



**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: 4-12-12 to 7-22-12

1. Committee I.D. Number
138846

2. Committee Name
C.T.E. Stanley T. Grot

4. Candidate Last Name STANLEY T. GROT First Name T. M.I. G.

4a. Office Sought Including District # or Community Served (If applicable)
clerk - Shelby Twp.

4b. County of Residence
MACOMB

5. Committee's Mailing Address
11927 Hiawatha
Shelby Twp. Mi 48315

Area Code and Phone (586) 677-2002

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
SYLVIA J GROT
11927 Hiawatha
Shelby Twp. Mi. 48315

Area Code & Phone (586) 677-2002

7. Treasurer's Business Address
N/A

Area Code and Phone _____

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
N/A

Area Code and Phone _____

FILED
 12 OCT 17 PM 12:41
 MACOMB COUNTY CLERK
 MICHIGAN

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. 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 J. GROT, Sylvia J. Grot Date 10-16-12
Type or Print Name Signature

Candidate STANLEY T. GROT, Stanley T. Grot Date 10-16-12
Type or Print Name Signature



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

1. Committee I.D. Number 138846

2. Committee Name CTE Stanley to 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 6 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'</u> <u>48315</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>5-7-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 300</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>300</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: <u>— 11 —</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>5-7-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,000</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>1,000</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) 1,300

Grand Total of all Schedules 1E
(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.



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

1. Committee I.D. Number 138846

2. Committee Name CT. 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 6 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. <u>Date Debt Was Incurred:</u> <u>8-1-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>500</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: <u>— 11 —</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8-15-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 300</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>300</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: <u>— 11 —</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8-15-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>200</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 1,000
Grand Total of all Schedules 1E 2,300
(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

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