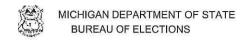


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

COVERPAGE					
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	10/21/16	to 07/20/17	
1. Committee I.D. Number		4. Candidate Last Name	Firs	t Name	M.I.
95910		Waterman	Deirdre		H
LOSSICOSCONON DE SINO		4a. Office Sought Including Dis	trict # or Communit	y Served (If applica	ıble)
2. Committee Name		Mayor of Pontiac			
Deirdre Waterman for M	ayor	4b. County of Residence OAI	KLAND	ţa.	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address		
312 Ottawa Dr.		Deirdre Waterman		_ &	
Pontiac, MI 48341		312 Ottawa Dr.		DE Y	20 AR
		Pontiac, MI 48341		Š	TEC TEC
				~ \	C S Dm
Area Code and Phone (248) 332-1579				8	A SK
If the address in this box is different from the commit mailing address on the Statement of Organization, r		(048) 50	20 5040	E	CH CO
be sent to this address by the filing official.		Area Code & Phone (248) 56			D - C
7. Treasurer's Business Address		Designated Record keeper Designated Record keeper)	s Name and Mailing		mmittee has a
312 Ottawa Dr.		Deirdre Waterman			Ö CE
Pontiac, MI 48341		312 Ottawa Dr.		R	& ENG
		Pontiac, MI 48341			× 57
		1 01111110, 1111 100 11			
				40	
Area Code and Phone (248) 568-5613		Area Code and Phone (248) 568-5613	W-000 - 1000 - 1000	
9. TYPE OF STATEMENT			9e. Dissolution	of Candidate Com	mittee
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:				y any outstanding debt his or her spouse is here
Pre-Election or Post-Election Statement relates to:			by discharged and	forgiven, and no lo	onger collectible from oustanding assets.
Primary	July Quart	erly		or has any oustan	
General	October Q	uarterly	Further, if the disse	olution cannot be g	ranted, that this be
Convention	M		considered a requi	est for the Reportin	g Waiver.
Special	9c. Annua	ll Statement ()		50	
School		Coverage Year	Effective	e date of dissolution	ĺ
	ad Amen	dment to Campaign Statement	100	A SECTION AND ADDRESS OF THE PARTY OF THE PA	_
Caucus	(Comp	blete Item 9a, 9b, 9c or 9e to te which Statement is being			Is must be reported on
	amend		Schedule 1B and	the Summary Page	fer.
Date of Election, Convention or Caucus					
08/08/17					
				K90	
10. Verification: I/We certify that all reasonable dilige my/our knowledge and belief the contents are true, a	ence was used accurate and co	in the preparation of this statem emplete.	ent and attached so	hedules (if any) an	d to the best of
Current Treasurer or Designated Record keeper Designated Record keeper	rman	lund The	termos	71	21/17
Type or Print Name		Signature		— Date —	
Candidate Deirdre Waterman		dundr Th	otems	Date	1/21/17
Type or Print Name		Signature		150	



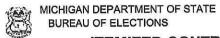
1. Committee I.D. Number

95910

SUMMARY PAGE CANDIDATE COMMITTEE

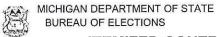
2. Committee Name Dev dre Waterman for Mayor

	OANDIDATE COMMITTEE			
	RECEIPTS		Column I This Period	Column II Cumulative this election cycle
288	3. Contributions		7 1824	
	a, Itemized (Schedule 1A - Column 6)	(3a.) \$	1,680.00	
	b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$_	NOT APPLICABLE	701111 0
	c. Subtotal of "Contributions"	(3c.) \$_		(18.)\$ /0,966.08
	4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	Ø	(19.) \$
18	5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	11,680.00	(20.) \$ 70, 466.02
82	IN-KIND CONTRIBUTIONS & EXPENDITURES		B	\sim
100	6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _		(21.) \$
8	7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _	Ø	(22.) \$
10	EXPENDITURES			
8	8. Expenditures		1000 07	
	a. Itemized (Schedule 1B, Column 6)	(8a.) \$	18366.01	-
	b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
	c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	6	11 208 77
100	9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	18,327,87	(23.) \$ 61,290.15
	INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
	10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>B</u>	
	b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$		
	(Add Line 10a + Line 10b)	(11.) \$	D	(24.)\$ 61,588.58
	DEBTS AND OBLIGATIONS	(11.) Φ	1 1	(24.) φ
	 Debts and Obligations Owed by the Committee (Schedule 1E) 	/12c \ e	6 588.58	
	STATE CHARGE CHARGE AND A CONTROL OF THE CONTROL OF	(12a.) \$		
L	b. Owed to the Committee (Schedule 1E)	(12b.) \$	ANCE 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) 	(13.) \$\((14.) + \((15.) = \((16.) - \((16.) \)	72 01 01	- 1
	17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)	3,758.99	



1. Committee I.D. Number 95910

CANDIDATE COMMITTEE 2. Committee Name	TOUT OF	winer or layou
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 Name & Address: 2805 Lang investors Lake 01 mm 148359 5. If over \$100.00 cumulative, please provide: Occupation Employer Retord Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 500 Click Here fo	\$ 560 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/28/17 Name & Address E. Lorrance Lizana 304 Payne NC. Pontac, MI 48341 5. If over \$100.00 cumulative, please provide: OccupationEmployer	\$ /00 Click Here fo	\$loo
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address: YES 4. Date of Receipt	\$ 1,000 Click Here fo	s <u>l 000</u> r Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
,	\$	\$
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	1600	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	



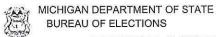
CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name

Dendre Wadener Ser Mayer

CANDIDATE COMMITTEE 2. Committee Name	1.01.0	100
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 7/9/2017 Name & Address: HUSSER HUSSER 1 8 09 0 Curtis Ct Liveria M 4 8 5 2 5. If over \$100.00 cumulative, please provide: Occupation Set Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 1,000 Click Here fo	s / O · · · · · · · · · · · · · · · · · ·
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/18/2017 Name & Address Antic Husselm 19070 (ushs Cl. Livonia, M.) 48/52 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$	\$o⇔o r Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/8/17 Name & Address: Mildrise Ellison 46 5 Eynch Fondas, 10 48342 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 30°° Click Here for	\$30 Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/18/17 Name & Address Cindy Cinda Cind	\$ /00 Click Here for	\$ <u>/</u> OU Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ______9 5910

7	1 1	1 ()
CANDIDATE COMMITTEE 2. Committee Name	endre h	aternan Lord
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? YES 4. Date of Receipt 7/8/17 Jame & Address: Gerald Glessen 1781 Blace House Block House Block #100.00 cumulative, please provide: Decupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100 Click Here	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/8/17 Iame & Address Lucy Pagne 1098 Fairway Dr. Pontiac, MI 48340 i. If over \$100.00 cumulative, please provide:	\$ 25 Click Here	\$ 25 for Memo Itemization
Decupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/18/17 Jame & Address: May Frances Bernest 1960 Statheona Dr. Defapit M1 48203 5. If over \$100.00 cumulative, please provide:	\$ 100	sloo for Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Name & Address Helen Bryant Solution of Receipt 7/19/17 Helen Bry	\$ /00 Click Here	\$for Memo Itemization
Business Address		
Business Address		

Page Subtotal

32500

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

Fund Raiser

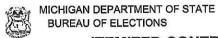
Loan from a person

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Page 3_{of}

Type of Contribution:

Direct



1. Committee I.D. Number

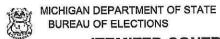
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SCHEDO	LE IA	. (1	1 1
CANDIDATE (COMMITTEE	2. Committee Name	levrolre w	stermen for Mo
Enter contributor's name and address. If c middle initial. Check box to indicate if cont Committee (PAC) Report <u>all</u> contributions	ribution is from a Political Comr	, enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? Name & Address: Pipe file Ca 20100 Nor Farmon fon 5. If over \$100.00 cumulative, please pro	thwestern the	1/2017	\$ 250 Click Here fo	\$ 250 or Memo Itemization
Occupation	_ Employer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	the for while Rd Hills, MI 48	20	\$/\&\&\Delta\omega\ome	\$or Memo Itemization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: Richard # 9 Share Fort = C Cocupation Business Address Type of Contribution: Direct	5 48346 ovide:	9/11/	\$ 50 Click Here fo	s 50
	Loan from a person	Fund Raiser		
3. Contribution #4 PAC Receipt? Name & Address Rick Her 860 Great	YES 4. Date of Re	ceipt 6/17/2017	s 25	\$_600 25
5. If over \$100.00 cumulative, please pro			Click Here fo	r Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	/ i = ~ n =	A.
		Page Subtotal	4255	

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

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Page _____of ____



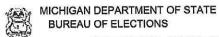
CANDIDATE COMMITTEE

1. Committee I.D. Number _____

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2 Committee Name	Denda	Watermenter Mayor

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 4/26/17	_	
Bobbie Holmes 1186 N. Perry St. Pontiac, m. 48340 5. If over \$100.00 cumulative, please provide:	\$ 500	\$ 50
Occupation Employer	Olick Field I	of Wichio Romization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/7/2017 Name & Address Mclody McGill	- 1) 	
47089 Dunsany Northustle, MI 48167	\$ 1000	\$ (, 000
1120x1.07e M1 48167		,
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Home naked Employer None		
Business Address		¥
Type of Contribution: Loan from a person Fund Raiser	3	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/17/2017 Name & Address: Stephen Hitch Cock 21557 Ingran Rd. Nov., M1 48375	1_ s_/60_	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here to	or Memo Itemization
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 6/1/20) Name & Address	7	
32533 Reportoed Berecly Hills, MI	\$ 560	\$500
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Co torde Employer Maddos	-	n welle lemzaten
Business Address 35 Hur on St, Rontrac, M1 4834	O	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	1,000	_
Grand Total of All Schedules (Complete on last page of Schedu	400 (Fig. 1)	
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CANDIDATE COMMITTEE

1. Committee I.D. Number

2, Committee Name

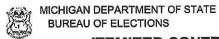
6. Amount 7. Cumulative for

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 6617 Name & Address: Acrold Herrer 2 TOI Auburn Bd Auburn Wills, F1 48326 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ /60 Click Here fo	\$ (60 r Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 Name & Address PAC Receipt? YES 4. Date of Receipt On at land With 7 107 Evalue Dr. Troy, Mi 48085	\$ 500	\$ 500
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation CEO Employer W. 17 1 ASSGC.		
Business Address 7 Berry, Portrac, MI 400/2		
Type of Contribution: Direct Loan from a person Fund Raiser	***************************************	
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt 4/3/17 C25 Coh Monahan 625 Coh Monahan 625 Fontiac MI 48341 5. If over \$100.00 cumulative, please provide:	\$ /60 Click Here for	\$ 100 Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		÷
3. Contribution #4 Name & Address Kyle West berg 3617 Oaks Dry Lake Orron, M1 48360	· 1,000	\$ 1,000
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation CEO Employer Flag Star Strond Theat Business Address 12 N Sagnaw, Pontrac WY 48312 Type of Contribution: Direct Loan from a person Fund Raiser	Click Flere for	Wellio itellization
Page Subtotal	1,700	
Grand Total of All Schedules 1A		

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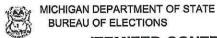


1. Committee I.D. Number 95910

line 3a of Summary

Page.

C	ANDIDATE COMMIT	ΓEE	2. Committee Name	Derrole	Waterna for r
middle initial. Check bo	e and address. If contribution is x to indicate if contribution is fro rt <u>all</u> contributions regardless of	m a Political Committe	nter last name, first name, se or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
2	PAC Receipt? YES PAC Receipt? YES PAC Receipt? YES PAC Receipt? YES	4. Date of Receipt	- U/ E/II	\$ 500	\$ 500
Occupation Business Address Type of Contribution:	ulative, please provide: Character Employer Direct Loan from	ed Lake of	Fund Raiser	Click Here fo	or Memo Itemization
5. If over \$100.00 cum	PAC Receipt? TYES POR Ca Der POBOX GUI Bloom Field Hill Whate Employer	L, M148		s), ooc	\$sor Memo Itemization
Type of Contribution:	Direct Loan fro	m a person	Fund Raiser		
·	PAC Receipt? YES J. 2. Bryan 4845 Cherry Lest Bloom ulative, please provide: Employer	Cell, MI		\$ COO	\$
Business Address Type of Contribution:	Direct Loan fro	om a person	Fund Raiser		
Occupation	PAC Receipt? YES Rede(a M 10095 La d Hughars) - on l ulative, please provide: Emplo	4. Date of Receipt 103 e S Salle Bli Louds, Ml	0/0/1	\$ 750 Click Here fo	\$ 250 or Memo Itemization
Business Address Type of Contribution:	Direct Loan fro	om a person	Fund Raiser		
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CANDIDATE COMMITTEE

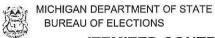
ac gin 1. Committee I.D. Number

	0	110	
rdr	Dil	Apmon	For Mana

2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 7. Cumulative for 6. Amount Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) 3. Contribution #1 PAC Receipt? 4. Date of Receipt Name & Address: or min ham, MI 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Maragemployer **Business Address** Type of Contribution: Fund Raiser Direct Loan from a person 4. Date of Receipt 3. Contribution #2 PAC Receipt? Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. **Business Address Fund Raiser** Type of Contribution: Direct Loan from a person 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt Name & Address: Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer Occupation_ **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? 4. Date of Receipt Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer **Business Address** Fund Raiser Type of Contribution: Direct Loan from a person Page Subtotal

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

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1. Committee I.D. Number

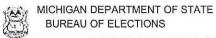
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	CANDIDATE COMMITTEE	2, Committee Name	peradre was	frman der Mayor
middle initial. Che	name and address. If contribution is from an individual, e ck box to indicate if contribution is from a Political Commit Report <u>all</u> contributions regardless of amount.		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 Dirdre Water man 312 Ottowa Dr Pontiac MI 48341	1 3/2/17	<u>\$ 3000</u>	s 43,338.5
5. If over \$100.00	cumulative, please provide:		Click Here fo	or Memo Itemization
Occupation	Employer TOX	rac		of Memo Itemization
Business Address	49450 Woodward Ave	Portice, MIL	18342	
Type of Contributio	on: Direct Loan from a person	Fund Raiser		
3. Contribution #2	PAC Receipt? YES 4. Date of Receip	1 3/2/17		
Name & Address	Derodre Waterman 312 Othera Dr. Pontrac MI 48341		<u> 500</u>	\$ 43,838.5
5. If over \$100.00	cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation	Mayor Employer Ton	- bac		
Business Address _	47450 Doolward, Pont	rac, M14834	12	
Type of Contribution	n: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt? YES 4. Date of Receipt? YES 4. Date of Receipt? Westerners 312 OHana D341 Cumulative, please provide:	0/0/1/	\$ 250 Click Here for	\$ <u>44, 088,</u> 5 r Memo Itemization
Occupation /	Tayor Employer Pont	اثم د		
Business Address Type of Contribution	47450 Dadward, Pontrac,	M 1 4 8 342 Fund Raiser	8	- va
3. Contribution # 4 Name & Address	PAC Receipt? YES 4. Date of Rece	lpt		
			\$	\$
5. If over \$100.00	cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribut		Fund Raiser		
165		Page Subtota	al 3,750 000	-
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Grand Total of All Schedules 1A (Complete on last page of Schedule)

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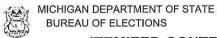


CANDIDATE COMMITTEE

1. Committee I.D. Number 95910
2. Committee Name Deiche Waterman for Mayor

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 7/19/2017		
Name & Address: Jeannette Kotila		
O Colora City		
2113 Harned 10,05	11.	150
Trou, M1 48085	\$ 50	\$ 1 3 0
5. If over \$100.00 cumulative, please provide:		
	Click Here for	or Memo Itemization
Business Address 30100 Tete, raph Rd, Bizghan Kroms M	1480LS	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/18/2017		
Name & Address Morgan Goodin		
1 1019 and Op ond in	0 -	
7799 Stee VIC Chase	· '250	s 250
11 1 1 1 1 2 7 7	\$	\$ 200
Haland ML 4850		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
1 1 2 2		

Business Address 660 Woodward Ave, Detroit MI 45	8274	
Business Address 660 Wood War of 104, 1247 657	, -	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt		
Name & Address:		
tadricia Dewald	~	22
	. 750	, 250
701 Orchard View	\$	\$ 2 / 0
Rayal Oak, MI 48613		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation 6. Developer Employer VOITE		
F . (1) (1) (1) (1) (487)	26	
Dadition Transfer De Contraction de	24	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 7/18/17		
Name & Address		
Kada Hendiran		
Thur the state of	9	g =
7603 Wooklyn St. 1701206	. 100	100
Dal 1 mar 11077/	\$ 100	\$ 100
1-640x18/ 1/11 4816		1 23
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Director Director County	SHOK HOLD TO	monto nonneauon
Occupation Employer Wayne		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	70,00	
i age Subiotal	150	-
Grand Total of All Schedules 1A	11877 - 0900	
(Complete on last page of Schedule)	Entra Mile 1 de la	_
	Enter this total on line 3a of Summary	
Page of l	Page.	



CANDIDATE COMMITTEE

		- 10
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 6/5/17 Name & Address: Robert Waun 3051 Kenrock	\$ 560	\$ 500
5. If over \$100.00 cumulative, please provide: 48320	Click Horo f	or Memo Itemization
Occupation CEO Employer Tace Communities	Click Here II	or Metrio Remization
Business Address 15 Gy Taye Direct Coan from a person V Fund Raiser	7	
Name & Address		
631 (esar Chavet	\$ 1,000	\$ 1,000
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation CEG Employer Lee Contracting	E CONTRACTOR CONTRACTOR	
Business Address 63 (eBC Chavet, Vontia, MI 4834	2	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: The provide of Receipt (1) The provide of Receip	\$ 0-ext Click Here for	s 1000 or Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt		
Name & Address	\$. \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or 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) Page	Enter this total on line 3a of Summar Page.	y



ITEMIZED EXPENDITURES

91911

SCHEDULE 1B	Committee I. D. Number)	_
CANDIDATE COMMITTEE 2. 0	Committee Name Deirare Wa	terman t	or Mayor
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name of Morgan Chase Address Po Boo 659754	Purpose: Bank fee)0/30/17 Date	\$ 15
San Antonio, Tx 78265 [Fund Raiser	Click I Check box if this expenditure is payment of debt or obligation reported on previous statement	Here for Memo I	temization Type
Expenditure #2			
Name of Moga Chare Address 86 Box 689754	Purpose: Bank fee	11/30/17 Date	\$ 15
San Arterio, TX 78 Clas	Click I Check box if this expenditure is payment of debt or obligation reported on previous	lere for Memo I	temization Type
Fund Raiser	statement		
Name of Mr Gan Charl Address Po Box 6 59754	Purpose: Bank fee	12/39/17 Date	\$ 15
5 11 1 TX78715	Click H	lere for Memo II	emization Type
San Antonso, TX 78265 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	11.2017.01		
Name of Mogan Chase Address 80 Box 654754	Purpose: Bank fee	1/30/17 Date	s 15
	Click H	ere for Memo It	emization Type
Dan Andonis, 1x 18265 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name of Morgan Chase Address . Ro Box 659754	Purpose:	7/30/17 Date	\$ 15
Name of Morgan Chase Address PO BOX 659754 San Antonio, TX 78265 Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo II	emization Type
	Subtot	al this page	7500
	Grand Total of all S (Complete on last page	AND THE PERSON NAMED OF TH	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

95910	

CANDIDATE COMMITTEE 2. Co	Deirdre Waterman for I	Mayor	
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name of Morgan Chase Address Po Box 659754	Purpose: Banlefte Click H	Date	\$ 200.00 temization Type
San Antonio, Tx 78265 [Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	2.	
Expenditure #2 Name of Margan Chase Address PE Box 659754	Purpose: Bank fee	4/30/17 04122/15 Date	15.00 \$ 50.00
Jan Andonio Tx 78765 Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo I	temization Type
Expenditure #3 Name JP Mussan Chase Address Ro Box 659754	Purpose: Bank fer	5/30/1 07/28/05 Date	7 \$ 2 5.00
San Andonio Tx78265 [Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo I	temization Type
Expenditure #4 Name JP Morgan Chase Bank Address	Purpose: Monthly Account Fee	(6/30)17 023445 Date	s <u>15.00</u>
PO Box 659754 San Antonio, TX 78265 Fund Raiser	Click F Check box if this expenditure is payment of debt or obligation reported on previous statement		Itemization Type
Expenditure #5 Name Address	Purpose:	08/25/45 Date	\$ 1 84 ,25
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		Itemization Type

Subtotal this page

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

\$678564

Enter this total on line 8a of Summary Page



SCHEDULE 1B

1. Committee I. D. Number

	ac	910	
	10	110	
7.		1 1	1

CANDIDATE COMMITTEE 2.0	committee Name Devote Paterman to Mayo
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name Waterman Promos	Purpose: Letterheal & Envelopee Date \$507.74
Address 17134 Lyonny Ave	
Det 1007 ML 48721	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #2	statement
Name Topics But	Purpose: Rembursont for products
Address 10 6 Troyers 57. Rondiac, M1 48342	
Pontiac, MI 48592	Click Here for Memo Itemization Type Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous
Expenditure #3	
Name Earth to Earth	11/./2 - 22
Address III N. Perry St. Pondray MI 48342	Purpose:
O 1 48342	Click Here for Memo Itemization Type
Tonorac) // 11 10012	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #4	
Name Mona Cisa Address Telegrand	Purpose: Event Support Date \$5000
Address 262 Telegraph	Click Here for Memo Itemization Type
- Pontiac, MI 48341	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Name Michigen Domocratic Party Address 606 Town Send Lansing, MI 48933	MDR Men 4/26/17 \$ 5000
Address 606 lown Send	Purpose: 111) 1 10m Detsh Date
(ansiry) 10/32	Click Here for Memo Itemization Type Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
	Subtotal this page 3 1,077.74

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

Enter this total on line 8a of Summary Page

Page 3 of 7



ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number 9571

CANDIDATE COMMITTEE 2. C	Committee Name Derror / Litemon for Mayor
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	//
Name Lawson Arming Address	Purpose: Permany Postage Date Date
1095 W. Wolombia	Click Here for Memo Itemization Type
Fund Raiser Creek, MI 49615	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	1 /
Name Lawson Bontons Address 685 D. Columbia	Purpose: Lalk Br (2 C1 Literator \$ 1416.00
Battle Corek, M149615	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser Expenditure #3	statement
	_ 21 /
Address HO Dox 871694	Purpose: Refusal Check 3/8/17 \$ 50
	Click Here for Memo Itemization Type
Canton, M) 48187	Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #4	statement
Expenditure #4 Name And Kumar for Congress Address 2450 Walton Blud Chapter M 48309	Purpose: Refund Check 3/8/17 \$ 150
Rochester, M 48309	Click Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #5	
Name	- E
Address	Purpose: \$
	Click Here for Memo Itemization Type
Fund Ralser	Check box if this expenditure is payment of debt or obligation reported on previous statement
	Subtotal this page 54 448.05
	Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Page 4 of 7



SCHEDULE 1B

Committee I. D. Number

SCHEDULE 1B	Ommittee I. D. Ivamber	0 1
CANDIDATE COMMITTEE 2. C	ommittee Name Derrac Was	temon to May
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Unique food Moragement Address 248 5. Telegraph	Purpose: Fundraizer Cotemin	5/3/17 \$ 500
Address 248 5. Telegraph		·
Pondray MI 48341	Click He	ere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name Riker Properties Address 35 Huron St.	Purpose: May-August Rent	5/5/17 \$ j 000 000
Address 35 Huron 2t.		
Portiac, M1 48342	Click He	ere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous	
	statement	
Expenditure #3		1 - 1
Name Johns Barres Address 3040 Adams Rd	Purpose: Campassa Staff	5/17 \$ 600 Date
1 1/4 1/6/20	Turpose.	
Auburn Hills, MI 4832	Click He	ere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #4		
Name Scanne Wright Address 17015 New HampShire	51.05	-/4/17 s 600
Address 17015 New Hampohite	Purpose: Campasya Staff	Date
Southfield, MI 48075	Click He	ere for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
	Cistofficial	
Expenditure #5 Name Water Man Printing		15/2 7
Address 17134 Myomong Hill	Purpose: Flyes	Date \$ 16.32
Detroit, My 48201	Click He Check box if this expenditure is payment of	ere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
	Subtota	al this page \$2 771 2-

Subtotal this page

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

52,776.32

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

95910

CANDIDATE COMMITTEE 2. C.	ommittee Name	aternos for Mayo
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Jo Am Wright	Purpose: Canlaign Staff	65/17 \$520
Name Jo Am Wright Address 17015 New Hampshan	r diposo.	Here for Memo Itemization Type
Southfield, M148075	Check box if this expenditure is payment of	iore for morne remized in 1999
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		(1)
Name Same Barne 9	Purpose: Canpais Staff	0/5/17 \$ 570 Date
Address 3040 Adams Rd	O .	Here for Memo Itemization Type
Auburn Hills, MI 48326	, victor (100 pt)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3		
Name Sagon Bavel		6/5/2 28A
	Purpose: Reinbursenent Pon	Date \$ 500
Address 106 Tregent Dt.		Here for Memo Itemization Type
Pontrac, M1 48 342	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #4		111
Name AL William S.	Trail 1) 1	6/17/17 \$ 1400
Address 18324 Fairfield	Purpose: Fit of M6CK	Date
Detast, M148221	Click I	Here for Memo Itemization Type
Lear 810)	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #5		11
Expenditure #5 Name AL Williams Address 18324 Fair Freld Ded 1607, MI 48221	Purpose: Field Work	6/30/17 \$ 2,300
MI 48721	Click	Here for Memo Itemization Type
Ded (60T)	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	1.0
	Subto	otal this page \$5120,00
	Grand Total of all	Schedules 1B

(Complete on last page of Schedule) En

Enter this total on line 8a of Summary Page

Page 6 of



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

CANDIDATE COMMITTEE 2. C	ommittee Name Dev dre Waterman dor Mayo
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	// .
Name Jo Ann Wight Address 17-15 (1) 2 Hours	Purpose: Campage Shaff Date \$ 500
Address 17015 New Hampshire	Click Here for Memo Itemization Type
Southfield, M48075	Check box if this expenditure is payment of debt or obligation reported on previous statement
Expenditure #2	/ /
Name Name Address 15627 McNichols Kd. Detait, M148235	Purpose: Flyers 9/30/17 \$ 20000
Detait M1 48235	Click Here for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous
Expenditure #3	statement
Name Some Barnes	C SIDD 6/30/17 \$ 500
Address 3040 Adams Rd	Purpose: Date Date
Auburn Hills MI 48376	debt or obligation reported on previous
Expenditure #4	statement
Name Sawich and Jons	7/u/zo7 \$ 1213.70
Address 1521 Caydayate	Purpose: A Dign
_ Dedroit, M1 48216	Click Here for Memo Itemization Type Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Address (45 W. Columbia	Purpose: BC 12 to 9 Postage Date \$ 3,357 0
Battle Creek, MI 99015	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
	Subtotal this page \$4765.70

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

Enter this total on line 8a of Summary Page

Page _____of___

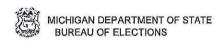


05010

DEBTS AND OBLIGATIONS 1.0	Committee I.D. Number	U		
SCHEDULE 1E	Deirdre W	/aterman for May	or	
CANDIDATE COMMITTEE 2. C	committee Name			
This Schedule Itemizes:			· ·	
a ✓Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or urpose checked.)	forgiven by the cor	nmittee.
Name and Malling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an	4. Type of Obligation (Description) 5. Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus)
Incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	6. Indicate original amount of debt			Ìtem 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	12/23/14 \$ 1,000.00		
Deirdre Waterman	5, Date Debt Was Incurred;	06/15/15 \$ 2,000.00		
312 OTTAWA DR.	05/23/13	\$	æ:	
PONTIAC, MI 48341	6. Original Amount of Debt		\$ 3,000.00	\$_3,000.00
	s 6,000.00	\$\$		FORGIVEN
		\$	K J	. 🗀
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$	*)	
Deirdre Waterman	5. Date Debt Was Incurred;	\$		
312 OTTAWA DR.	6/27/2013	\$	1,56	
PONTIAC, MI 48341	6. Original Amount of Debt:		\$	\$_9,000.00
	\$_9,000.00	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman	5. Date Debt Was Incurred;	\$		
312 OTTAWA DR.	8/12/13	\$.5	
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$	\$_1,500.00
	\$_1,500.00			FORGIVEN
		\$		
if bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
*		Page Subtotal	(Outstanding debt)	\$13,500.00
(C	omplete on last page of Schedule s	Grand Total o showing amounts owed by o	of all Schedules 1E r to the committee)	F. 1 10.1 - 1 1.
				Enter this total

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.

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



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

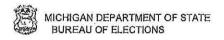
95910

Deirdre Waterman for Mayor

CANDIDATE COMMITTEE 2. C	Committee Name				
This Schedule itemizes:					
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.)					
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	Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	\$			
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred: 09/04/13	<u> </u>			
PONTIAC, MI 48341	6. Original Amount of Debt:	<u> </u>	\$ 0.00	\$_3,500.00	
	\$_3,500.00	\$		FORGIVEN	
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$			
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred: 11/6/13	\$	7		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$	\$_2,500.00	
	\$_2,500.00	\$ \$		FORGIVEN	
If bank loan, name of endorser or guarantor:			ount Endorsed: \$_		
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$			
Deirdre Waterman	5. Date Debt Was Incurred:	\$	· ·		
312 OTTAWA DR. PONTIAC, MI 48341	1/29/14 6. Original Amount of Debt:	\$	•	s 2,950.28	
•	\$ 2,950.28	\$	Φ	FORGIVEN	
		\$			
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_		
		Page Subtotal	(Outstanding debt)	\$8,950.28	
(C	omplete on last page of Schedule s	Grand Total of the following amounts owed by o	of all Schedules 1E r to the committee)		
Enter this total on line 12a "owed					

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.

by"" or line 12b "owed to" of the Summary Page



95910 1. Committee I.D. Number

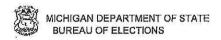
SCHEDULE 1E

Deirdre Waterman for Mayor

CANDIDATE COMMITTEE 2.	Committee Name				
This Schedule itemizes:		980		***************************************	
a Debts and obligations owed by or forgiven the co	mmittee OR b. Debts	s and obligations owed <u>to</u> or rpose checked.)	forgiven by the cor	nmittee.	
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 	Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	<u> </u>			
Deirdre Waterman 312 OTTAWA DR. PONTIAC, MI 48341	5. <u>Date Debt Was Incurred</u> : 2/10/14 6. Original Amount of Debt	\$ \$	\$ 0.00	\$_800.00	
	\$_800.00	<u> </u>		FORGIVEN	
If bank loan, name of endorser or guarantor:	***	Amo	ount Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$			
Deirdre Waterman 312 OTTAWA DR. PONTIAC, MI 48341	5. <u>Date Debt Was Incurred</u> : 2/26/14 6. Original Amount of Debt:	\$ \$	2	s 1,200.00	
T GITTING, INIT 100 TT	\$ 1,200.00	<u>\$</u> \$		FORGIVEN	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$		
Debt #3 Corp? Yes Owed to or by: Deirdre Waterman 312 OTTAWA DR.	4, Type; Loan 5. Date Debt Was Incurred;	\$	33H 2.113017004. \$4		
PONTIAC, MI 48341	6. Original Amount of Debt: \$ 1,500.00	\$ \$	\$	\$ 1,500.00 FORGIVEN	
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_		
		Page Subtotal	(Outstanding debt)	\$3,500.00	
(Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) Enter this total				

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.

by"" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

95910

SCHEDULE 1E	Deirdre W	aterman for May	or ·	
CANDIDATE COMMITTEE 2. C	ommittee Name	atormar for may		
This Schedule itemizes:		,		
a Debts and obligations owed by or forgiven the com (Cher	mittee OR b. Debt ck elther a or b. Use only for the pu	s and obligations owed <u>to</u> or urpose checked.)	forgiven <u>by</u> the cor	nmittee.
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	Outstanding Balance at close of this period (item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR. PONTIAC, MI 48341	5. Date Debt Was Incurred: 2/2 \$/14 6. Original Amount of Debt: \$ 3,000.00	\$ \$ \$	\$ 0.00	\$_3,000.00
If bank loan, name of endorser or guarantor:	**************************************	Amo	ount Endorsed; \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 4/28/2014	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$ 0.00	\$ 4,000.00
	\$_4,000.00	\$	NO 92 ***********************************	FORGIVEN
If bank loan, name of endorser or guarantor:			·	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$	ount Endorsed: \$	
Deirdre Waterman	5. Date Debt Was Incurred:	s		
312 OTTAWA DR.	5/9/14	•		
PONTIAC, MI 48341	6. Original Amount of Debt:		\$ 0.00	\$_10,000.00
	\$ 10,000.00	<u> </u>	•	FORGIVEN
		\$	*	
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$17,000.00
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.				



1. Committee I.D. Number

95910

SCHEDULE 1E

2. Committee Name
Deirdre Waterman for Mayor

CANDIDATE COMMITTEE ***	Sommittee Name			
This Schedule itemizes:	75			
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Debt ack either a or b. Use only for the pu	s and obligations owed <u>to</u> o rpose checked.)	r forgiven by the con	nmittee.
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? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5, <u>Date Debt Was Incurred</u> : 07/21/14	\$ \$	0.00	¢ 200.00
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$ 0.00	\$_200.00
If bank loan, name of endorser or guarantor:		\$Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 8/28/2014	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$ _0.00	\$_400.00
×	\$ 400.00	\$ \$	9	FORGIVEN
If bank loan, name of endorser or guarantor:			nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman	5. Date Debt Was Incurred;	\$		
312 OTTAWA DR. PONTIAC, MI 48341	9/17/2014 6. Original Amount of Debt:	\$	\$ 0.00	s 200.00
and the same and t	\$_200.00	\$	Ψ	FORGIVEN
		\$	•	
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$800.00
(0)	Complete on last page of Schedule s	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	
			- 2 2	Enter this total on line 12a "owed

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.

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

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1. Committee I.D. Number

95910

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Deirdre Waterman for Mayor

CANDIDATE COMMITTEE 2.0	ommittee Name			*
This Schedule itemizes:		A.F.		•
a Debts and obligations owed by or forgiven the com	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o	r forgiven by the con	nmittee.
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? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred:	\$		
PONTIAC, MI 48341	11/19/14	<u> </u>	\$ 0.00	s 600.00
	6. Original Amount of Debt:	\$	J	
	\$ 600.00	\$\$	-	FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$.		
Deirdre Waterman	5. Date Debt Was Incurred:	<u> </u>	**	
312 OTTAWA DR. PONTIAC, MI 48341	12/24/2014 6. Original Amount of Debt:	\$	0.00	e 91.63
1 ON 11AC, WII 40041	04.00	\$	\$ 0.00	\$ 01.00
	\$ <u>91.63</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Ţype: Loan	\$		
Deirdre Waterman	5. Date Debt Was Incurred:	\$		
312 OTTAWA DR.	12/30/2014	\$		0.000.00
PONTIAC, MI 48341	6. Original Amount of Debt	\$	\$_0.00	\$ 2,000.00
	\$_2,000.00			FORGIVEN
if bank loan, name of endorser or guarantor:		Aı	nount Endorsed: \$_	
				¢2 c04 c2
		Page Subtotal	(Outstanding debt)	\$2,691.63
(Co	omplete on last page of Schedule s	Grand Total showing amounts owed by t	of all Schedules 1E or to the committee)	-
Enter the on line by "" or I 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. Summa				



1. Committee I.D. Number

95910

SCHEDULE 1E

Deirdre Waterman for Mayor

CANDIDATE COMMITTEE 2. C	ommittee Name	atorinari for iviay				
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.)						
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	Outstanding Balance at close of this period (Item 6 minus Item 8)		
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	 \$				
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred: 02/02/15	\$	1			
PONTIAC, MI 48341	6. Original Amount of Debt	\$	\$ 0.00	\$_500.00		
	\$_500.00	\$	*	FORGIVEN		
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed; \$			
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$				
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred: 3/4/2015	 \$				
PONTIAC, MI 48341	6. Original Amount of Debt:	\$ \$	\$ 0.00	\$_750.00		
	\$ 750.00	\$	· =	FORGIVEN		
If bank loan, name of endorser or guarantor:	- Anne Carlotte Control Control	Am	ount Endorsed: \$_			
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	s				
Deirdre Waterman	5, Date Debt Was Incurred:	\$				
312 OTTAWA DR.	3/4/2015	<u> </u>		100.00		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$_0.00	\$_100.00		
	\$_100.00	\$		FORGIVEN		
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_			
		Page Subtotal	(Outstanding debt)	\$1,350.00		
(C	omplete on last page of Schedule s	Grand Total on the Grand Total of the Grand Total o	of all Schedules 1E or to the committee)	F-4-101-7-1		
				Enter this total on line 12a "owed by"" or line 12b		

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.

"owed to" of the Summary Page



1. Committee I.D. Number

95910

SCHEDOLE IE		Deirdre Waterman for Mayor	
	2. Committee Name	Delitie Waternan for Mayor	
CANDIDATE COMMITTEE	2, Committee Name		

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the co	mmittee OR b. Debt neck either a or b. Use only for the pu	s and obligations owed <u>to</u> or prose checked.)	r forgiven <u>by</u> the cor	nmittee.
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? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 05/05/15	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$ 0.00	\$_2,589.14
If bank loan, name of endorser or guarantor:		\$Amo	I ount Endorsed: \$ —	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 5/11/2015	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$_0.00	\$_500.00
	\$_500.00	\$ \$		FORGIVEN
If bank loan, name of endorser or guarantor:		Arr	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 5/19/2015	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$ \$	\$_0.00	\$_1,200.00
	<u>\$_1,200.00</u>			FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$4,289.14
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
Enter this total				

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.

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

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1. Committee I.D. Number

95910

SCHEDULE 1E		Deirdre Waterman for Mayor	
CANDIDATE COMMITTEE	2. Committee Name		
his Schedule Itemizes			

CANDIDATE COMMITTEE				
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the co	ommittee OR b. Debt heck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven by the con	nmittee.
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	Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4, Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 05/19/15	<u> </u>	2000	s 100.00
PONTIAC, MI 48341	6. Original Amount of Debt: \$100.00	\$	\$ 0.00	\$_100.00
If bank loan, name of endorser or guarantor:		\$Amc	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type; Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 5/20/2015	\$		
PONTIAC, MI 48341	6. Original Amount of Debt: \$ 1,805.00	\$ \$	\$ 0.00	\$_1,805.00
	\$_1,805.00	\$	х	FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	·\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 6/15/2015	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$\$	\$_0.00	\$_500.00
	\$ <u>500.00</u>	\$	*	FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
	=	Page Subtotal	(Outstanding debt)	\$2,405.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
				Enter this total

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.

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



1. Committee I.D. Number

95910

SCHED	ULE 1E
CANDIDATE	COMMITTEE

2. Committee Name Deirdre Waterman for Mayor

CANDIDATE COMMINITTEE				
This Schedule itemizes:	()Democratical			
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.)				
Name and Malling 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	Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. Date Debt Was Incurred:	\$		
PONTIAC, MI 48341	04/12/16 6. Original Amount of Debt		\$ 0.00	\$_2,000.00
	\$ 2,000.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman 312 OTTAWA DR.	5. <u>Date Debt Was Incurred</u> : 4/12/2016	\$		
PONTIAC, MI 48341	6. Original Amount of Debt:	\$ \$	\$ _0.00	\$_761.30
	{\$} 761.30	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Deirdre Waterman	5. Date Debt Was Incurred:	<u> </u>		
312 OTTAWA DR.	4/20/16	<u> </u>	0.00	2 504 22
PONTIAC, MI 48341	6. Original Amount of Debt:	\$	\$_0.00	\$ 2,591.23
	\$_2,591.23	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$5,352.53
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
Enter this total				

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.

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

Page of



1, Committee I.D. Number **SCHEDULE 1E** 2. Committee Name **CANDIDATE COMMITTEE** This Schedule itemizes: a Debts and obligations owed by or forgiven the committee Debts and obligations owed to or forgiven by the committee. OR b. (Check either a or b. Use only for the purpose checked.) 4. Type of Obligation 3. Name and Mailing Address of person, vendor or 7. Date and amount of 8. Cumulative 9. Outstanding financial institution to whom debt is owed. (Description) each payment payment to Balance at close 5. Indicate date debt was of this period date on debt Check box to indicate whether debt is owed to an (Item 6 minus incurred incorporated business. If debt is a bank loan, please 6. Indicate original amount Item 8) provide information regarding the endorsers or of debt guarantors, if any. Debt #1 Corp? par Owed to or by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 \$ Owed to or by: 6. Original Amount of Debt: \$ **FORGIVEN** \$ If bank loan, name of endorser or guarantor: Amount Endorsed: \$_ Debt #3 Corp? Owed to or by: Amount of Debt: **FORGIVEN**

Page Subtotal (Outstanding debt)

Amount Endorsed: \$

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.

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If bank loan, name of endorser or guarantor:

FUND RAISER SCHEDULE 1F

1. Committee I.D. Number CANDIDATE COMMITTEE 2. Committee Name - USE A SEPARATE SHEET FOR EACH EVENT -4. Number of Individuals Attending 3. Date Event Was Held 5. Type of Fund Raising Activity 6. Address and Name (If any) of the or Participating (whichever is place where the activity was held. greater) 7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) Check if event was a joint fund raiser and complete the following: Co-Sponsor(s) Contribution Split **Expenditure Split** (%) (%)The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the

period covered by the Campaign Statement.

Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



FUND RAISER SCHEDULE 1F

CANDIDATE COMMITTEE 2. Committee Name - USE A SEPARATE SHEET FOR EACH EVENT -4. Number of Individuals Attending 6. Address and Name (If any) of the 3. Date Event Was Held 5. Type of Fund Raising Activity or Participating (whichever is place where the activity was held. greater) 7. Total Contributions 8. Other Receipts 00 9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) 11. Check if event was a joint fund raiser and complete the following: Co-Sponsor(s) Contribution Split **Expenditure Split** (%)(%) The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement. Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions

Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

1. Committee I.D. Number

Summary Page.