



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

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

FILED  
12 OCT 26 PM 2:33  
MACOMB COUNTY CLERK  
JENNIFER A. BADAUGH

FOR OFFICIAL USE ONLY

<p>1. Committee I.D. Number <b>137332</b></p> <p>2. Committee Name <b>CTE DEAN REYNOLDS</b></p> <p>5. Committee's Mailing Address <b>38150 WOODCREST CLINTON TWP MI 48036</b>  Area Code and Phone <b>(586) 405 7400</b> <small>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.</small></p> <p>7. Treasurer's Business Address   Area Code and Phone _____</p>	<p>3. This Statement covers From <b>8/28/12</b> to <b>10/21/12</b></p> <p>4. Candidate Last Name First Name M.I. <b>REYNOLDS DEAN J</b></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <b>CLINTON TWP TRUSTEE</b></p> <p>4b. County of Residence <b>MACOMB</b></p> <p>6. Treasurer's Name &amp; Residential Address <b>GERALDINE REYNOLDS 38515 HIDDEN LN CLINTON TWP MI 48036</b>  Area Code &amp; Phone <b>(586) 463-9264</b></p> <p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <b>GERALDINE REYNOLDS 38515 HIDDEN LN CLINTON TWP MI 48036</b>  Area Code and Phone <b>(586) 463 9264</b></p>						
<p><b>9. TYPE OF STATEMENT</b></p> <p>9a. <input checked="" type="checkbox"/> Pre-Election <b>OR</b> 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Convention</td> <td><input type="checkbox"/> School</td> </tr> <tr> <td><input type="checkbox"/> Special</td> <td><input type="checkbox"/> Caucus</td> </tr> </table> <p>Date of Election, Convention or Caucus <b>11/6/12</b></p>		<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Convention	<input type="checkbox"/> School	<input type="checkbox"/> Special	<input type="checkbox"/> Caucus
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General						
<input type="checkbox"/> Convention	<input type="checkbox"/> School						
<input type="checkbox"/> Special	<input type="checkbox"/> Caucus						
<p>9c. <input type="checkbox"/> Annual Statement ( _____ Coverage Year)</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee  Effective Date of Dissolution _____</p> <p><small>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.</small></p>							
<p><small>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.</small></p>							
<p>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.</p>							
<p>Current Treasurer or Designated Record keeper <b>Geraldine Reynolds, Geraldine Reynolds</b> Date <b>10-26-12</b> Type or Print Name Signature</p> <p>Candidate <b>DEAN REYNOLDS, Dean Reynolds</b> Date <b>10/26/12</b> Type or Print Name Signature</p>							



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137332

2. Committee Name

CTE Dean Reynolds

**RECEIPTS**

Column I  
This Period

Column II  
Cumulative this election cycle

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ 7115<sup>00</sup>

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

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ 7115<sup>00</sup>

(18.) \$ 27,230

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

(4.) \$ \_\_\_\_\_

(19.) \$ \_\_\_\_\_

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

(5.) \$ 7115<sup>00</sup>

(20.) \$ 27,230

**IN-KIND CONTRIBUTIONS & EXPENDITURES**

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

(6.) \$ \_\_\_\_\_

(21.) \$ \_\_\_\_\_

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

(7.) \$ \_\_\_\_\_

(22.) \$ \_\_\_\_\_

**EXPENDITURES**

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ 13,034<sup>96</sup>

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$ \_\_\_\_\_

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

(8c.) \$ \_\_\_\_\_

**9. TOTAL EXPENDITURES** (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 13,034<sup>96</sup>

(23.) \$ 23,779<sup>12</sup>

**INCIDENTAL EXPENSE DISBURSEMENTS**  
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$ \_\_\_\_\_

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

(10b.) \$ \_\_\_\_\_

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

(11.) \$ \_\_\_\_\_

(24.) \$ \_\_\_\_\_

**DEBTS AND OBLIGATIONS**

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 43,265<sup>45</sup>

b. Owed to the Committee (Schedule 1E)

(12b.) \$ \_\_\_\_\_

**BALANCE STATEMENT**

13. Ending Balance of last report filed  
(Enter zero if no previous reports have been filed.)

(13.) \$ 9,397<sup>54</sup>

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

(14.) + \$ 7,115<sup>00</sup>

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ 16,512<sup>54</sup>

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

(16.) - \$ 13,034<sup>96</sup>

17. ENDING BALANCE  
(Subtract line 16 from line 15)

(17.) \$ 3,477<sup>58</sup>



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/24/12</u>	
Name & Address: Lawrence Lemanski 38417 Santa Barbara Clinton Township, MI 48036		\$ <u>20.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/24/12</u>	
Name & Address: Anthony Marrocco Victory PAC PO Box 665 Mount Clemens, MI 48046		\$ <u>40.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/27/12</u>	
Name & Address: Peter Ruggirello 18987 Riverway CT Clinton Township, MI 48038		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/12</u>	
Name & Address: Dave Flynn for County Commissioner 8641 Hickory ST. Sterling Heights, MI 48312		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$110.00

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137332  
2. Committee Name CDE DON ROYNOLDS

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>09/20/12</u>	
Name & Address: Sherry Sorrentino 14633 Breza Dr. Shelby Township, MI 48315		\$ <u>20.00</u>	\$ <u>72.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/20/12</u>	
Name & Address: Grozda Swetech 43868 Scoter Ln. Clinton Township, MI 48038		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/21/12</u>	
Name & Address: Patricia Harris 15863 Kingston Fraser, MI 48026		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/12</u>	
Name & Address: Robert Schrage 67 Putnam Place Groose Pointe, MI 48236		\$ <u>40.00</u>	\$ <u>110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Resurrection Cemetery</u> Business Address <u>18201 Clinton River Road Charter Township of Clinton, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$120.00

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/27/12</u>	
Name & Address: Pipefitters Local 636 PAC 30100 Northwestern Highway Farmington Hills, MI 48334		\$ <u>200.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Pamela Lavers 27870 Lauren ST. E. Harrison Township, MI 48045		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Donna Knies 38909 Sahr Court Clinton Township, MI 48038		\$ <u>40.00</u>	\$ <u>57.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Andrea Irons 18656 Cranbrook Clinton Township, MI 48038		\$ <u>20.00</u>	\$ <u>37.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$280.00

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 137 332  
2. Committee Name CTE DEM REYNOLDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Ronald Roberts 2686 Monarch Court Oakland Township, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Robert Campbell 41830 Kentvale Dr. Clinton Township, MI 48038		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Maryanne Levine 23164 Gladhill Lane Saint Clair Shores, MI 48080		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Scott Chabot 42274 Toddmark Lane Clinton Township, MI 48038		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$185.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Rick Flynn 43225 Chardonay Dr. Sterling Heights, MI 48314		\$ <u>40.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Uniserve Director</u> Employer <u>MEA Local 1</u> Business Address <u>38550 Garfield Clinton Township, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Elizabeth Pyden 37504 Camellia Lane Clinton Township, MI 48036		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Mario Lavinio 18341 Nardy Clinton Township, MI 48036		\$ <u>40.00</u>	\$ <u>197.50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Mario's Body Shop</u> Business Address <u>34607 Gratiot Avenue Clinton Township, MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: James George 19634 Westchester Clinton Township, MI 48038		\$ <u>100.00</u>	\$ <u>182.50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Self</u> Business Address <u>85 N. 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	

Page Subtotal \$200.00

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

Enter this total on  
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Page.



**ITEMIZED CONTRIBUTIONS  
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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 <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>10/02/12</u>	
Name & Address: Plunkett Cooney Employees PAC 38505 Woodward, Suite 2000 Bloomfield Hills, MI 48304		\$ <u>80.00</u>	\$ <u>80.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Benjamin Aloia 48 S Main St STE 3 Mount Clemens, MI 48043		\$ <u>40.00</u>	\$ <u>107.50</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Aloia &amp; Associates, P.C</u> Business Address <u>48 S Main St Mt Clemens, MI, US 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 #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Barbara Towner 39757 Brylor CT. Clinton Township, MI 48038		\$ <u>80.00</u>	\$ <u>180.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Coordinator</u> Employer <u>Chippewa Valley Coalition for Youth and Families</u> Business Address <u>19120 Cass Avenue Clinton Township, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/12</u>	
Name & Address: Dominic Abbate 2500 Royal View Dr. Oakland, MI 48363		\$ <u>60.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Wakely Associates</u> Business Address <u>30500 Van Dyke Avenue Suite M-7 Warren, MI 48093</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$260.00

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 137332  
2. Committee Name CTE DEAN REYNOLDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address:</b> Vito Strolis 19874 Westchester Dr. Clinton Township, MI 48038		\$ <u>150.00</u>	\$ <u>700.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Owner</u> Employer <u>Ruehle's</u> Business Address <u>205 Gratiot Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address</b> Thomas Giachino 2742 Rhodes Dr. Troy, MI 48083		\$ <u>50.00</u>	\$ <u>50.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address:</b> Roy Rose 55620 Woodridge Dr. Shelby Township, MI 48316		\$ <u>40.00</u>	\$ <u>200.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Engineer</u> Employer <u>Anderson, Eckstein &amp; Westrick, Inc.</u> Business Address <u>51301 Schoenherr Road Shelby Township, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address</b> Michael Kozak 1957 Manchester Goose Pointe Woods, MI 48236		\$ <u>100.00</u>	\$ <u>275.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Project Manager</u> Employer <u>Giffels-Webster</u> Business Address <u>6303 26 Mile Road Suite 100 Washington, MI 48094</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$340.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137 332

2. Committee Name CTE DEM REYNOLDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address:</b> Joseph Oram 4585 Arline Dr. West Bloomfield, MI 48323		\$ <u>100.00</u>	\$ <u>275.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Owner</u> Employer <u>VIP Media</u> Business Address <u>29551 Greenfield Suite 219 Southfield, MI 48076</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address</b> Stephen Saph, Jr. 44 Macomb Place Mount Clemens, MI 48046		\$ <u>100.00</u>	\$ <u>340.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Agency Principle</u> Employer <u>Nickel &amp; Saph, Inc.</u> Business Address <u>44 Macomb Place Mount Clemens, MI 48046</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/02/12</u> <b>Name &amp; Address:</b> Gordon Wilson 14350 Fruitwood Washington Township, MI 48094		\$ <u>40.00</u>	\$ <u>135.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Engineer</u> Employer <u>Anderson, Eckstein &amp; Westrick, Inc.</u> Business Address <u>51301 Schoenherr Road Shelby Township, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>10/10/12</u> <b>Name &amp; Address</b> Anthony Pype 39887 Coalport Dr. Clinton Township, MI 48038		\$ <u>100.00</u>	\$ <u>200.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Owner</u> Employer <u>Garfield Canal Service</u> Business Address <u>16933 Canal Clinton Township, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$340.00

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/17/12</u>	
Name & Address: Peter Thomas 5018 Seven Lakes Drive South Washington Township, MI 48095		\$ <u>80.00</u>	\$ <u>325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>The Cash Exchange</u> Business Address <u>35943 Gratiot Ave. Clinton Township, MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
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

80.00

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

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>KOLBY MILLER</u> <u>1919 HARTLAND</u> <u>HOWELL MI 48843</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/12</u>		\$ <u>100.00</u>	\$ <u>100.00</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>JAMES FOWLER</u> <u>42189 LOCHMOORE</u> <u>CLINTON TWP MI 48038</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/12</u>		\$ <u>100.00</u>	\$ <u>100.00</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 Name & Address: <u>DEAN REYNOLDS</u> <u>38150 WOODCREST</u> <u>CLINTON TWP MI 48038</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/12</u>		\$ <u>5000.00</u>	\$ <u>5000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>UNIVERSAL TRAINING CENTER OF MI</u> Business Address <u>31499 JOHN R MADISON HILLS MI 48071</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" 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

5200.00

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

7115.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>FERN HILL</u> Address <u>17600 CLINTON RIVER</u> <u>CLINTON TWP MI 48038</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SPAGHETTI DINNER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/4/12</u> Date	<u>\$ 1800.00</u>
<b>Expenditure #2</b> Name <u>NIGHT OWL PRINTING</u> Address <u>15138 BEECH DALY</u> <u>RED FORD MI 48239</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/12</u> Date	<u>\$ 3323.10</u>
<b>Expenditure #3</b> Name <u>LASER COM LLC</u> Address <u>2230 ELLIOTT</u> <u>TROY MI 48063</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING + POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/12</u> Date	<u>\$ 2026.41</u>
<b>Expenditure #4</b> Name <u>LASER COM LLC</u> Address <u>2230 ELLIOTT</u> <u>TROY MI 48063</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING + POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/12</u> Date	<u>\$ 268.54</u>
<b>Expenditure #5</b> Name <u>SAWICKI AND SONS</u> Address <u>1521 W LA FAYETTE</u> <u>DETROIT MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>SIGNS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/12</u> Date	<u>\$ 601.55</u>

Subtotal this page

8019.32

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 137332  
2. Committee Name CTE DON REYNOLDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>FRIENDS OF BETH PYDEN</u> Address <u>37504 CAMELLIA</u> <u>CLINTON TWP MI 48036</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/12</u> Date	<u>\$ 25.00</u>
Expenditure #2 Name <u>MANHATTAN MAILERS</u> Address <u>51132 MILANO DRIVE</u> <u>MACOMB MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING + POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/12</u> Date	<u>\$1071.40</u>
Expenditure #3 Name <u>MANHATTAN MAILERS</u> Address <u>51132 MILANO DRIVE</u> <u>MACOMB MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING + POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/12</u> Date	<u>\$3919.24</u>
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 5015.64

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 13,034.96

Enter this total  
on line 8a of  
Summary Page



1  
MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137352  
2. Candidate Name Committee to Elect Dean Reynolds

THE FOLLOWING DEBTS:

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

1. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. <small>Check box to indicate whether debt is owed to an incorporated institution. If debt is a bank loan, please provide information regarding the extension or maturity date.</small>	4. Type of obligation (indicate type and you may assign an expiration date) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Outstanding payment to date no debt	9. Outstanding balance at close of this period (if no entry last 9)
<b>Debt:</b> <input type="checkbox"/> Corp <input type="checkbox"/> Ind <input type="checkbox"/> Govt Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp. MI 48034</u>	4. Type <u>LOAN</u> 5. Date Debt Incurred <u>4-15-84</u> 6. Original Amount of Debt <u>2,000.00</u>	<u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u>		<u>2,000.00</u> <input type="checkbox"/> FORGIVEN
<b>Debt:</b> <input type="checkbox"/> Corp <input type="checkbox"/> Ind <input type="checkbox"/> Govt Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp. MI 48034</u>	4. Type <u>LOAN</u> 5. Date Debt Incurred <u>4-15-84</u> 6. Original Amount of Debt <u>2,500.00</u>	<u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u>		<u>2,500.00</u> <input type="checkbox"/> FORGIVEN
<b>Debt:</b> <input type="checkbox"/> Corp <input type="checkbox"/> Ind <input type="checkbox"/> Govt Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp. MI 48034</u>	4. Type <u>LOAN</u> 5. Date Debt Incurred <u>4-15-84</u> 6. Original Amount of Debt <u>2,500.00</u>	<u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u> <u>11.2</u>		<u>2,500.00</u> <input type="checkbox"/> FORGIVEN

Page 2 of 2 (Continued debt)

2000.00

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

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

Page 1 of 2

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



1  
MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee L.O. Number 137232  
2. Committee Name Committee to Elect Dean Reynolds

THIS SCHEDULE SHOWS:

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 purposes checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, if any. Debt is: Corp? <input type="checkbox"/> Yes Owed to or by: _____	4. Type of obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Outstanding payment to date on debt	9. Outstanding balance at close of this period from 8 minus item 4
Debt is: <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>8-24-04</u> 6. Original Amount of Debt <u>\$ 5,500.00</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$</u>	<u>\$ 2,500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: Debt is: <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>8-24-04</u> 6. Original Amount of Debt <u>\$ 3,000.00</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$</u>	<u>\$ 3,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: Debt is: <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>2000 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>10-6-04</u> 6. Original Amount of Debt <u>\$ 3,000.00</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$</u>	<u>\$ 3,000.00</u> <input type="checkbox"/> FORGIVEN
Page Number (Outstanding Debt)				<u>\$ 5,500.00</u>
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

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

Page 2 of 2

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





1966  
MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

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

THE DEBTS AND OBLIGATIONS				
a. Debts and obligations owed by or to the committee on b. Funds and obligations owed to or by the committee. (Check either a or b. Use only for the purpose checked.)				
1. Name and mailing address of person, estate or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an individual business. If debt is a bank loan, please provide information regarding the lender's or guarantor's name.	2. Type of obligation (Indicate type and you may attach an endorsement copy) a. Indicate date debt was incurred b. Indicate original amount of debt	3. Date and amount of each payment	4. Committee payment to date on debt	5. Outstanding balance at close of this period (Item 2 minus Item 4)
Debt to: <input type="checkbox"/> Corp <input checked="" type="checkbox"/> Ind Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48031</u>	4. Type: <u>LOAN</u> 5. Date Rec'd: <u>10-11-64</u> 6. Original Amount of Debt: <u>\$ 1,000.00</u>	<u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u>		<u>\$ 1,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of lender or guarantor: _____ Amount Enclosed: \$				
Debt to: <input type="checkbox"/> Corp <input checked="" type="checkbox"/> Ind Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48031</u>	4. Type: <u>LOAN</u> 5. Date Rec'd: <u>10-11-64</u> 6. Original Amount of Debt: <u>\$ 2,000.00</u>	<u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u>		<u>\$ 2,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of lender or guarantor: _____ Amount Enclosed: \$				
Debt to: <input type="checkbox"/> Corp <input checked="" type="checkbox"/> Ind Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48031</u>	4. Type: <u>LOAN</u> 5. Date Rec'd: <u>10-11-64</u> 6. Original Amount of Debt: <u>\$ 6,000.00</u>	<u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u> <u>1.12</u>		<u>\$ 6,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of lender or guarantor: _____ Amount Enclosed: \$				
Grand Total of all Schedules 1E (Carry to last page of Schedule showing amounts owed by or to the committee)				<u>\$ 9,000.00</u>

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

Page 2 of 2

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



1000000 DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee (D. Number) 157333  
2. Committee Name Committee to Elect Dean Reynolds

This Schedule Number: _____				
a. Debts and obligations owed by or forgiven the committee OR b. If debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
1. Name and Mailing Address of Debtor, Vendor or Lender (Include in column debt is owed.)  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, if any.	4. Type of Obligation (Indicate type and you may assign an expiration code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Committee payment to date on debt	9. Outstanding balance at close of this period (Less 8 above Item 6)
Debt to Corp? <input type="checkbox"/> Yes Debted to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>10-15-04</u> 6. Original Amount of Debt <u>\$ 3,000.00</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$ 300.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Entered: 1				
Debt to Corp? <input type="checkbox"/> Yes Debted to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>10-15-04</u> 6. Original Amount of Debt <u>\$ 2,100.00</u>	<u>2 1 2 1 900.00</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$ 100.00</u> <u>\$ 200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Entered: 2				
Debt to Corp? <input type="checkbox"/> Yes Debted to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>	4. Type <u>LOAN</u> 5. Date Debt Was Incurred <u>11-10-04</u> 6. Original Amount of Debt <u>\$ 300.00</u>	<u>2 1 2 1 900.00</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u> <u>1 1 2</u>	<u>\$ 0.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Entered: 3				
Page Number (Continuing debt) _____				<u>\$ 300.00</u>
Grand Total of all Schedules 1E _____ (Complete on last page of Schedule showing amounts owed by or to the committee)				

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

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I.D. Number 137832

2. Committee Name Committee to Elect Dean Reynolds

**This Schedule contains:**

a. Debts and obligations owed by or forgiven the committee		b. Debts and obligations owed to or forgiven by the committee.		
(Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>  If bank loan, name of endorser or guarantor: _____	4. Type <u>Loan</u> 5. Date Debt Was Incurred: <u>12-19-04</u> 6. Original Amount of Debt: \$ <u>3200.00</u>	<u>1/18/05 600.00</u> <u>2/12/05 1500.00</u> <u>3/10/05 1100.00</u> <u>1 1 3</u> <u>1 1 3</u>	\$ <u>3200.00</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
Debt #2 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>  If bank loan, name of endorser or guarantor: _____	4. Type <u>Loan</u> <u>1-4-05</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: \$ <u>315.45</u>	<u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u>	\$ _____	\$ <u>315.45</u> <input type="checkbox"/> FORGIVEN
Debt #3 Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp. MI 48036</u>  If bank loan, name of endorser or guarantor: _____	4. Type <u>Loan</u> <u>10-10-03</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: \$ <u>350.00</u>	<u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u> <u>1 1 3</u>	\$ _____	\$ <u>350.00</u> <input type="checkbox"/> FORGIVEN

Page 3 of 3 (Outstanding Debt)

Grand Total of all Schedules 1E

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

665.45

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

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Enter this total on line 11d "owed by" or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee ID Number 197352

2. Committee Name Committee to Elect Dean Reynolds

**THIS SCHEDULE CONTAINS:**

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor. <i>None</i>	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Include 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 9 minus Item 8)
Debt to: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> <u>10-19-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>100.00</u>	<u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u>		<u>100.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Enclosed: \$			
Debt to: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> <u>9-10-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>900.00</u>	<u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u>		<u>900.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Enclosed: \$			
Debt to: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes Owed to or by: <u>Dean Reynolds</u> <u>20040 White Oaks</u> <u>Clinton Twp MI 48036</u>	4. Type <u>LOAN</u> <u>11-8-08</u> 5. Date Debt Was Incurred: 6. Original Amount of Debt: <u>900.00</u>	<u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u> <u>11-8</u>		<u>900.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Enclosed: \$			

Page Subtotal (Outstanding debt)

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

1900.00

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

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

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I.D. Number

137332

2. Committee Name

CTE DEAN REYNOLDS

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: DEAN REYNOLDS 38150 WOODLEST CLINTON TWP MI 48036	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10-15-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 5000</u>	\$ \$ \$ \$ \$	\$	\$ <u>5000</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

5000 do

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

43,265 45

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

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



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137332

2. Committee Name CTE DEAN REYNOLDS

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>10/02/12</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>52</u>	5. Type of Fund Raising Activity  <u>Fall Fundraiser</u>	6. Address and Name (If any) of the place where the activity was held. <u>Floodz Grill at Fern Hill</u> <u>17600 Clinton River Road</u> <u>Clinton Township, MI 48038</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$3,830.00

8. Other Receipts \_\_\_\_\_

9. Gross Receipts (Add lines 7 and 8) \$3,830.00

10. Total Cost of Event \$708.00

(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 (%)
<u>CTE Dean Reynolds</u>	<u>50</u>	<u>50</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.