

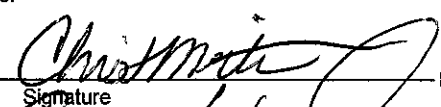
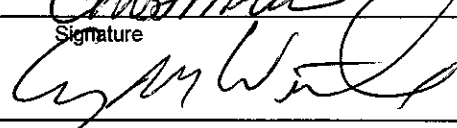


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number 138663		3. This Statement covers From: <u>7-23-12</u> to <u>8-27-12</u>	
2. Committee Name CTE Anthony Wickersham		4. Candidate Last Name Wickersham First Name Anthony M.I. M 4a. Office Sought Including District # or Community Served (If applicable) Sheriff of Macomb County 4b. County of Residence Macomb	
5. Committee's Mailing Address PO Box 752 Mt. Clemens, MI 48046 Area Code and Phone _____ 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.		6. Treasurer's Name & Residential Address Christina Miller 52012 Copper Creek Court Chesterfield, MI 48047 Area Code and Phone (586) 524-4476	
7. Treasurer's Business Address 43565 Elizabeth Road Mt. Clemens, MI 48043 Area Code and Phone (586) 469-6671		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) S/A Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>8-07-12</u> 9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year) 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> 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 Christina Miller Type or Print Name		Signature  Date <u>8/30/12</u>	
Candidate Anthony M. Wickersham Type or Print Name		Signature  Date <u>8/30/12</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138663

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Anthony Wickersham

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>33,690</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>33,690</u>	(18.) \$ <u>250,945.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>.02</u>	(19.) \$ <u>.02</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>33,690.02</u>	(20.) \$ <u>250,945.02</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>-0-</u>	(21.) \$ <u>6,591.04</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>-0-</u>	(22.) \$ <u>-0-</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>15,767.24</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>-0-</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>155.83</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>15,923.07</u>	(23.) \$ <u>181,689.20</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>4,596.46</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>23.99</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>4,620.45</u>	(24.) \$ <u>17,153.34</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>-0-</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>-0-</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>38,955.98</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>33,690.02</u>	
	(15.) = \$	<u>72,646.00</u>	
15. SUBTOTAL Add lines 13 and 14			
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>20,543.52</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>52,102.48</u>	*



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name GTE Anthony Wickersham

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 checked="" type="checkbox"/> YES 4. Date of Receipt <u>8/6/12</u> Name & Address: <u>3M Company PAC</u> <u>3M Center</u> <u>St Paul, MN 55144</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Dominic Abbate</u> <u>2500 Royalview Dr.</u> <u>Oakland, MI 48363</u>		\$ <u>100</u>	\$ <u>975</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Wakely Associates</u> Business Address <u>30500 Van Dyke 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>7/25/12</u> Name & Address: <u>Cy Abdo</u> <u>2719 Hawthorn Dr.</u> <u>Shelby Twp, MI 48316</u>		\$ <u>500</u>	\$ <u>1150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Cy Abdo Attorney at Law</u> Business Address <u>42550 Garfield Ste. 104A 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 #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/6/12</u> Name & Address: <u>Jim Arnone</u> <u>47696 Beacon Square</u> <u>Macomb, MI 48044</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

950

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 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Cheryl Ballor</u> <u>24050 28 Mile Rd.</u> <u>Royal, MI 48096</u>		\$ <u>100</u>	\$ <u>475</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>housewife</u> 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>7/25/12</u> Name & Address: <u>Joel Ballor</u> <u>50383 Heatherwood Lane</u> <u>Shelby Twp, MI 48317</u>		\$ <u>100</u>	\$ <u>590</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Ballor Towing</u> Business Address <u>57760 Main Blvd. New Haven, MI 48048</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>7/25/12</u> Name & Address: <u>Christopher Baratta</u> <u>700 Lincoln</u> <u>Grosse Pointe, MI 48230</u>		\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/23/12</u> Name & Address: <u>Blue Cross Blue Shield of MI PAC</u> <u>232 S. Capital Ave.</u> <u>Lansing, MI 48933</u>		\$ <u>1,000</u>	\$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1,300

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 138663

2. Committee Name CTE Anthony Wickersham

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 7/25/12

Name & Address:

John Bologna
19135 Saxon
Beverly Hills, MI 48025

\$ 200 \$ 575

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

[Click Here for Memo Itemization](#)

Occupation

Employer Ind. Contractor

Business Address

Same

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/25/12

Name & Address

Thomas Borgula
4079 Jacquelynn Ct.
Rochester, MI 48306

\$ 200 \$ 570

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

[Click Here for Memo Itemization](#)

Occupation

Employer Stony Creek Dental

Business Address

5805 24 Mile Rd. Shelby Twp, MI 48316

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/25/12

Name & Address:

Brian Borowski
5 Seabreeze Dr.
Harrison Twp, MI 48045

\$ 100 \$ 225

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

[Click Here for Memo Itemization](#)

Occupation

Employer Premier Finishes

Business Address

28066 Carosbeck Roseville, MI 48066

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

3. Contribution #4 PAC Receipt? ☒ YES

4. Date of Receipt 7/25/12

Name & Address

Bricklayers Local No. 1 Michigan PAC
21031 Ryan Road
Warren, MI 48091

\$ 100 \$ 750

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

[Click Here for Memo Itemization](#)

Occupation

Employer

Business Address

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

Page Subtotal

600

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12

Name & Address: Jean Ann Bugajewski
16982 Stewart Crt.
Clinton Twp, MI 48038

\$ 300 \$ 690

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

Occupation _____ Employer Self employed

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 7/25/12

Name & Address: Julia Caiotto
15441 Yale
Clinton Twp, MI 48083

\$ 100 \$ 100

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

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12

Name & Address: Rebecca Campbell
38059 Mast
Harrison Twp, MI 48045

\$ 200 \$ 200

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

Occupation teacher Employer L'Anse Creuse Schools

Business Address 38000 Remiold Harrison Twp, MI 48045

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12

Name & Address: Mary Lou Champagne
48193 Kirkwood
Clinton Twp, MI 48038

\$ 500 \$ 540

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

Occupation retired Employer _____

Click Here for Memo Itemization

Business Address _____

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

Page Subtotal 1,100

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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

7/25/12

Name & Address:

Paul Chirco
3045 Marrowway
Shelby Twp, MI 48316

\$ 100

\$ 100

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

[Click Here for Memo Itemization](#)

Occupation

Employer

Business Address:

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

7/25/12

Name & Address:

Deborah Condino
3710 Tremonte
Rochester, MI 48306

\$ 100

\$ 400

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

[Click Here for Memo Itemization](#)

Occupation

Employer

Business Address

Site Admin St. John
11800 12 Mile Rd. Warren, MI 48093

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

7/25/12

Name & Address:

Wendy Couture
21518th Shore
SCS, MI 48082

\$ 100

\$ 300

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

[Click Here for Memo Itemization](#)

Occupation

Employer

Business Address

Owner Wendy Wild Stylz
40110 Hayes Clinton Twp, MI 48038

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

7/25/12

Name & Address:

George Curis
37362 Fione Trail
Clinton Twp, MI 48036

\$ 100

\$ 225

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

[Click Here for Memo Itemization](#)

Occupation

Employer

Business Address

Owner Big Bay
99 North Ceresbeck Mt. Clemens, MI 48043

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

400

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Angelo D'Alessandro</u> <u>13046 Ruby Dr.</u> <u>Shelly Twp, MI</u>		\$ <u>100</u>	\$ <u>800</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Lango Construction</u> Business Address <u>28135 Greenbeck Roseville MI 48066</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>7/25/12</u> Name & Address: <u>Gary D'Alessandro</u> <u>17955 Iris Circle</u> <u>Clinton Twp, MI 48036</u>		\$ <u>250</u>	\$ <u>1,950</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Lango Construction</u> Business Address <u>28135 Greenbeck Roseville, MI 48066</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>7/25/12</u> Name & Address: <u>Michael Devault</u> <u>7910 Walters Rd.</u> <u>Lansburg, MI 48848</u>		\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Superintendent</u> Employer <u>MISD</u> Business Address <u>44001 Garfield 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 #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/27/12</u> Name & Address: <u>Donald Pomin</u> <u>2128 Ringcross</u> <u>Shelly Twp, MI 48316</u>		\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Firefighter</u> Employer <u>City of Detroit</u> Business Address <u>1300 Beaubien Detroit, MI 48201</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

550

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 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>Kay Kokesh</u> <u>410345 Belvidere</u> <u>Harrison Twp, MI 48045</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation <u>Admin</u> Employer <u>Tonic LLC</u></p> <p>Business Address <u>50270 E. Russell Schmidt. Chesterfield, MI 48051</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1,500</u>	\$ <u>1,500</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>Eric Foster</u> <u>41700 Conger Bay Dr.</u> <u>Harrison Twp, MI 48045</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation <u>Marina Owner</u> Employer <u>Belle Maer</u></p> <p>Business Address <u>41700 Conger Bay Dr. Harrison Twp, MI 48045</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>750</u>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>James George</u> <u>19634 Westchester</u> <u>Clinton Twp, MI 48038</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation _____ Employer <u>Self employed</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200</u>	\$ <u>200</u>
<p>3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>GLM PAC</u> <u>1000 Woodbridge St.</u> <u>Detroit, MI 48207</u></p> <p>5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300</u>	\$ <u>600</u>

Page Subtotal

2,100

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 138663

2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Steven Gold</u> <u>13340 Balfour</u> <u>Harper Woods, MI 48070</u>		\$ <u>100</u>	\$ <u>240</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director Health Dept.</u> Employer <u>Macomb County</u> Business Address <u>43525 Elizabeth Mt. Clemens, MI 48043</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>7/25/12</u> Name & Address: <u>Anthony Gusmano</u> <u>55332 Macintosh</u> <u>Shelly Twp, MI 48316</u>		\$ <u>100</u>	\$ <u>100</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>7/23/12</u> Name & Address: <u>Judy Hartwel</u> <u>26291 Barbara</u> <u>Roseville, MI 48066</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Gregory Hill</u> <u>35328 Vito</u> <u>Sterling Heights, MI 48310</u>		\$ <u>100</u>	\$ <u>120</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Officer</u> Employer <u>Sterling Heights P.D.</u> Business Address <u>40333 Dodge Park Sterling Heights, MI 48313</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	

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Mary Jo Imbronone</u> <u>52018 Heatherstone</u> <u>Macomb, MI 48042</u>		\$ <u>100</u>	\$ <u>100</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>7/25/12</u> Name & Address: <u>Catherine Imbronone</u> <u>14362 Bournemuth</u> <u>Shelby Twp, MI 48315</u>		\$ <u>250</u>	\$ <u>350</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Bus. Owner</u> Employer <u>Tina's County House</u> Business Address <u>50828 North Ave. Macomb, MI 48042</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 checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Iron Workers Local 25 PAC</u> <u>3115 Joyce St.</u> <u>Burton, MI</u>		\$ <u>100</u>	\$ <u>350</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>7/25/12</u> Name & Address: <u>Andrea Jacklyn</u> <u>969 Huntington</u> <u>Mt Clemens, MI 48043</u>		\$ <u>100</u>	\$ <u>195</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Macomb County</u> Business Address <u>One South Main Mt. Clemens, MI 48043</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	

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550

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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>7/23/12</u>	
Name & Address: <u>William Jarvis</u> <u>49557 Compass Pointe</u> <u>Chesterfield, MI 48047</u>		\$ <u>150</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer <u>Jarvis</u>			
Business Address <u>41800 Executive Dr. Harrison Twp, MI 48045</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/23/12</u>	
Name & Address: <u>Rick Kaiser</u> <u>24504 Willowby</u> <u>Eastpointe, MI 48021</u>		\$ <u>40</u>	\$ <u>40</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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 type="checkbox"/> YES	4. Date of Receipt <u>8/6/12</u>	
Name & Address: <u>Thomas Kalkofen</u> <u>12402 Frank Dr.</u> <u>Romeo, MI 48065</u>		\$ <u>25</u>	\$ <u>45</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/25/12</u>	
Name & Address: <u>Darlene Kalm</u> <u>6910 W. Coates St.</u> <u>Romeo, MI 48065</u>		\$ <u>100</u>	\$ <u>455</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Nurse</u> Employer <u>McLaren</u>			
Business Address <u>1000 Harrington Mt. Clemens, MI 48043</u>			
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Andrew Kassab</u> <u>3873 Forester</u> <u>Auburn Hills, MI 48326</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/23/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Prosecutor</u> Employer <u>Macomb County</u> Business Address <u>1 South Main Mt. Clemens, MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Linda Kelley</u> <u>17667 Moors</u> <u>Fraser, MI 48026</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>100</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 Name & Address: <u>Catherine Kirk</u> <u>37539 Hidden Valley Ct.</u> <u>Clinton Twp, MI 48038</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Acct. Mgr.</u> Employer <u>TRW</u> Business Address <u>24178 Research Dr. Farmington Hills, MI 48335</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 Name & Address: <u>Kenneth Kuehnle</u> <u>52488 Westcreek</u> <u>Macomb, MI 48042</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>95</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Blue Box</u> Employer <u>Macomb County</u> Business Address <u>10 South Main Mt. Clemens, MI 48043</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	

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

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Don Kuhn</u> <u>P.O. Box 1309</u> <u>Kalkaskay, MI 49646</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>395</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Kuhn's Construction</u> Business Address <u>1221 Davis Rd. Boyne City, MI 49712</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 Name & Address: <u>Amante Langzon</u> <u>37741 Huron Pointe</u> <u>Harrison Twp, MI 48045</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>550</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Operator</u> Employer <u>Detroit Boiler</u> Business Address <u>2931 Beaufort Detroit, MI 48207</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 Name & Address: <u>Michelle Catella</u> <u>54838 Glen Oaks</u> <u>Shelby Twp, MI 48315</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>500</u>	\$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>Garden Fresh Salsa</u> Business Address <u>1505 Bunner Ferndale, MI 48220</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 Name & Address: <u>Pamela Lavers</u> <u>27870 Lauren St.</u> <u>Harrison Twp, MI 48045</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>225</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Exec. Liason</u> Employer <u>Macomb County</u> Business Address <u>10 North Main Mt. Clemens, MI 48043</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	

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800

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Kirk Leader</u> <u>31046 Leota</u> <u>Fraser, MI 48026</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/23/12</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Local 3317 PAC</u> <u>38550 Garfield</u> <u>Clinton Twp, MI 48038</u>	PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>500</u>	\$ <u>500</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 Name & Address: <u>Pamela Lombardo</u> <u>11473 Bayberry Dr.</u> <u>Bruce Twp, MI 48065</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>200</u>	\$ <u>550</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>housewife</u> 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 Name & Address: <u>Henry Luks</u> <u>18738 Rockport St</u> <u>Roseville, MI 48066</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>175</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Controller Security Systems</u> Business Address <u>21363 Ceratist Eastpointe, MI 48021</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	

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825

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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 8/6/12
Name & Address: Macomb Leadership PAC
52466 Windsor
Shelby Twp, MI 48315

\$ 9,700 \$ 9,700

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
Name & Address: Mike Magnoli
6402 Baypointe Dr.
Washington, MI 48094

\$ 1,000 \$ 2,600

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

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Occupation Builder Employer Michael Angelo Construction

Business Address 59227 Van Dyke Washington, MI 48095

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
Name & Address: Pete Marrocco
11421 Heatherwood
Shelby Twp, MI 48315

\$ 100 \$ 300

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

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Occupation Construction Employer Duro Construction

Business Address 51985 Hayes Shelby Twp, MI 48315

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
Name & Address: Duane Matz
131 S. Highland
Mt. Clemens, MI 48043

\$ 200 \$ 410

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

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Occupation Mechanic Employer Macomb County

Business Address 43565 Elizabeth Mt. Clemens, MI 48047

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

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Timothy McConahy</u> <u>1981 Crosswick Rd.</u> <u>Bloomfield, MI 48301</u>		\$ <u>200</u>	\$ <u>750</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>McConahy - Noyovich</u> Business Address <u>370 E. Maple Birmingham, MI 48009</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>7/23/12</u> Name & Address: <u>Donald Mentlikowski</u> <u>21216 Ardmore Pk.</u> <u>SCS, MI 48081</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Stephen Messina</u> <u>6386 Auburn Rd.</u> <u>Shelly Twp, MI 48317</u>		\$ <u>100</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Messina Trucking</u> Business Address <u>54990 Sherwood Lane Shelly Twp, 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 #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>James Meyerand</u> <u>49294 SFlowershoe</u> <u>Macomb, MI 48044</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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420

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/16/12</u></p> <p>Name & Address: <u>Michigan Laborers Political League PAC</u> <u>1118 Centennial Way Ste 400</u> <u>Lansing, MI 48917</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>Michigan Regional Council Carpenters PAC</u> <u>3800 Woodward Suite 1200</u> <u>Detroit, MI 48201</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>3,100</u>
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u></p> <p>Name & Address: <u>Patrick Moran</u> <u>26201 Harbour Pointe Dr.</u> <u>Harrison Twp, MI 48045</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Owner</u> Employer <u>Pat Moran Chevrolet</u> <u>35500 Gochot Clinton Twp, MI 48035</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200</u>	\$ <u>1,75</u>
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/23/12</u></p> <p>Name & Address: <u>Sandra Morissette</u> <u>52770 Huntley</u> <u>New Baltimore, MI 48047</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>10</u>	\$ <u>10</u>
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u> Name & Address: <u>Joseph Naughton</u> <u>6240 Oak Ridge</u> <u>Washington Twp, MI 48094</u>		\$ <u>100</u>	\$ <u>100</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>7/25/12</u> Name & Address: <u>John Nitz</u> <u>57477 Willow Way Ct.</u> <u>Washington Twp, MI 48094</u>		\$ <u>100</u>	\$ <u>375</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Reilly Rancillio PC</u> Business Address <u>12900 Hall Rd. Ste 350 Sterling Heights, MI 48316</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>8/6/12</u> Name & Address: <u>Michael Nolan</u> <u>49926 Willowood Dr.</u> <u>Macomb, MI 48044</u>		\$ <u>100</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Care house</u> Business Address <u>131 Market St. Mt. Clemens, MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Stacy O'Brien</u> <u>42988 Billand Dr.</u> <u>Clinton Twp, MI 48038</u>		\$ <u>200</u>	\$ <u>400</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sergeant</u> Employer <u>Macomb Sheriff</u> Business Address <u>43565 Elizabeth Mt. Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

500

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 138663

2. Committee Name CTE Anthony Wickersham

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>7/23/12</u> Name & Address: <u>Donald Ordell</u> <u>31810 N. River Rd.</u> <u>Harrison Twp, MI 48045</u>		\$ <u>25</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Gary Paolella</u> <u>3390 Round Tree Cr.</u> <u>China, MI 48054</u>		\$ <u>100</u>	\$ <u>295</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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>7/25/12</u> Name & Address: <u>Tony Petrykowski</u> <u>19550 Potomac</u> <u>Macomb, MI 48044</u>		\$ <u>100</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy</u> Employer <u>Macomb Sheriff</u> Business Address <u>43565 Elizabeth Mt Clemens, MI 48043</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>7/25/12</u> Name & Address: <u>Michael Pittiglio</u> <u>61522 Wagon Wheel Ct.</u> <u>Washington Twp, MI 48094</u>		\$ <u>100</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Florence Cement</u> Business Address <u>12798 23 Mile Shelby, 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	

Page Subtotal

325

Grand Total of All Schedules 1A
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Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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>7/23/12</u> Name & Address: <u>Shari Ann Raby</u> <u>31962 Williamsburg Dr.</u> <u>SCS, MI 48082</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Cathy Roberts</u> <u>19798 Westchester</u> <u>Clinton Twp, MI 48038</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> 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>7/25/12</u> Name & Address: <u>Roy Rose</u> <u>55620 Woodridge</u> <u>Shelby Twp, MI 48316</u>		\$ <u>100</u>	\$ <u>625</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Civil Engineer</u> Employer <u>Anderson Eckstein; Westrick</u> Business Address <u>51304 Schoenherr</u> <u>Shelby Twp, 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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name & Address: <u>Barbara Rossman</u> <u>54311 Queensborough Dr.</u> <u>Shelby Twp, MI 48315</u>		\$ <u>350</u>	\$ <u>1,250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Henry Ford</u> Business Address <u>2799 W. Grand Blvd. Detroit, MI 48202</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

750

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 138663
2. Committee Name CTE Anthony Wickersham

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>7/25/12</u>	
Name & Address: <u>James Santilli</u> <u>45668 Lakeview Dr. Apt. 10305</u> <u>Macomb, MI 48044</u>		\$ <u>250</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Exec. Director</u> Employer <u>Traffic Imp. Assoc.</u> Business Address <u>1827 N. Squirrel Road Auburn Hills, MI 48326</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>7/25/12</u>	
Name & Address: <u>Alphonse Santino</u> <u>725 Lakeshore</u> <u>CPS, MI 48236</u>		\$ <u>100</u>	\$ <u>240</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MD</u> Employer <u>Michigan Ins. Urology</u> Business Address <u>12 Mile Rd. SCS, MI 48081</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>8/6/12</u>	
Name & Address: <u>Stephen Saph Jr.</u> <u>68 Clinton St.</u> <u>Mt. Clemens, MI 48043</u>		\$ <u>300</u>	\$ <u>625</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Sales</u> Employer <u>Nickel Saph</u> Business Address <u>44 Macomb Mt. Clemens, MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/25/12</u>	
Name & Address: <u>Joyce Sheehy</u> <u>25430 Ashland</u> <u>Harrison Twp, MI 48317</u>		\$ <u>200</u>	\$ <u>450</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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

850

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

Enter this total on
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Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Linda Sheppard</u> <u>38546 Mt. Kisco</u> <u>Sterling Heights, MI 48310</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>		\$ <u>100</u>	\$ <u>340</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Great Lakes Billing</u> Business Address <u>50438 VanDyke Shelby Twp, MI 48317</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 Name & Address: <u>William Sowerby</u> <u>37860 Saddle Lane</u> <u>Clinton Twp, MI 48036</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>		\$ <u>100</u>	\$ <u>175</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Treasurer</u> Employer <u>Charter Twp. of Clinton</u> Business Address <u>40700 Romeo Plank 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 Name & Address: <u>Sterling PAC</u> <u>357100 Mound Rd.</u> <u>Sterling Heights, MI 48310</u> PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>		\$ <u>1,000</u>	\$ <u>2,250</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 Name & Address: <u>Vito Strolis</u> <u>19874 Westchester</u> <u>Clinton Twp, MI 48038</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>		\$ <u>300</u>	\$ <u>2,790</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Ruehle's Towing</u> Business Address <u>205 N. Bond Geratot Mt. Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

1,500

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

Enter this total on
line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Joseph Suida</u> <u>116679 Huntington Woods</u> <u>Macomb, MI 48042</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>120</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>Cerzda Swetech</u> <u>43868 Scoter Lane</u> <u>Clinton Twp, MI 48038</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>275</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Doctor</u> Employer <u>Stephen Swetech Medical Center</u>		Click Here for Memo Itemization	
Business Address <u>43600 Garfield 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			
3. Contribution #3 Name & Address: <u>Cindie Szarek</u> <u>48355 Walden</u> <u>Macomb, MI 48044</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>500</u>	\$ <u>530</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>same</u>		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>Timothy Tomlinson</u> <u>38272 Trillium</u> <u>Harrison Twp, MI 48045</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>	\$ <u>100</u>	\$ <u>275</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>York Deland Tomlinson</u>		Click Here for Memo Itemization	
Business Address <u>42890 Garfield Ste 101 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			

Page Subtotal

800

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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>7/23/12</u>	
Name & Address: <u>Henry Tyska</u> <u>38575 Chartier</u> <u>Harrison Twp, MI 48045</u>		<u>\$ 20</u>	<u>\$ 20</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
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>8/6/12</u>	
Name & Address: <u>UAW Michigan V-Pac</u> <u>8000 E. Jefferson</u> <u>Detroit, MI 48214</u>		<u>5,000</u>	<u>Direct</u>
5. If over \$100.00 cumulative, please provide:		<u>200</u>	<u>Fundraiser</u>
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 checked="" type="checkbox"/> Fund Raiser			
		<u>\$ 5,525</u>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/6/12</u>	
Name & Address: <u>Michael Ulrich</u> <u>68637 Meadowood</u> <u>Washington, MI 48095</u>		<u>\$ 30</u>	<u>\$ 30</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/25/12</u>	
Name & Address: <u>Anthony Viviano</u> <u>47510 Lockwood</u> <u>Washington Twp, MI 48094</u>		<u>\$ 100</u>	<u>\$ 1300</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>owner</u> Employer <u>Sterling Heights Dodge</u>			
Business Address <u>40111 Van Dyke Sterling Heights, MI 48313</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

5,350

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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>8/6/12</u>	
Name & Address: <u>Daniel Wallas</u> <u>15661 Huntcliff</u> <u>Macomb, MI 48044</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/25/12</u>	
Name & Address: <u>Alice Watson</u> <u>59539 Romeo Plank</u> <u>Ray, MI 48096</u>		\$ <u>200</u>	\$ <u>690</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>owner</u> Employer <u>Big R Farms</u>			
Business Address <u>Same</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/25/12</u>	
Name & Address: <u>Tom Wickersham</u> <u>14863 Towering Oaks</u> <u>Shelby Twp, MI 48315</u>		\$ <u>250</u>	\$ <u>350</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Associate</u> Employer <u>Roncelli</u>			
Business Address <u>6471 Metro Prky. Sterling Heights, MI 48312</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7/25/12</u>	
Name & Address: <u>Lisa Wojno</u> <u>32025 Margaret Crt.</u> <u>Warren, MI 48093</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

575

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

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 Name & Address: <u>Paul Wajno</u> <u>32025 Margaret Ct.</u> <u>Warren, MI 48093</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u>		\$ <u>100</u>	\$ <u>100</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 Name & Address: _____ PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____		\$ _____	\$ _____
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 Name & Address: _____ PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____		\$ _____	\$ _____
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 #4 Name & Address: _____ PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____		\$ _____	\$ _____
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	

Page Subtotal

100

Grand Total of All Schedules 1A
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33,690

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ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: Check# 721 written for \$673.52 was cashed by the bank for \$673.50 causing our acct. to be over by .02.	Date of Receipt <u>7/31/12</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input checked="" type="checkbox"/> Other (Specify) _____	\$ <u>.02</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Page Subtotal			.02
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			.02

Enter this total on
line 4 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Custom Promotions Address 17520 W. 12 Mile Road Southfield, MI 48076 <input type="checkbox"/> Fund Raiser	Purpose: T-Shirts <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/12</u> Date	\$ <u>928.56</u>
Expenditure #2 Name C&G News Address 13650 11 Mile Road Warren, MI 48089 <input type="checkbox"/> Fund Raiser	Purpose: Ad <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/12</u> Date	\$ <u>2890.00</u>
Expenditure #3 Name Dollar Chain Address 41781 Garfield Clinton Twp., MI 48035 <input checked="" type="checkbox"/> Fund Raiser	Purpose: Balloons for Fundraiser <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/12</u> Date	\$ <u>85.59</u>
Expenditure #4 Name Bob's Specialty Co. Address 32446 NewCastle Warren, MI 48092 <input type="checkbox"/> Fund Raiser	Purpose: Nail Files <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/12</u> Date	\$ <u>446.39</u>
Expenditure #5 Name Dana Camphous-Peterson Address PO Box 46057 Mt. Clemens, MI 48046 <input type="checkbox"/> Fund Raiser	Purpose: August Services <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/27/12</u> Date	\$ <u>800.00</u>

Subtotal this page **5,150.54**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Villa Penna Address 43985 Hayes Road Sterling Hgts., MI 48314 <input checked="" type="checkbox"/> Fund Raiser	Purpose: Food & Beverage For Fundraiser Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/1/12 Date	\$ 1722.50
Expenditure #2 Name Roberts Ink Address 59810 Havenridge New Haven, MI 48048 <input type="checkbox"/> Fund Raiser	Purpose: Website Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/3/12 Date	\$ 150.00
Expenditure #3 Name Perfect Products Address 35186 Automation Clinton Twp., MI 48035 <input type="checkbox"/> Fund Raiser	Purpose: Ties Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/3/12 Date	\$ 107.38
Expenditure #4 Name CJ Barrymores Address 21750 Hall Road Clinton Twp., MI 48038 <input type="checkbox"/> Fund Raiser	Purpose: Food & Beverages For Primary Party Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/7/12 Date	\$ 1500.00
Expenditure #5 Name William Hart Address 49926 Willowood Macomb, MI 48044 <input type="checkbox"/> Fund Raiser	Purpose: Consulting Services Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/7/12 Date	\$ 935.00

Subtotal this page **4,414.88**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Buffalo Wild Wings Address 8669 26 Mile Road Washington, MI 48094 <input type="checkbox"/> Fund Raiser	Purpose: Lunch W/Constituents <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/7/12 Date	\$ 63.46
Expenditure #2 Name Bob's Specialty Company Address 32446 Newcastle Drive Warren, MI 48093 <input type="checkbox"/> Fund Raiser	Purpose: Give-aways <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/13/12 Date	\$ 676.89
Expenditure #3 Name Postmaster Address Mt. Clemens, MI 48043 <input checked="" type="checkbox"/> Fund Raiser	Purpose: Postage for Andiamo's Fundraiser <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/13/12 Date	\$ 990.00
Expenditure #4 Name Staples Address 51382 Gratiot Chesterfield, MI 48051 <input type="checkbox"/> Fund Raiser	Purpose: Office Supplies <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/13/12 Date	\$ 61.47
Expenditure #5 Name City of Center Line Address 7070 E 10 Mile Road Center Line, MI 48015 <input type="checkbox"/> Fund Raiser	Purpose: Sign Ordinance Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/15/12 Date	\$ 100.00

Subtotal this page

1,891.82

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Clinton Township Goodfellows Address PO Box 380643 Clinton Twp., MI 48038 <input type="checkbox"/> Fund Raiser	Purpose: Sign Placement @ Event <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/15/12 Date Click Here for Memo Itemization Type	\$ 100.00
Expenditure #2 Name Jah Lion Address 23561 Lakepointe Clinton Twp., MI 48036 <input type="checkbox"/> Fund Raiser	Purpose: Sign Deposit <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/17/12 Date Click Here for Memo Itemization Type	\$ 3360.00
Expenditure #3 Name Dana Camphous-Peterson Address PO Box 46057 Mt. Clemens, MI 48046 <input type="checkbox"/> Fund Raiser	Purpose: September Services <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/23/12 Date Click Here for Memo Itemization Type	\$ 800.00
Expenditure #4 Name Anchor Bay Chamber of Commerce Address 36341 Front St., #2 New Baltimore, MI 48047 <input type="checkbox"/> Fund Raiser	Purpose: Meet the Candidates <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/23/12 Date Click Here for Memo Itemization Type	\$ 50.00
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 Click Here for Memo Itemization Type	 \$

Subtotal this page **4,310.00**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **15,767.24**

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Verizon Wireless PO Box 15082 Albany, NY 12212	Purpose Phone Service	7/23/12 Date	\$ 146.98
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: Macomb County Reserves Association 43565 Elizabeth Road Mt. Clemens, MI 48043	Purpose Donation for Raffle	7/27/12 Date	\$ 100.00
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: FOP Lodge 112 33845 24 Mile Road Chesterfield, MI 48047	Purpose Foursome for Golf Outing	7/31/12 Date	\$ 400.00
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address: Community Caring Program c/o UAW 27800 George Merelli Dr. Warren, MI 48092	Purpose Foursome for Golf Outing	8/01/12 Date	\$ 1000.00
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	

Subtotal this page

1,646.98

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

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Integrated Living, Inc. 43133 Schoenherr Road Sterling Hgts., MI 48313	Purpose <u>Hold Sponsor</u>	<u>8/01/12</u> Date	<u>\$ 100.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: Disabled American Veterans 17779 E. 14 Mile Road Fraser, MI 48026	Purpose <u>Hole Sponsor</u>	<u>8/01/12</u> Date	<u>\$ 100.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: Lanse Creuse Foundation 24076 F.V. Pankow Blvd. Clinton Twp., MI 48036	Purpose <u>Donation for Annual Fundraiser</u>	<u>8/01/12</u> Date	<u>\$ 100.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address: Chef Raymone Catering 370 N. Gratiot Clinton Twp., MI 48036	Purpose <u>Pasta Cost for Senior Event</u>	<u>8/03/12</u> Date	<u>\$ 215.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Subtotal this page			515.00
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1			
Name & Address: Macomb Homeless Coalition c/o Szajna & Associates PO Box 787 Mt. Clemens, MI 48046	Purpose Hole Sponsor	8/13/12 Date	\$ 100.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO/KO</u>	<input checked="" type="checkbox"/> Fund Raiser	
Disbursement # 2			
Name & Address: DeLaSalle Collegiate 14600 Common Road Warren, MI 48093	Purpose 1/4 Page Ad for Football	8/13/12 Date	\$ 125.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u>	<input checked="" type="checkbox"/> Fund Raiser	
Disbursement # 3			
Name & Address: MTS Education c/o Bethlehem Temple Church 22645 Quinn Road Clinton Twp., MI 48035	Purpose Hole Sponsor	8/13/12 Date	\$ 250.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u>	<input checked="" type="checkbox"/> Fund Raiser	
Disbursement # 4			
Name & Address: Nt. Clemens Lions Club c/o Randy Pagel 6260 18 1/2 Mile Road Sterling Hgts., MI 48314	Purpose Foursome for Annual Golf Outing	8/15/12 Date	\$ 780.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u>	<input checked="" type="checkbox"/> Fund Raiser	
Subtotal this page			1,255.00
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1			
Name & Address: Muscular Dystrophy Association 43329 Schoenherr Road Sterling Hgt., MI 48313	Purpose Hole Sponsor	8/15/12 Date	\$ 100.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO/KO</u> <input checked="" type="checkbox"/> Fund Raiser		
Disbursement # 2			
Name & Address: Verizon Wireless PO Box 15082 Albany, NY 12212	Purpose Phone Service	8/17/12 Date	\$ 144.84
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser		
Disbursement # 3			
Name & Address: Sam's Club 45600 Utica Park Blvd. Utica, MI 48315	Purpose Candy for Parades	8/20/12 Date	\$ 134.64
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser		
Disbursement # 4			
Name & Address: The Art Center 125 Macomb Place Mt. Clemens, MI 48043	Purpose Sponsor for Annual Art Party	8/23/12 Date	\$ 300.00
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser		
Subtotal this page			679.48
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Macomb Family YMCA 10 N. River Road Mt. Clemens, MI 48043	Purpose <u>Foursome of Golf</u>	<u>8/23/12</u> Date	\$ <u>500.00</u>
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input checked="" type="checkbox"/> Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		\$
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <input type="checkbox"/> Fund Raiser		
Disbursement # 3 Name & Address:	Purpose		\$
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <input type="checkbox"/> Fund Raiser		
Disbursement # 4 Name & Address:	Purpose		\$
Click for Memo Itemization Type			
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <input type="checkbox"/> Fund Raiser		
Subtotal this page			500.00
Grand Total of all Schedules 1C (Complete on last page of Schedule)			4,596.46

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>7-25-12</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>125</u>	5. Type of Fund Raising Activity <u>Friends & Family</u>	6. Address and Name (If any) of the place where the activity was held. <u>Villa Penna</u> <u>43985 Hayes Road</u> <input type="checkbox"/> <u>Sterling Hgts., MI</u> <small>Private Residence</small>
----------------------------------------------	----------------------------------------------------------------------------------------------------	---------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

7. Total Contributions \$ 16,550.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$ 16,550.00

10. Total Cost of Event \$ 3,813.19

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

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

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

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