HLED

CANDIDATE COMMITTEE **COVER PAGE**

12 JUL 27 PH 1:43 FOR OFFICIAL USE ONLY

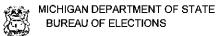
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement	Covers Fremich (01/12 to 07/12/12
1. Committee I.D. Number	4. Candidate La	
137332	Reynolds	Dean J.
2. Committee Name	1	Including District # or Community Served (If applicable)
CTE Dean Poynolds	Charter	ownship of Clinton Trustee
CTE Dean Reynolds	4b. County of Res	sidence
5. Committee's Mailing Address	6. Treasurer's Na	me & Residential Address
38150 Woodcrest	Geraldine R	Reynolds
Clinton Twp. MI 48036	38515 Hidd	
	Clinton Twp	o. MI 48036
/586) 463 D384	ł	
Area Code and Phone (586) 463-9264 If the address in this box is different from the committee		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Pho	ne (586) 463-9264
7. Treasurer's Business Address	8. Designated Reco	ecord keeper's Name and Mailing Address (If the committee has a ord keeper)
	Geraldine R	Revnolds
	38515 Hidd	•
,	Clinton Twp	o. MI 48036
	1	
		(500) 400 0004
Area Code and Phone	Area Code and P	Phone (586) 463-9264
9. TYPE OF STATEMENT		
9a. Pre-Election OR 9b. Posi	t-Election	9c. Annual Statement (Coverage Year)
Pre-Election or Post-Election Statement relates to:		9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
Primary	neral	9e. Dissolution of Candidate Committee
Convention	and .	Effective Date of Dissolution
Convention	1001	
Special	cus	
		By checking this item, ItWe certify that the committee has no assets or outstanding debts, including late filling fees. Further, ItWe request that if
Date of Election, Convention or Caucus		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 re Schedules. Direct contributions, in-kind contributions, loans, expe	equired Campaign S nditures, and outsta	Statements. The Campaign Statements must include all applicable anding 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 chang amendment to the Statement of Organization should accompany t	ed since the inform his Campaign State	ation was shown on the committee's Statement of Organization, an ement. If a request for a Reporting Walver is not received on or sment cannot be waived.
Verification: f\text{iWe certify that all reasonable diligence was used my\text{our knowledge and belief the contents are true, accurate and contents are true.}	omplete.	^
Current Treasurer or Geraldine Reynolds	Harris 1	Mendle 7-12-12
Designated Record keeper Type or Print Name	Signature	Reynolds Date 7-27-12
Daniel Daniel III	\$	0 10
Candidate Dean J. Reynolds	Den /	Key Date 7-27-12
Type or Print Name	Signature	



SUMMARY PAGE

2. Committee Name CTE DEAN REGNOLOS

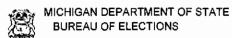
CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	50	, , , , , , , , , , , , , , , , , , , ,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ / 0/92 ==	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	1970 200
c. Subtotal of "Contributions"	(3c.) \$ 10,19Z	(18.)\$ 19,780
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 10,19Z 50	(20.) \$ 19 7 80 °°
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	86	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 8188 ==	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$	0000 02
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 6c)	(9.) s 8188 86	(23.) \$ 9920 -
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		(24.) \$
DEBTS AND OBLIGATIONS	(11.) \$	(24.) •
Debts and Obligations a. Owed by the Committee (Schedule 1E)	(12a.)\$ 38, 265 45	
b. Owed to the Committee (Schedule 1E)		
	BALANCE STATEMENT	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	(13.)	



CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

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	Receip	ot 05/25/12		
Name & Address: Mary Jo Imbronone							
52018 Heatherstone						0= 00	70.00
Macomb, MI 48042						_{\$} 35.00	_{\$} 70.00
5. If over \$100.00 cum	ulative, please pro	vide:	:			08-1-11 6	
Occupation		_ E	mployer			Click Here to	or Memo Itemization
Business Address			-				
Type of Contribution:	Direct	٦	Loan from a person	/	Fund Raiser		
3. Contribution #2	PAC Receipt?		-	Recein	05/25/12	#	
Name & Address	1710 Necesipits	Ш'	4. Date 511	(COO)	03/23/12		
Sherry Sorrentino							
14633 Breza Dr. Shelby Township, MI	48315					_{\$} 17.50	_{\$} 52.50
Cholby Tollflorip, Mi	10010						
5. If over \$100.00 cum	ulative, please pro	vide:				Click Here fo	or Memo Itemization
Occupation		Emp	oloyer				
Business Address							
Type of Contribution:	Direct	٦	oan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		-	Recei	ot 05/25/12		
Robert Schrage							
67 Putnam						_{\$} 35.00	_s 70.00
Groose Pointe, MI 48	3236						<u> </u>
5. If over \$100.00 cum	ulative, please pro	vide:				Click Here for	Memo Itemization
Occupation		En	nployer				
Business Address							
Type of Contribution:	Direct		oan from a person	\checkmark	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	Recei	pt 05/25/12		
Ernest Hornung							
15663 Stockston Clinton Township, MI	48038					_s 35.00	ູ 130.00
							φ
5. If over \$100.00 cum						Click Here for	Memo Itemization
Occupation Assistant	Prosecuting Attorne	- -	Employer Wayne	Coun	ty		
Business Address 144	41 St. Antoine	Stree	et Detroit, MI 48	226			
Type of Contribution:	Direct		oan from a person	7	Fund Raiser		
	—			<u>ٺ</u>	Page Subtotal	\$122.50	
				Gra	nd Total of All Schedules 1A	Ţ.ZZ.00	-
			(0		ete on last page of Schedule)	Catoo this tatal are	J
Page of						Enter this total on line 3a of Summary Page.	

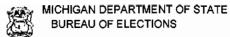


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 13733 Z

2. Committee Name CTE DEAN REYNOLOS

Enter contributor's nam middle initial. Check be Committee (PAC) Repo	ox to indicate if con	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date	of Receip	05/30/12		
Earle Harris, Jr. 15863 Kingston						
Fraser, MI 48026					_s 35.00	_{\$} 35.00
5. If over \$100.00 cum	ulative, please pro	ovide:			Click Here f	or Memo Itemization
Occupation		Employer	_		Click Here I	or werno iternization
Business Address						
Type of Contribution:	Direct	Loan from a persor	√	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receipt	05/30/12		
Miraj Mehta 42658 Redfern ST.					_s 350.00	350.00
Canton, MI 48187					\$	_{\$} 350.00
5. If over \$100.00 cum	ılative, please pro	ovide:			Click Here fo	or Memo Itemization
Occupation Owner		_ _{Employer} _Priyasmi	Electron	ics, LLC		
Business Address 426	58 Redfern ST	. Canton, MI 4818	7			
Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Receip	05/30/12		_
Lawrence Lemanski 38417 Santa Barbara Clinton Township, Mi	48036				_{\$} 50.00	_{\$} 50.00
Olinton Township, twi	40000				Click Here fo	r Memo Itemization
5. If over \$100.00 cum	ılative, please pro	ovlde:				. Works Normanan
Occupation		Employer				
Business Address Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
3. Contribution # 4	PAC Receipt?			ot 05/31/12		_
Name & Address		_				
Patrick Moran 26201 Harbor Pointe I Harrison Township, M					_{\$} 50.00	_{\$} 150.00
5. If over \$100.00 cum	ulative, please pro	ovide:			Ollak Hans fa	r Mama Hamiratian
Occupation Owner		Employer Mora	n Chevro	olet	Click Here to	r Memo Itemization
	500 Gratiot Cli	inton Township, M				
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
				Page Subtotal	\$485.00	
				nd Total of All Schedules 1A		
			(Comple	ete on last page of Schedule)	Enter this total on	
Page Z of 15					line 3a of Summary Page.	

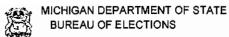


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

2.	Committee	Name

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

	is. If contribution is from an individual, enter last name, first name, if contribution is from a Political Committee or an Independent itions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Rev Name & Address:	2eipt? YES 4. Date of Receipt 05/31/12		
James George			
19634 Westchester Clinton Township, MI 48038		_{\$} 35.00	_{\$} 82.50
5. If over \$100.00 cumulative, plea	se provide:	Click Here f	or Memo Itemization
Occupation	Employer	Olick Fiere i	or Memo Remization
Business Address			
Type of Contribution: Direct	Loan from a person 🗸 Fund Raiser		
3. Contribution #2 PAC Reco	eipt?		
Anthony Marrocco Victory PAC		25.00	05.00
PO Box 665 Mount Clemens, MI 48046		_{\$} 35.00	_{\$} 35.00
5. If over \$100.00 cumulative, pleas	se nmvide:	Click Here fo	or Memo Itemization
Occupation		Official	ST WIGHTO TROTTILE LIGHT
Business Address			
Type of Contribution: Direct	Loan from a person		
3. Contribution #3 PAC Rece			
Name & Address: Timothy Tomlinson			
38272 Trillium Place		_{\$} 550.00	_s 1000.00
Harrison Township, MI 48045		Oliali Harri fo	
5. If over \$100.00 cumulative, pleas	•	Click Here to	r Memo Itemization
Occupation Attorney	Employer Dolan & Tomlinson, PC		
Business Address 42850 Garfield F	Rd. Suite 101 Clinton Township, MI 48038		
Type of Contribution: Direct	Loan from a person Fund Raiser		_
Contribution # 4 PAC Rec Name & Address	eipt? YES 4. Date of Receipt 06/01/12		
Graham Orley 201 W. Big Beaver Rd., Suite 720		70.00	400.00
Troy, MI 48084		_{\$} 70.00	_{\$} 130.00
5. If over \$100.00 cumulative, pleas	e provide:	Oliek Uses fo	r Mama Hamiwatian
Occupation Developer	Employer Self	Chek Here to	r Memo Itemization
Business Address 201 W. Big B	eaver Rd., Suite 720		
Type of Contribution: Direct	Loan from a person Fund Raiser		
	Page Subtotal	\$690.00	
	Grand Total of All Schedules 1A		
	(Complete on last page of Schedule)	Enter this total on	
Page 3 of 15		line 3a of Summary Page.	1

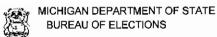


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

2. Committee Name CTE DEAN REYNOLOS

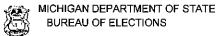
Enter contributor's name and address middle initial. Check box to indicate Committee (PAC) Report all contributions.	ss. If contribution is from an individual, enter last name, first name, if contribution is from a Political Committee or an Independent utions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Rec	ceipt? YES 4. Date of Receipt 05/26/12		
Name & Address: Jenifer Jo West 20752 Also CT. Clinton Township, MI 48038		_{\$_} 17.50	_{\$} 27.50
5. If over \$100.00 cumulative, plea	se provide:	Oliak Hara 4	in N. 4
Occupation	Employer	Click Here i	or Memo Itemization
Business Address			
Type of Contribution: Direct	Loan from a person		
3. Contribution #2 PAC Reco	eipt? YES 4. Date of Receipt 05/30/12		
Michael Chirco 46600 Romeo Plank Road, STE. Macomb, MI 48044	5	_{\$} 70.00	_{\$} 120.00
5. If over \$100.00 cumulative, pleas	se provide:	Click Here fo	or Memo Itemization
Occupation Developer	Employer Chirco Homes		
	Plank Road, STE. 5 Macomb, MI 48044		
Type of Contribution: Direct	Loan from a person		
3. Contribution # 3 PAC Received Name & Address:			
Jack Dolan 2388 Heronwood Bloomfield Hills, Ml		_{\$} 550.00	_{\$} 1000.00
5. If over \$100.00 cumulative, pleas	se provide:	Click Here fo	r Memo Itemization
Occupation Attorney	Employer Dolan & Tomlinson, PC		
	STE. 101 Clinton Township, MI 48038		
Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 4 PAC Rec Name & Address	eipt? YES 4. Date of Receipt 06/01/12		
Amy Tomlinson 38272 Trillium Place Harrison Township, MI 48045		_{\$} 500.00	_{\$_} 500.00
5. If over \$100.00 cumulative, pleas	se provide:	Olfale Llava fa	- Maria Maria
Occupation Housewife	Employer	Click Here to	r Memo Itemization
Business Address			
Type of Contribution: Direct	Loan from a person		
	Page Subtotal	\$1,137.50	
	Grand Total of All Schedules 1A		
Page 4 of 15	(Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

1. Committee I.D. Number 137 332
2. Committee Name CTC DCAN REYNOLOS

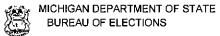
Enter contributor's nan middle initial. Check b Committee (PAC) Rep	ox to indicate if con	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 06/19/12		
Benjamin J Aloia					
48 S Main ST STE 3 Mount Clemens, MI	18043			_{\$} 32.50	_{\$} 67.50
5. If over \$100.00 cum	ulative, please pro	ovid	e :	Click Hara fo	or Memo Itemization
Occupation		_	Employer	Chick Here it	or Werno Remization
Business Address					
Type of Contribution:	Direct		Loan from a person		
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>06/19/12</u>		
Mario Lavinio				25.00	157.50
18341 Nardy Clinton Township, MI	48036			_{\$} 35.00	_{\$_} 157.50
				Oliala I I ama fa	- 14
5. If over \$100.00 cum			e: _{nployer_} Mario's Body Shop	Click Here to	r Memo Itemization
Occupation Owner					
Business Address 346	GO/ Gratiot Ave	าน	Clinton Township, MI 48035		
Type of Contribution:	Direct		Loan from a person 🗸 Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt <u>06/19/12</u>		
Joseph Oram 4585 Arline Dr. West Bloomfield, MI	48323			_{\$} 175.00	_{\$} 175.00
				Click Here for	Memo Itemization
5. If over \$100.00 cum					
Occupation Owner	E1 Croonfield Pui		Employer_VIP Media		
Type of Contribution:	Direct	e 2	19 Southfield, MI 48076 Loan from a person Fund Raiser		
3. Contribution # 4	PAC Receipt?	_	<u> </u>		
Name & Address	FAC Receipts	L	YES 4. Date of Receipt <u>06/19/12</u>		
George Sobah 37737 Santa Barbara					
Clinton Township, MI	48036			_{\$} 17.50	_{\$_} 17.50
5. If over \$100.00 cum	ulative, please pro	viđ	e :	Click Here for	Memo Itemization
Occupation		_	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person 📝 Fund Raiser		
			Page Subtotal	\$260.00	
			Grand Total of All Schedules 1A		-
			(Complete on last page of Schedule)	Enter this total on	J
Page 5 of 15				line 3a of Summary Page.	



CANDIDATE COMMITTEE

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

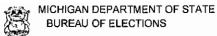
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.					nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of F	Receip	ot 06/19/12	·	
Andrea Irons							
18656 Cranbrook Clinton Township, MI	48038					_{\$} 17.50	_{\$} 17.50
5. If over \$100.00 cum	ulative, please pr	vid	e:			Oliale Hann fo	
Occupation		_	Employer			Click Here to	or Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person	\checkmark	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of R	eceip	06/19/12		
Barbara Towner 39757 Brylor CT Clinton Township, MI	48038					<u>\$ 100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cum	ulative, please pro	vide	: :			Click Here fo	r Memo Itemization
Occupation		_ Er	nployer				,
Business Address							
Type of Contribution:	Direct		Loan from a person	$\overline{\mathbf{V}}$	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of F	Receip	ot 06/19/12		
Dr. Stephen Swetech 43868 Scoter LN. Clinton Township, MI	48038					_{\$} 17.50	_{\$_} 77.50
5. If over \$100.00 cum	ulative, please pro	vide	: :			Click Here for	Memo Itemization
Occupation		. E	mployer				
Business Address							
Type of Contribution:	Direct		Loan from a person	\checkmark	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of F	Recei	ot <u>06/19/12</u>		
Euel Kinsey 37418 Fiore Trail Clinton Township, MI	48036					_§ 17.50	_{\$} 67.50
5. If over \$100.00 cum	ulative, please pro	vide	:			Click Here for	Memo Itemization
Occupation		-	Employer				
Business Address	_						
Type of Contribution:	Direct		Loan from a person	✓	Fund Raiser		
					Page Subtotal	\$152.50	
			(Co		nd Total of All Schedules 1A te on last page of Schedule)		
Page 6 of 15					·	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

	ox to indicate if con	tribution is from a Political regardless of amount.	vidual, enter last name, first nam Committee or an Independent	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date o	of Receipt 06/19/12		
Kimberly Elward 46658 Sawyer Ln. Macomb, MI 48044				_s 25.00	_{\$} 25.00
5. If over \$100.00 cum	ulative, please pro	ovide:			
Occupation		Employer		Click Here t	for Memo Itemization
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	f Receipt 06/19/12		
Rick Flynn 43225 Chardonnay Dr Sterling Heights, MI 4				_{\$} 35.00	_{\$} 135.00
5. If over \$100.00 cum		vide: Employer MEA Local	11	Click Here for	or Memo Itemization
		nton Township, MI 4			
Type of Contribution:	Direct	 1	✓ Fund Raiser		
3. Contribution # 3	PAC Receipt?	Loan from a person			
Name & Address:	FAC Receiptr	YES 4. Date o	of Receipt 06/19/12		
James Hali 20400 Hall Rd. Clinton Township, Ml	48038			_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cum	ılative, please pro	vide:		Click Here fo	r Memo Itemization
Occupation		_ Employer			
Business Address Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	of Receipt 06/19/12		
Michael Pohlod 59627 Glacier Rdg. S. Washington, MI 48094	1			_{\$} 17.50	_{\$} 17.50
5. If over \$100.00 cumu	ılative, please pro	vide:		Click Here fo	r Memo Itemization
Occupation		_ Employer		_	
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
			Page Subf	total \$177.50	
		(Grand Total of All Schedules (Complete on last page of Sched	ule) Enter this total on	
Page 7 of 15				line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 137 332
2. Committee Name CTE DEAN REYNOLIS

middle initial. Check b	ox to indicate if con	tribution is from a Political Co regardless of amount.			6. Ambunt	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: David Flynn 8641 Hickory St. Sterling Hts, MI 483	PAC Receipt?	YES 4. Date of F	Recei	Pt 06/19/12	25.00	, 25.00
Sterning Fits, IVII 400	12				_{\$} 25.00	\$ 25.00
5. If over \$100.00 cum	rulative, please pro	ovide:			Click Here f	or Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of R	eceip	pt <u>06/19/12</u>		
Andrew Patzert 21175 Harrington Clinton Township, MI	48036				_{\$} 25.00	§ 25.00
5. If over \$100.00 cum	•				Click Here fo	or Memo Itemization
Occupation		_ Employer				
Business Address			_	<u> </u>		
Type of Contribution:	Direct	Loan from a person	✓	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of F	Recei	^{pt} 06/19/12		
Thomas Mill 38578 Gainsborough Clinton Township, MI					_{\$} 35.00	_{\$} 72.50
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		Employer	_			
Business Address			_			
Type of Contribution:	Direct	Loan from a person	✓	Fund Raiser		•
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of I	Rece	ipt 06/19/12		
Christian Orano 386 W Otis Ave Hazel Park, MI 48030)				_{\$} 17.50	_{\$_} 17.50
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	r Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	\checkmark	Fund Raiser		
				Page Subtotal	\$102.50	
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Page \$ of 15					Enter this total on line 3a of Summary Page.	

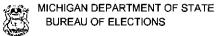
MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

2. Committee Name	CTE	DEAN	REYNOLOS

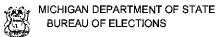
enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/19/12		
Name & Address: Dominic Abbate 2500 Royal View Dr. OAKLAND, MI 48363	_§ 70.00	_{\$} 340.00
5. If over \$100.00 cumulative, please provide:	Cliek Here fo	or Memo Itemization
Occupation Architect Employer Wakely Associates	Click Here it	n Memo Remization
Business Address 30500 Van Dyke Avenue Suite M-7 Warren, MI 48093		
Type of Contribution: □ Direct □ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/19/12 Name & Address		
Donna Knies 38909 Sahr Court Clinton Township, MI 48038	_{\$} 17.50	_{\$} 17.50
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/19/12 Name & Address:		
Kathleen Saisho 12360 Moers Dr. Sterling Heights, MI 48313	_{\$} 17.50	_{\$} 17.50
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/19/12 Name & Address		
Denise Trombley 4150 Janet Circle Clinton Township, MI 48038	_{\$} 17.50	_{\$} 52.50
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	Chick Field for	Wolfo Rolling Boll
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Subtotal	\$122.50	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	J



CANDIDATE COMMITTEE

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

	ox to indicate if con	tribution is from a Politic		nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: Jeffrey Atkins	PAC Receipt?	YES 4. Date	of Receip	ot 06/19/12		
37649 Santa Barbara Clinton Township, MI	48036				_{\$} 35.00	_{\$} 70.00
5. If over \$100.00 cum	ulative, please pr	ovide:			Click Horo	for Memo Itemization
Occupation		Employer			Click Here	ioi wemo itemizalion
Business Address						
Type of Contribution:	Direct	Loan from a persor	n 🗸	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receipt	06/19/12	-	
Vito Strolis 19874 Westchester D Clinton Township, MI					_{\$} 175.00	_{\$} 550.00
5. If over \$100.00 cum	ılative, please pro				Click Here f	or Memo Itemization
Occupation Owner		_ Employer_Ruehle's				
Business Address 205	Gratiot Mt. C	lemens, MI 48043				
Type of Contribution:	Direct	Loan from a person	✓	Fund Raiser		_
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Receip	ot 06/19/12		
William Jarvis 41800 Executive Dr. Harrison Township, M	I 48045				_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cum	ılative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation	_	Employer				
Business Address						
Type of Contribution:	Direct	Loan from a persor	· ✓	Fund Raiser	ı	
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	e of Receip	ot 06/19/12		
Fred Posavetz 46132 Ben Franklin Dr Shelby Township, Mi					_{\$} 35.00	_{\$_} 85.00
5. If over \$100.00 cum	ılative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a persor		Fund Raiser		
				Page Subtotal	\$295.00	
				nd Total of All Schedules 1A te on last page of Schedule)	Entor this 4-1-1	
Page 10 of 15					Enter this total on line 3a of Summan Page.	1

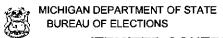


CANDIDATE COMMITTEE

1. Committee I.D. Number 13733Z

2. Committee Name CTE DOAN Ley NO LOS

Ų	ANDIDATE	U			2. Committee Name	LID DUTT	Leg 100 CISS
Enter contributor's nan middle initial. Check b Committee (PAC) Rep	ox to indicate if con	trib	ution is from a Political		nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Tony Gallo 37425 Bellagio Ct.	PAC Receipt?		YES 4. Date of	of Receip	ot _06/12/12		
Clinton Township, MI	48036					_{\$} 35.00	_{\$} 120.00
5. If over \$100.00 cum Occupation Self		_	Employer Gallo Pro	opertie	s	Click Here for	or Memo Itemization
Business Address 30!	555 Hoover Wa	arre	en, MI 48089				
Type of Contribution:	Direct		Loan from a person	✓	Fund Raiser	,	
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date o	f Receip	06/12/12		
-							
Leo Lalonde 24801 Rosalind Eastpointe, MI 48021	I					_{\$} 17.50	_{\$} 57.50
5. If over \$100.00 cum	ulative, please pro	vid	e:			Click Here fo	r Memo Itemization
Occupation		_ E	mployer				
Business Address							
Type of Contribution:	Direct		Loan from a person	\checkmark	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date of	of Receip	ot 06/25/12		
Gregory Buss 38133 Woodcrest Clinton Township, MI	48036					_{\$} 50.00	_{\$} 222.50
5. If over \$100.00 cum	ulative, please pro	vid	e:			Click Here for	Memo Itemization
Occupation Attorney		_	Employer Gregory A	A Buss	P.C.		
Business Address 4265	57 Garfield, Suite	21	5 Clinton Township,	MI 480	038		
Type of Contribution:	Direct		Loan from a person	✓	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	of Recei	pt		
						\$	\$
5. If over \$100.00 cum	ulative, please pro	vid	e:			Click Horo for	Memo Itemization
Occupation		_	Employer			Click Here to	Memo Remization
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
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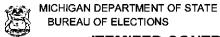
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332
2. Committee Name CTT DEAW REYWOOS

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? DYES 4. Date of Receipt 5/30//2. PIPEF ITTERS LOCAL C36 PAC 30100 NORTH WESTTERN 1416H WAY FARMINGTON HILLS MI 48334 5. If over \$100.00 cumulative, please provide:	\$ /50	s 150 assort
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6~/-12 Name & Address LISA POLAN 2388 HERONWOOD PLOONFIELD HILLS M (5. If over \$100.00 cumulative, please provide: Occupation House wife Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 500 S	s 500 er
ANTHONY PYPE 39867 CON POLT DA CHARW \$100.00 cumulative, please provide: Occupation Employer	s DO Click Here for	\$ /00-40 Memo Itemization
Business Address Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 6-22-/2 Name & Address Page 10	\$ So & Click Here for	\$ 160 ==
Business Address 5/30/ SCHOWHORR FO SHEBY N1 48315 Type of Contribution: Direct Loan from a person Fund Raiser	, -	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	-

Page 12 of 15

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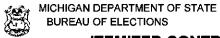


CANDIDATE COMMITTEE

1. Committee I.D. Number 137332

2. Committee Name CTE DEAN REYNOLDS

	/
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 6-22-12 Name & Address: CLINTUN TOWNSHIP FIRE FIGHTERS PAC 43601 ROMED PLANIL CLISTON TOP MI 48098 5. If over \$100.00 cumulative, please provide:	\$ 250 = \$ 875 = Click Here for Memo Itemization
Occupation Employer	Short for to work a normal and
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6 - 20 - 12	-
GLETCHEN SIMMONS	100 000 100 000
38155 ST MANEY	\$ 100 = \$ 100 ==
CLIVEN THE MI 48076 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 6/26/12 Name & Address: ERIC FLYNN 35 446 57 CLAIR	s 1000 = s 1000 al
NOW BALTIMORG MI 48047	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Com A ADD 4 O/S Employer TONIC	
Business Address 50270 ERUSSELL SCHMIDT, LIKESTREAGED TI	48 051
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/29/17 Name & Address	
STEVE SAPH JA BELINHAN ST	. 70 00 . 240 De
Mt Cにからまれし ソも43 5. If over \$100.00 cumulative, please provide:	Click Hara for Mama Itamization
Occupation FN3CKMGF SAWS Employer NICKER + SAPH	Click Here for Memo Itemization
Business Address 44 A A Comp CLORES M 48043 Type of Contribution: Direct Loan from a person Fund Raiser	
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	
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CANDIDATE COMMITTEE

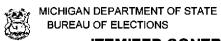
1. Committee I.D. Number 137 332

2. Committee Name CTE DEAN REYNOIDS

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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 7/2//2 Name & Address: PAUL サドルー TOUNTARIEST	A-10 0 000	68
HARRISON NO MI 48045	<u> 500 -</u>	\$ 200 =
5. If over \$100.00 cumulative, please provide:	0" 1 11 5	.
Occupation ATTOKNEY Employer SCLF	Click Here for	Memo Itemization
Business Address 42450 GALFICLO ST 101 CLISTON TO 11 Y 80	38	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/2//2		
Any THOM LINSON	eron 00	100 0%
38272 TRIKIUM PLACES	s 200 500	* 1000 =
FARRISON TO 48045. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Housewife Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/1/12		
KENNETH SIMONS	, 500 =	. CO2 %
34 356 WHITTAKER	<u> </u>	\$ <u></u>
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
B. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/7// Z		
MARK MODRE 51121 ACO	, 500 £	, 500 a
MACOME My 48042 5. If over \$100.00 cumulative, please provide:	Click Hara for	Memo Itemization
Occupation SALES Employer VISCOUNT POOLS	CHUK FIELE IOI	Memo itemization
Business Address 36568 660 ESBECK CLIVING MY 49035		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A		
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Page /4 of /5

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CANDIDATE COMMITTEE

2. Committee Name	CTE	DEM	REYNOUS
			•

middle initial. Check box to inc Committee (PAC) Report <u>all</u> co	address. If contribution is from a dicate if contribution is from a Poontributions regardless of amour	litical Committee or an Indeper t.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PA Name & Address: A NORTH SIME 2 8 3/3 CHAR CHOST SEPTED MI 5. If over \$100.00 cumulative Occupation House V	DNS LEW 19047 please provide:	eate of Receipt 7/7//	\$ 50°	s 500 44 Here for Memo Itemization
Business Address Type of Contribution: Directors	ect Loan from a pe	rson Fund Raiser		
3. Contribution #2 PAC Name & Address PAULING STAN 38938 SANTA B, CLIVEN TWO MI 5. If over \$100.00 cumulative, Occupation House W Business Address Type of Contribution: Dire	PLA #KBARA #\$036 please provide: Employer	son Fund Raiser	\$ 0 00 Click H	s lere for Memo Itemization
3. Contribution #3 PAC Name & Address: LISA DOLAN 2368 HERAN BLEDAFIELD A 5. If over \$100.00 cumulative, Occupation Business Address Type of Contribution: Dire	Please provide: Employer	eson Fund Raiser	1/2. \$ \$08 Click H	s 1000 —
3. Contribution #4 PA	CReceipt? DIES 4. LICE OFFICES A SBECK 48038	Date of Receipt 7/15/	<u>\$ 32</u> 5	ere for Memo Itemization
Business Address Type of Contribution: Direction	rect Loan from a pe	rson Fund Raiser		
Page /5 of /5		Pa Grand Total of All Sc (Complete on last page o		10n



ITEMIZED EXPENDITURES SCHEDULE 1B

137333 1. Committee I. D. Number

SCHEDOLE IB		^	
CANDIDATE COMMITTEE 2. C	Committee Name CTE DEAW	REYNE	105
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name AMERICAN GRAPHICS	<u>.</u>	6/18/12	\$ 250 4
Address	Purpose: PRINTING	'Date'	
34895 GROESBECK	Click F	ere for Memo I	temization Type
CLINTEN TUP MI 48035	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name C5 BARRIMORES	Purpose: FOOD + SORVICES	6/19/12 Date	\$ <u>325 ° 28</u>
Address 21750 HALL	Purpose: 1000 + 3000 / 5		
CLINTON TOP MI 48038	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3	_		
Name Lowes		6/21/12	\$ 19 05
Address 15350 Have RD	Purpose: Collie For Silons		
- Crimina in m. 1 48038	Check box if this expenditure is payment of	ere for Memo II	temization Type
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Loves		6/27/12	\$ 57 91
Address 35/15 SOUTH GRATIT	Purpose: (LUE, STRINGS, ROILURS	Date	
CLOWTON TUP MI 48035	Click H	ere for Memo If	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Loves	_	6/27/12	\$62 86
CLINTON MY MI 48035	Purpose: WOOD FOR SIENS	Date	
CCINTON MA MI 4013E	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtot	al this page	714 87

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

1. Committee I. D. Number

137 332

CANDIDATE COMMITTEE 2.0	Committee Name CTE DEAN REYNOIPS
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name A MOXICAN GRAFHICS	6/27/12 \$1950 40
Address 34895 Gloes BECK	Purpose: PRINTING Date Click Here for Memo Itemization Type
CLINE TO MI 44035	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2 Name Am CAICAN Col April C S Address	Purpose: PRINTING Date \$ \$58 \frac{60}{27/12 \$ \$58 \frac{60}{27}}
34895 GROUSBELK CLINTW MP MI 48035	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #3 Name MAN HATTMY MA1(LYCS Address 5) 132 M1 LANO	Purpose: MAILING SCRUCTES Date Date
MACOUP IN MI 49042	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #4 Name MANGATTA MANCORS Address	Purpose MAILING SURVICES Date \$ 498 99
51132 MILANO MACENT TYP MI 48042 [Fund Raiser	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5 Name Lowers Address 15350 HALL RD CLINTON TWO MI 44038	Purpose: Pole's FOR SIGNS 7/7/12 \$ 287 79 Click Here for Memo Itemization Type
14 raw raw raw 140 >8	Color Field for Metho Refinization Type

Subtotal this page

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

Check box if this expenditure is payment of

debt or obligation reported on previous

statement

Enter this total on line 8a of Summary Page

Fund Raiser



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		<u> </u>	
Name US POST OFACE	7	14/12	16 00
-	Purpose: STANDS	Date	s <u>45 -</u>
Address	Purpose:		
Mount clamens M1 48043	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name PRACTICAL POLITICAL CONSULTING		7/15/12	\$///5 9 2
TRACTICAL POLITICAL CONSUME	4000	Date	\$ <u>///5</u>
Address	Purpose: MAIL LIST		
220 ALBERT AVE	Click He	ere for Memo I	temization Type
DAST LANSING AT 48826			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name PRIACTICAL POLITICAL CONSULTING		7/18/12	· 200 79
Address	Purpose: WALLING CARDS	Date	s 282 79
220 ALBORT AVE	Fulpose. VV 147 GM C C VVC S		
	Click He	ere for Memo II	temization Type
ETEST LANSING MI 48826	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name SAWICKI & SON		7/20/12	s 60/ 55
-	C16 16	Date Date	s <u>601 = </u>
Address	Purpose: SIGNS		
1521 WEST LA FAYETTE	Click He	ere for Memo II	ternization Type
DETROIT M1 48216	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5		, ,	
Name FERN HILL	0	7/70/12	e I TA LOSS
Address	Purpose: TIS FOR PASIN DIMINGE	Date/	* 176-
17600 CLINTON RIVER			temization Type
17600 CLINTON RILLER CLINTON - UP MY 48038	Check box if this expenditure is payment of	ACTOL METHOR	tomization Type
Fund Raiser	debt or obligation reported on previous statement		
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Grand Total of all Schedules 1B (Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE SUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.O. Humber 137332

2 commonmie Committee to flat Dan Roynaids

CANDIDATE COMMITTEE

CANDRAIE COMMITTEE				
Trila Buhashda Kendese:	**			
a. PiDebin and obligations awad jayor furgives the or	naration OR 5. J. De ck either a or b. Use only for the p	his and obligations awad <u>to</u> groups checked.)	ot toldines [75 gre o	committee.
3. Home and Making Address of person, vendor or treated institution to whom debt is owned. Check how to indicate whether debt is good to as	4. Type of Obligation (Indicate type and you may seaton an expendition code) 5. indicate date date two incurred	7. Date and emount of each payment	8. Cumulative payment to date on dobt	8. Outstanding Belance ut close of this period them 8 retinus
incorporated hustness. If dott is a bunk loan, pluese growing information regarding the undersore of guessions, if grav.	6. Indicate original amount	`	l	
Debt #1 Corp? Yes Could be or by:	4.Type: LO.A.U	1.1.3		
Dean Requalds	5. Date Bele Was Internet			
20000 White lake	4-25-64 T. Original Amount of Date:			\$ 2,000
Chiefer Tree MI 48031	£ 2,000		i .	PORGIVEN
If bank joan, name of endorser or querestor:	,		oual Endomed: S	l
Debt.#2 Corp? L Yes				
Qued to or inc	4. 3yer <u>1.0 ma)</u>			
Dean Rennalds	5. Dide Debt Wite Termend:			·
200 90 White Oaks	4. Obtain Americal Politic	_1'1'3		3,500 00
Clines Tug. 11 48031	3.500		· —	
				PORGIVEN
If bank loan, rissue of endomer or guerantor:	· · · · · · · · · · · · · · · · · · ·	A	euril Findersect: \$	
Debt #8 Corp? Yes Owed to or by:	4 Type LOAD			
Dogs Rimelas			<i>'</i> :.	
son was white Dakes	5. Date Date Was Investig			2,50400
Clarks Theo. M. 44034	J. 50000	-4-4-6		
,				FORGMEN
# bank lass, name of endorser or guarantor:			ount Endorsed: \$_	
		Page Buttetal (Chalain	majed qept)	\$000.00

Grand Total of all Schedules till.
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A debt or obligation must be shown on this Schodule if them was an outstanding amount awail on it at the cleaking date of This Georgian Statement or it was furgiven during the parted covered by this Compalge Statement. on line 12s "owed by" or line 12b "owed to" of the Summary Fage

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS SCHEDULE 1E

	mber137332	
2. Conveities Name	Committee to Elect Dean Rounds	9

CARDIDATE COMMITTEE				
This dehedule Herritain: a. Mouths and obligations eventing or forgiven the o	countities OR 6. To	t bews andisplics and adju	or foreigns by the	
	ck either a or b. Use only for the	Raspone checked.)		
S. Hann and Maling Address of person, vendor or financial institution to whom debt is awad.	4. Type of Chilgation (Inclusio type and you may seeign an expenditure code)	7. Date and amount of such payment	8. Currently payment to date on date	B. Culetending Balance at close of this period
Check box to indicate whether debt in owed to an incomparated business. If debt is a bank inex, please provide information regarding the endorsers or	fi. Indicate data data was incurred 6. Indicate original amount		COMO CAN SHOR	(Hem &) (Hem & minus of the period
aurenton, I any.	· of debt		1	
Debt #1 Carp? Yes Cayed to ar by:	4.Type Leas-			
Dean Royalds	5. Date Dakt Was Surgeris		[
Songo White Oaks	6. Original Amount of Date			\$5,500 00
	€ 5,500 °			PORGIVEN
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	5.51000			PONGWEN
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Zesan West Pake	S. Date Peter West Designations:		•	
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philyelles senst be elected on this Schedule II there was an existending amount cured on it at the closing date of sign Statement or it was Sergiven during the paried severed by this Gempolyn Statement.

Page 2 of 5

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee 10. Humber 137332.
2. Committee to Elect Down Research 5

CANDIDATE COMMITTEE		•	3	
This Schedule hardes: A. Koetis and chilgelloss awad by at larges the a	constitue de b. C.D.	shis and obligations owed (2	or largives by the	committee.
2. Name and hinling Address of passon, wanter or financial inefficien to whom dabt is awad. Chack here to indicate whether debt is awad to an incorporated humans. If dabt is a bank toon, please provide information regarding the endorsers or parameters, if any.	ch eliter a er is. Use only for the y 4. Type of Obligation (indicate type und you may ender an expenditure code) 5. Indicate date dets two incurred d. indicate adjinet amount of detal	7. Dala and amount of each payment	8. Custolishee payment to date on debt	S. Christending Balance at close of this pariod (them is minus than it)
Dean Remains 20040 Library Pake Clindra Tup M. 48031	5. Tota Date Was Insurant 5. Tota Date Was Insurant 6. Oriental American of Date 8. 1,000 ¹⁹	-/	\$	S.L.DOD
Deter Com? [] Yes Oned to ar by: 20040 Date Date Clinton Trop. H1 48086	4 Type: LOAN: 1 Bate Bild Was become: 2 Octable Strong of Party: 2 Octable Strong of Party:	-/	\$	2,030 ^{0€}
Deen Reynolds Deen Reynolds Chiefen Tup MI 480 36	4 Type: <u>LOA 13</u> 5. Bate Date Was housed: 10 - 21 - 04 6. Octobril Amount of Date: 2			€±00±0

Grand Total of all Schedules 1E (Complete on last page of Schedule showing associate awad by ar to the committee

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A daint or entitiesten must be shown on this Schools it there was an outstanding amount owed on 2 at the closing date of this Compaign Statement or 2 was forgiven during the period covered by this Compaign Materians.

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MICHGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	,	6 B 6 S S		
246.10 144. 0 114.		37332		
	omnitus Name <u>Consuitt</u> s	te to Elect. Dea	n Keyialds	<u> </u>
CANDIDATE COMMITTEE		····		· · · · · · · · · · · · · · · · · · ·
Traces and childrentons and by or foreign the co	sic either a or b. Use only for the pu	pto and obligations owed to	or forgiven by the co	smallee.
S. Name and Halling Address of person, vendor of Seancial implication to whom debt is great.	4. Type of Chilgation (Indicate type and you may seelon on expenditure code)	7. Date and amount of each payment	8. Demoletive payment to date on debt	9. Quintending Selence at close of this period
Check box to indicate whether ciest in owed to an incorporated business. If debt in a track tone, please growlds information regarding the endorsers or	6. Indicate data dabt was incured			(None & salmos Nome &)
provide information regarding the endorsers of guarantees. If any,	8, indicate original amount of debt	``		
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Christon Tune. H. 4803L			*	
,	₹ 81000.00	,,,		FORGIVEN
If back toon, name of andorses or quesentor:			unt Bodornad: 8	!
Debt #2 Corp7 Yes	4.Type LOAN	3 /216-13 1900-		
Dean Reynolds			,	1
20040 White Oaks	5. Date Debt Was leavered: 10 - 2.4, -0 % 6. Octobert Americal Debt:	11.8		
Clinton Turb. M. 48031	2,100,00		• 19n0°	- 100 -
	- ALLEY LES		·	FOREIVEN
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Climbro Tub. M. 48036	6. Original Amount of Outs	115	3000	
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f bank loan, name of endorser or gueranton			vount Endomed: 2	
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Page 4 of 5 "...

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MICHIGAN DEPARTMENT OF STATE BURGAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

1. Committee I.D. Number	1373	32_	
2. Committee Name Com	mittee to	Elect Dean	Remolds

This Schedule tentitives: a. Eloptic and obligations coved by or forgiven the committee. (Check both of whom double several financial inselfaction to whom double coverage of person, vendor or financial inselfaction to whom double coverage of person. A. Type of Chilipation (Check at the coverage of person, vendor or financial inselfaction to whom double coverage of the person	CANDIDATE COMMITTEE			. 3	
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Signature insellution to whom debt is owed. Check box to incloses whether debt is owed to an incorporated business. If side is a bank loss, please growth information regarding the endorages or class whether debt is a bank loss, please growth information regarding the endorages or class or fact. Corp? Yes Debt #1 Corp? Yes Debt #2 Corp? Wes Chiviten Turp, M1 4 8036 Signature in the period district of the corp. Foregiven Foregiven Foregiven Amount Endoraged: \$ \$15.45 \$2.00 40 Uhit - 0aks Chiviten Turp, M1 48036 Corp? Yes Order in the period of the corp. Amount Endoraged: \$ \$15.45 Signature in the corp.	a. ADebis and obligations owed by or forgiven the or (Che	enmittee OR to Γ De ak either a or to. Lies only for the $ ho$	ibts and obligations owed <u>to</u> urpose checked.)	or forgiven <u>by</u> the c	ommittee.
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200 40 Links Two, 11 48034 Clinks Two, 11 48034 S 315.45 FORGIVEN		1-4-28	118	!	
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Whenk loan, name of endorser or guarantor: Detail 83 Corp? Yee Owed to or by: Detail Respected 5 2 00 40 White Dak's Claritor Turb, MI 48036 S Date Date Was Secured: 6 Original Amount of Date: 8 350.60 FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsect: \$	Clinton Two, 41 48036			*	
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Cluder Tolo, M. 48036 6. Original Amount of Disht: 8. 350.60 1/ S. PORGIVEN If bank loan, name of endorser or guarantor: Amount Endorses: \$					eð.
If bank loan, name of endorser or guarantor: Samount Endorset 5 PORGIVEN		6. Original Amount of Debt:	_/_/ <u>-</u>		
If bank loan, same of endorser or guarantor:	CIMEN IND BI TOUSE	s 350,00	 .		, .
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	H park loan, dame or another or guineance.				

Grand Total of all Schedules 12 (Complete on last page of Schedule showing second to over the committee)

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

Pugs 5 of 5

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



NICHIGAN DEPARTMENT OF STATE SUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Number	137352		
2. Committee Name Com	mittee to Elec	ct Dean Round	4

This Schedule itemizes: a. T Debts and obligations owed by or forgiven the committee OR b. T Debts and obligations owed to or longiven by the committee. (Clack either a or b. Use only for the purpose chacked.)								
3. Name and Malling Address of parson, vendor or Respectal institution to whom debt is owed. Check true to indicate whether debt is owed to an incorporated business. If debt is a bank lose, please provide information regarding the endorsers or oursentors, if any.	4. Type of Collegation (Indicate type and you may seeign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of oach payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (tiern 6 rainus item 8)				
Debt #1 Corp? Yes Owed to or by: Result Requality 200 40 White Daks Clause Trup #1 42836 Whenk later, name of endorser or guarantor:	4. Type: LAAN- 10 - 4 - 02 5. Date Debt Was Incurred: 6. Original Amount of Debt: 5. 100		aunt Endoreed: \$	s_100°				
Dobt #2 Cons? Ves Oned to or by: Dean Regue to 5 100 45 White Dads Climatory Timp Mi 48036	4. Type: L-OAIA 9-10-08 5. Date Debt Was Incurred: 6. Original Amount of Debt: 2 9 00 99	-	\$	400°° □PORGIVEN				
Debt #3 Cop? You Oned to or by: Dean Resynalds 20040 White Oeks Cluster Tusp M 48036	4. Type: LOAN 11-5-0% 5. Date Bate Was incorrect: 6. Ortonal Amount of Dabt: E 9100 00		nount Endorsed: S	400				
Page Subtotal (Outstanding debt)								

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

36 26 5 45 Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A dight or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing dule of this Compelies Statement or it was forgiven during the period govered by this Compelies Statement.

Page 6 d 6



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

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

- USE A SEPARATE SHEET FOR EACH EVENT -								
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)		5. Type of Fund Raising Activity		6. Address and Name (If any) of the place where the activity was held.			
06/19/12	groutery	84	Barbecue		C.J. Barrymore 21750 Hall Rd. Clinton Township, MI 48038 Private Residence			
7. Total Contributions		\$7,295.00						
8. Other Receipts								
9. Gross Receipts (Add lines 7 and 8)		\$7,295.00						
10. Total Cost of Event (Total Cost includes In-Kind Contributions		\$650.00 and All Expenditures	Made For the Event	<u> </u>				
11. 🗹 Check if event was a joi	int fund rai	ser and complete the	following:					
Co-Sponsor(s)		Contribution S (%)	plit		Expenditure Split (%)			
CTE Kenneth Pearl		50			50			
								
								
								

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

Page _1 of _1	
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