



FILED

12 OCT -4 PM 2:08

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.

3. This Statement covers From: 7-22-12 to 8-27-12

1. Committee I.D. Number <u>138846</u>	4. Candidate Last Name <u>STANLEY T. GROT</u> First Name <u>T. GROT</u> M.I. 4a. Office Sought Including District # or Community Served (if applicable) <u>Clerk - Shelby Twp.</u> 4b. County of Residence <u>MACOMB</u>
2. Committee Name <u>C.T.E. Stanley T. Grot</u>	6. Treasurer's Name & Residential Address <u>SYLVIA J. GROT</u> <u>11927 Hiawatha</u> <u>Shelby Twp. Mi. 48315</u> Area Code & Phone <u>(586) 677-2002</u>
5. Committee's Mailing Address <u>11927 Hiawatha</u> <u>Shelby Twp. Mi. 48315</u> Area Code and Phone <u>(586) 677-2002</u>	7. Treasurer's Business Address <u>N/A</u> 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.	8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper) <u>N/A</u> Area Code and Phone _____

9. TYPE OF STATEMENT

9a. ~~VOID~~ Pre-Election OR 9b. ~~OK~~ Post-Election

Pre-Election or Post-Election Statement relates to:

Primary General
 Convention School
 Special Caucus

Date of Election, Convention or Caucus
8-7-12

9c. Annual Statement (_____ Coverage Year)
9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
9e. Dissolution of Candidate Committee
Effective Date of Dissolution _____

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper SYLVIA GROT Sylvia J. Grot Date 10-4-12
Type or Print Name Signature

Candidate STANLEY T. GROT Stanley T. Grot Date 10-4-12
Type or Print Name Signature

Authorily granted under P.A. 388 of 1976



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138846
2. Committee Name C.J.E. Stanley + GROT

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.

3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8-1-12

Name & Address: PATRICK SIMASKO
319 N. GRATIOT
Mt. Clemens, Mi: 48043

6. Amount \$ 500 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 500

6. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Attorney Employer self

Business Address 319 Gratiot, Mt. Clemens, 48043

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt _____

Name & Address _____

6. Amount \$ _____ 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

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 _____

Name & Address _____

6. Amount \$ _____ 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

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 #4 PAC Receipt? YES 4. Date of Receipt _____

Name & Address _____

6. Amount \$ _____ 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

6. 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 _____

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

Enter this total on line 3a of Summary Page.



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

1. Committee I.D. Number 138846
2. Committee Name C.T.E. Stanley t. GROT

This Schedule itemizes:

a Debts and obligations owed by or forgiven the committee OR b Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 8 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Stanley T. Grot</u> <u>11927 Hiawatha</u> <u>Shelby Twp, Mi. 48315</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>8-1-12</u> 6. Original Amount of Debt: <u>\$ 500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>500</u> <input type="checkbox"/> FORGIVEN
Amount Endorsed: \$ _____				
If bank loan, name of endorser or guarantor: Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>— 11 —</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>8-15-12</u> 6. Original Amount of Debt: <u>\$ 300</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>300</u> <input type="checkbox"/> FORGIVEN
Amount Endorsed: \$ _____				
If bank loan, name of endorser or guarantor: Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>— 11 —</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>8-15-12</u> 6. Original Amount of Debt: <u>\$ 200</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>200</u> <input type="checkbox"/> FORGIVEN
Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				<u>1,000</u>
Grand Total of all Schedules 1E owed by or to the committee				<u>2,300</u>

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

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

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