
Occupation		Employer		•	
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #4 Name & Address	PAC Receipt?	YES 4. Date of Rec	ceipt 10/19/20		
Shant Shirinian 23670 Ryan Roa				_{\$} 500	_s 500
Warren, MI 4809		••			
5. If over \$100.00 cumul		:		Click Here for	Memo Itemization
Occupation Call Dec	nei	- Employer Chase Au	IOMOUVE		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtotal	\$800.00	
			and Table of SII Cabadulas 4A	#7 004 04	ĺ

Grand Total of All Schedules 1A (Complete on last page of Schedule) \$7,961.31

Enter this total on line 3a of Summary Page.

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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

138800 1. Committee I.D. Number

Michael Flynn for Treasurer CANDIDATE COMMITTEE 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name. 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/21/11 Name & Address: Phillip C. McKenna 235 East Main Street Northville, MI 48167 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 YES 4. Date of Receipt PAC Receipt? Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer, Occupation __ Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? 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: 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: **Fund Raiser** Direct Loan from a person

Page ______13__of__13

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

\$7.961.31

\$45.00

Enter this total on line 3a of Summary Page.





ITEMIZED EXPENDITURES **SCHEDULE 1B**

138800 1. Committee I. D. Number

2. Committee Name Michael Flynn For Treasurer CANDIDATE COMMITTEE 4. Purpose (Required Information) 6. Amount 3. Name and address of person or vendor to whom paid Expenditure #1 09/12/11 Name Ebay.com s 47.90 Purpose: Event evelopes Date Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous ✓ Fund Raiser statement Expenditure #2 Name Youniquecards.com 09/12/11 255.34 Purpose: Event invites Address Click Here for Memo Itemization Type Check box if this expanditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name Youniquecards.com 09/15/11 \$41.00 Purpose: Event banner Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Youniquecards.com 09/16/11 s 46.07 Thank you cards Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous ✓ Fund Raiser statement Expenditure #5 Name USPS 09/16/11 \$ 39.60 Purpose: Stamps Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous

statement

Subtotal this page

\$429.91

Grand Total of all Schedules 18 (Complete on last page of Schedule) \$4,250.50

Enter this total on line 8a of Summary Page

Fund Raiser





ITEMIZED EXPENDITURES SCHEDULE 1B

138800

1. Committee I. D. Number

Michael Flynn For Treasurer CANDIDATE COMMITTEE 4. Purpose (Required Information) 5. Date 3. Name and address of person or vendor to whom paid 6. Amount Expenditure #1 09/20/11 Name USPS s 161.00 Purpose: Stamps Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Reiser statement Expenditure #2 Name Pay Pal 09/27/11 s 3.15 CC Processing Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name Michael Flynn 09/29/11 \$200.00 Purpose: Debt Repayment Address 53218 Providence East Click Here for Memo Itemization Type Shelby Township, MI 48316 Check box if this expanditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name GFS Marketplace 10/07/11 \$ 91.64 Purpose: Event Supplies Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Leo's Coney Island \$ **775.40** Purpose: Event Catering Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous ✔ Fund Raiser statement Subtotal this page \$1,231.19

Grand Total of all Schedules 18 (Complete on last page of Schedule) \$4,250.50

Enter this total on line 8a of Summary Page

2_of_6





1. Committee I. D. Number

138800

AALIEDOEF 153	TO SOLUTION TO SOL		<u> </u>
CANDIDATE COMMITTEE	2. Committee Name Michael Flynn Fo	r Treasur	er
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Big Valley		10/10/11	s 400.00
Address	Purpose: Event Beverages	Date	
13839 19 Mile Road	City	k Hana for Morro	itemization Type
Sterling Heights, MI 48313	 		iventazation type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #2			· · · · · · · · · · · · · · · · · · ·
Name Buscemis		10/12/11	s 18.97
Address	Purpose: Event Supplies	Date	
5915 25 Mile Road	Clink	. Hara for Marea	Manager T
Shelby Township, MI 48316	l		Itemization Type
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Address	Purpose: OU Processing	Date	
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement	1	
Expenditure #4			
Name walmart		10/17/11	s 31.63
Address	Purpose: office supplies	Date	* <u>31.03</u>
	Click	Here for Memo	itemization Type
	Check box if this expenditure is payment of	f	
Fund Raiser	debt or obligation reported on previous statement		•
Expenditure #5			110111/1/2-1
Name 10th Congressional District		10/17/11	
Address	Purpose: Regan Dinner Ad	Date	\$ <u>50</u>
		Hore for Mono	itemization Type
	Check box if this expenditure is payment of		ROTHLEGUEL TYPE
Fund Raiser	debt or obligation reported on previous statement		
		otal this page	\$5 13.74
	Grand Total of all	Schedules 18	\$4.250.50

Enter this total on line 8a of Summary Page

\$4,250.50

(Complete on last page of Schedule)

Page 3 of 6





1. Committee I. D. Number _____

2. Committee Name Michael Flynn For Treasurer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure#1 Name Michael Flynn Address 53218 Providence East Shelby Township, MI 48316	Purpose: Debt Repayment Click Check box if this expenditure is payment of debt or obligation reported on previous		\$ 200.00 Itemization Type
Expenditure #2 Name Shelby Township Lions Club	statement Purpose: Charity Event	10/17/11 Date	\$ 70.00
Address P.O. Box 182075 Shelby Township, MI 48318 Fund Raiser			Itemization Type
Expenditure #3 Name Michigan for Rick Snyder Address 38400 Van Dyke Avenue Sterling Heights, MI 48312	Purpose: Campaign Event Click I Check box if this expenditure is payment of debt or obligation reported on previous	10/24/11 Date	\$ 300.00
Expenditure #4 Name Know Resolve Address P.O. Box 380435 Clinton Township, Mi 48035 Fund Raiser	Purpose: Charity Event Click I Check box if this expenditure is payment of debt or obligation reported on previous statement	11/01/11 Date	\$ 130.00
Expenditure #5 Name Vistaprint.com Address	Purpose: Checks Click Check box if this expenditure is payment of debt or obligation reported on previous statement		\$ <u>17.86</u> Itemization Type
LIND LYBERS	· · · · · · · · · · · · · · · · · · ·	ntal this page	\$717.86

(Complete on last page of Schedule) \$4,250.50

Enter this total on line 8a of Summary Page





1, Committee I. D. Number 138800

2. Committee Name Michael Flynn For Treasurer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Narrie Michael Flynn Address 53218 Providence East Shelby Township, MI 48316 Fund Raiser	Purpose: Debt Repayment	11/17/11 Date lere for Memo	\$ 268.61
Name Youniquecards.com Address	Purpose: Christmas Cards	12/02/11 Date	\$ 37.26
Fund Reiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name Campaign Consulting Services Address 1006 Rivermist Rochester, MI 48307	Check box if this expenditure is payment of	12/07/11 Date	\$ 500.00
Fund Raiser Expenditure #4 Name USPS	debt or obligation reported on previous statement	12/09/11	
Address	Purpose: Christmas Card Stamps	Date	\$ <u>58.00</u>
Fund Raiser	Click Ho Check box if this expenditure is payment of debt or obligation reported on previous statement	era for Mamo I	temization Type
Expenditure #5 Name Michael Flynn Address 53218 Providence East Shelby Township, MI 48316	Purpose: Debt Repayment Click H Check box if this expenditure is payment of	12/22/11 Date ere for Memo	\$ 154.74
Fund Raiser	debt or obligation reported on previous statement Subtot Grand Total of all S	al this page Chedules 18	\$1,018.61 \$4,250.50

Enter this total on line 8a of Summary Page





ommittee I. D. Number 138800

2. Committee Name Michael Flynn For Treasurer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	122	
o. Tablife and access or person of vendor to writin pan	4. Purpose (resquired intermation)	5, Date	6. Amount
Expenditure #1			
Name Youniquecards.com		12/22/11	s 248.84
Address	Purpose: Event Invites	Date	<u> </u>
	Click I	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			///-//
Name Ebay.com		12/22/11	\$ 40.35
Address	Purpose: Event Envelopes	Date	* <u>40.55</u>
		lere for Memo	Itemization Type
		OIG IOI MOIN	manneauon 19pe
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3	(
Name Chris Ordon		10/12/11	- 50.00
Address	Purpose: Event Parking Attendant	Date	\$ <u>50.00</u>
	Pars II. 11		
		ste tot Memo	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
✓ Fund Raiser	statement		
Expenditure #4			
Name			
	<u>-</u>	Date	\$
Address	Purpose:	r\s(e	
	Click He	are for Memo !	Itemization Type
	Check box if this expenditure is payment of	•	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Addres≎	Purpose:	Date	\$
· · · · · · · · · · · · · · · · · · ·		_	
		ere for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtot	at this page	\$339.19

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

\$4,250.50

Enter this total on line 8a of Summary Page







DEBTS AND OBLIGATIONS

1. Committee I.D. Number

138800

SCHEDULE 1E 2 Committee Name Michael Flynn For Treasurer CANDIDATE COMMITTEE

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor (Ch.	nmittee OR b. De eck either a or b. Use only for the	bbs and obligations owed to	or forgiven <u>by</u> the co	onmittee.
Nume and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Owed to or by: Michael Flynn 53218 Providence East Shelby Township, MI 48316	4. Type: loan 5. Date Debt Was Incurred: 09/12/11 6. Original Amount of Debt: \$ 303.24	09/29/11 _{\$} 200.00 10/17/11 _{\$} 103.24 \$ \$	\$ <u>303.24</u>	\$ <u>0</u>
If bank loan, name of endorser or guarantor.		\$ Ams	unt Endorsed: \$	FORGIVEN
Owet to or by: Michael Flynn 53218 Providence East Shelby Township, MI 48316	4. Type: Ioan 5. Date Debt Was Incurred: 09/15/11 6. Original Amount of Debt: \$ 41.00	10/17/11 \$ 41.00 \$ 5	\$ <u>41.00</u>	\$_0 FORGIVEN
If bank loan, name of endorser or guerantor:		\$	cumt Endomosis &	LIFORGIVEN
Debt #3 Corp? Yes Owed to or by: Michael Flynn 53218 Providence East Shelby Township, Mf 48316	4. Type: loan 5. Date Debt Was Incurred: 09/16/11 6. Odisinal Amount of Debt: \$ 46.07	10/17/11 \$46.07 \$ \$ \$	\$ 46.07	\$_0 FORGIVEN
If bank loan, name of endorser or guarantor:		Am-	ount Endorsed: \$	
		Page Subtotal (Outstanding debt)	\$0.00

(Complete on last page of Schedule showing amounts owed by or to the committee) \$542.96

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





DEBTS	AND	OBL	IGA:	FIONS
S	CHE	DULE	1E	

1. Committee I.D. Number

138800

SCHEDULE TE	Michael	Flynn For Trea	Surer	
CANDIDATE COMMITTEE 2. C	ommittee Name 1VIICITACI	11317111 01 1200	<u> </u>	
This Schedule itemizes:			-	
a Debts and obligations owed by or forgiven the com (Che	mittee OR b, Debick either a or b. Use only for the p	ts and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the cor	rmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp7 Yes Owed to or by:	4. Type: loan	10/17/11 _{\$} 9.69		
Michael Flynn 53218 Providence East Shelby Township, MI 48316	5. <u>Date Debt Was Insurred</u> : 09/19/11 6. <u>Original Amount of Debt</u> : 39.60	11/17/11 _{\$} 29.91	\$ <u>39.60</u>	\$_0 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Typo: loan	11/17/11 \$ 161.00		
Michael Flynn 53218 Providence East	5. <u>Date Debt Was Inspired</u> : 09/20/11	\$		
Shelby Township, MI 48316	6. Original Amount of Debt: s 161.00	\$	\$ <u>161.00</u>	5 0 FORGIVEN
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: loan	11/17/11 \$77.70		
Michael Flynn 53218 Providence East	5. <u>Date Debt Was Incurred</u> : 10/07/11	12/22/11 \$ 154.74		
Shelby Township, MI 48316	6. Original Amount of Debt: \$ 775.40	\$	ş <u>232.44</u>	\$ 542.96 porgiven
		2		

Page Subtotal (Outstanding debt)

Amount Endorsed: \$_

\$542.96

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

\$542.96

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 $\underline{\mathcal{V}}$ of $\underline{\mathcal{V}}$

If bank loan, name of endorser or guarantor:





FUND RAISER SCHEDULE 1F

CANDIDATE CO	MMILLE 2. Con	mittee Name VIICNAE! FIY	nn For Iteasurer	
	- USE A SEPARATE SH	EET FOR EACH EVENT	-	
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (if any) of it place where the activity was held.	
10/12/11	greater)	reception	56114 Stoney Place Drive, Shelby Twp. Private Residence	
7. Total Contributions	\$6,525.40			
3. Other Receipts 3. Gross Receipts (Add lines 7 a	\$6,525.40	. A G		
10. Total Cost of Event (Total Cost includes In-Kind Co	\$1,893.21	Made For the Event)	. •	
	int fund raiser and complete the			
Co-Sponsor(s)	Contribution (%)	Split	Expenditure Split (%)	
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			Manager and the second	
			15 Marie 17 17 17 17 17 17 17 17 17 17 17 17 17	
period covered by the C Receipts and expenditu	red to file a separate Fund Rais Campaign Statement. Ires listed on a Fund Raiser Sc d In-Kind Contributions Schedu	hedule must also be reported	on the Itemized Contributions	

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.