



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE

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: 04/20/20 to 07/19/20

1. Committee I.D. Number

97460

2. Committee Name

JEFFREY NUTT FOR OAKLAND COUNTY EXECUTIVE COMMITTEE

4. Candidate Last Name

NUTT

First Name

JEFFREY

M.I.

G

4a. Office Sought Including District # or Community Served (If applicable)

OAKLAND COUNTY EXECUTIVE

4b. County of Residence OAKLAND

5. Committee's Mailing Address

1631 LEXINGTON DRIVE
TROY, MI 48084

6. Treasurer's Name & Residential Address

CHARLES ROMAELLA
3189 YORK ROAD
ROCHESTER HILLS, MI

Area Code and Phone (248) 220-1501

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

Area Code & Phone (248) 632-9852

7. Treasurer's Business Address

3189 YORK ROAD
ROCHESTER HILLS, MI

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone (248) 632-9852

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ Special

☐ School

☐ Caucus

Required ONLY if candidate is not on the ballot for the current year:

☐ July Quarterly

☐ October Quarterly

9c. ☐ Annual Statement () Coverage Year

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

Date of Election, Convention or Caucus

08/04/20

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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 CHARLES ROMAELLA

Type or Print Name

Charles Romaella

Signature

Date

07/21/2020

Candidate JEFFREY NUTT

Type or Print Name

Jeffrey D. Nutt

Signature

Date

07/21/2020



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 97460

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name JEFFREY NUTT FOR OAKLAND COUN

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>18250</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>18,250.00</u>	(18.) \$ <u>18,250.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u></u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>18,250.00</u>	(20.) \$ <u>18,250.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u></u>	(21.) \$ <u></u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u></u>	(22.) \$ <u></u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>14,882.88</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>106.85</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>14,989.73</u>	(23.) \$ <u>14,989.73</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>18000</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>18,250.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>18,250.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>14,989.73</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>3,260.27</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 97460

2. Committee Name JEFFREY NUTT FOR OAKLAND CC

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>05-01-2020</u>	
Name & Address: NUTT JEFFREY G 1631 LEXINGTON DR. TROY, MI 48084		\$ <u>5500</u>	\$ <u>5500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>1631 LEXINGTON DR.</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemizat	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06-23-2020</u>	
Name & Address: NUTT THOMAS J 723 E. HIGH RIDGE RD. ROSELLE, IL 60172		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> 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 Itemizat	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07-08-2020</u>	
Name & Address: NUTT JEFFREY G 1631 LEXINGTON DR. TROY, MI 48084		\$ <u>12500</u>	\$ <u>18000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>1631 LEXINGTON DR. TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemizat	
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 Itemizat	

Page Subtotal

1

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

18250

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B**

1. Committee I, D. Number 97460

CANDIDATE COMMITTEE

2. Committee Name JEFFREY NUTT FOR OAKLAND COUNTY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ROGUE STRATEGY GROUP Address 1410 Fair Oaks Court, East Lansing MI 48823 <input type="checkbox"/> Fund Raiser	Purpose: <u>CONSULTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05-18</u> Date	\$ <u>4500</u> Click Here for Memo Itemiz
Expenditure #2 Name THE DATA GROUP Address 425 Avalon Park S Blvd Orlando, FL 32828 <input type="checkbox"/> Fund Raiser	Purpose: <u>MARKETING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07-13</u> Date	\$ <u>3455</u> Click Here for Memo Itemiz
Expenditure #3 Name SENDGRID Address 110 William Street, Suite 1700 New York, NY 10038 <input type="checkbox"/> Fund Raiser	Purpose: <u>MARKETING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07-16</u> Date	\$ <u>246.23</u> Click Here for Memo Itemiz
Expenditure #4 Name ROGUE STRATEGY GROUP Address 1410 Fair Oaks Court, East Lansing MI 48823 <input type="checkbox"/> Fund Raiser	Purpose: <u>CONSULTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07-08</u> Date	\$ <u>6000</u> Click Here for Memo Itemiz
Expenditure #5 Name DONAHUE ADVERTISING Address 11205 Helber Rd., Logan, Ohio 43138 <input type="checkbox"/> Fund Raiser	Purpose: <u>SIGNAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06-26</u> Date	\$ <u>581.65</u> Click Here for Memo Itemiz

Subtotal this page	14,782.88
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 97460
2. Committee Name JEFFREY NUTT FOR OAKLAND COUNTY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>SADEER FARJO S.</u> Address <u>34680 Huntley Dr. Apt. K-34 Sterling Heights,</u> <u>MI 48312</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PHOTOGRAPHY</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06-16</u> Date	\$ <u>100</u>
Expenditure #2 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 #3 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 #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	100.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	14,882.88

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 97460
2. Committee Name JEFFREY NUTT FOR OAKLAND COUNTY EXECU

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: JEFFREY G NUTT 1631 LEXINGTON D R. TROY MI 48084	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>5-01-2020</u> 6. <u>Original Amount of Debt:</u> \$ <u>5500</u>	\$ \$ \$ \$ \$	\$	\$ <u>5500</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: JEFFREY G NUTT 1631 LEXINGTON D R. TROY MI 48084	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>7-08-2020</u> 6. <u>Original Amount of Debt:</u> \$ <u>12500</u>	\$ \$ \$ \$ \$	\$	\$ <u>12500</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) **18000**

Grand Total of all Schedules 1E **18000**
(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.