



**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: 08/25/20 to 10/18/20

1. Committee I.D. Number
97381

2. Committee Name
Committee to Elect Mike Kowall

4. Candidate Last Name **Kowall** First Name **Michael** M.I. **W**

4a. Office Sought including District # or Community Served (If applicable)
County Executive

4b. County of Residence **OAKLAND**

5. Committee's Mailing Address
**43155 Main Street Ste 2210E
Novi, MI 48375**

Area Code and Phone (248) 561-5055
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
**David Staudt
23715 Nilan Drive
Novi, MI 48375**

Area Code & Phone (248) 561-5055

REC'D OCT 22 2020
AN

7. Treasurer's Business Address
**Impact Media Professionals LLC
43155 Main Street Ste 2210E
Novi, MI 48375**

Area Code and Phone (248) 561-5055

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

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

Date of Election, Convention or Caucus
11/03/20

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.)

9e. Dissolution of Candidate Committee

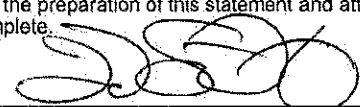
By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.


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 David Staudt Signature  Date 10/22/20

Candidate Mike Kowall Signature  Date 10/22/20

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 97381

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Mike Kowall

RECEIPT	Column I This period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>\$140,205.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>\$0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$140,205.00</u>	(18.) \$ <u>\$195,600.00</u>
4. Other Receipts (Schedule 1A - 1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$140,205.00</u>	(20.) \$ <u>\$195,600.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B - Column 6)	(8a.) \$ <u>\$111,975.97</u>	
b. Itemized Get-Out-The-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$65.50</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b+ Line 8c)	(9.) \$ <u>\$112,041.47</u>	(23.) \$ <u>\$152,600.47</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C - Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been)	<u>\$22,193.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts.)	<u>\$140,205.00</u>	
15. SUBTOTAL Add lines 13 and 14	<u>\$162,398.00</u>	
16. Amount expended during reporting period	<u>\$112,041.47</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	<u>\$50,356.53</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/22/2020</u>	
Contributor Name and Address: 14th District Republican Committee 8 Carmel Ln Grosse Pointe Farms, MI 48236-3721		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: A Better Michigan 1100 W Maple Rd Troy, MI 48084-5352		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/01/2020</u>	
Contributor Name and Address: Eugene Abdal 4835 Trailview Dr West Bloomfield, MI 48322-4576		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Reunion Estates</u>			
Business Address <u>4835 TRAILVIEW West Bloomfield, MI 48322-4576</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/06/2020</u>	
Contributor Name and Address: Burl Adkins 1842 2nd St Wyandotte, MI 48192-3902		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$6,100.00

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Advancing Michigan 535 Cushing St Lake Orion, MI 48362-1413		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Raad S Al Anbagi 31135 Country Ridge Cir Farmington Hills, MI 48331-1117		\$ <u>\$1,000.00</u>	\$ <u>\$1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Raad Al Anbagi Development</u>			
Business Address <u>31135 Country Ridge Cir Farmington Hills, MI 48331-1117</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/2020</u>	
Contributor Name and Address: Shakir al Khafaji 1375 RIVONA Waterford, MI 48328-4764		\$ <u>\$1,000.00</u>	\$ <u>\$1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President & CEO</u> Employer <u>Veritas</u>			
Business Address <u>16910 W Ten Mile Rd Ste 200 Southfield, MI 48075-2900</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/2020</u>	
Contributor Name and Address: Shakir al Khafaji 1375 RIVONA Waterford, MI 48328-4764		\$ <u>\$1,000.00</u>	\$ <u>\$2,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President & CEO</u> Employer <u>Veritas</u>			
Business Address <u>16910 W Ten Mile Rd Ste 200 Southfield, MI 48075-2900</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$3,075.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule) \$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Lynn Alexander 2092 Eagle Pointe Bloomfield Hills, MI 48304		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Lynn Alexander 2092 Eagle Pointe Bloomfield Hills, MI 48304		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Lynn Alexander 2092 Eagle Pointe Bloomfield Hills, MI 48304-3806		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Lynn Alexander 2092 Eagle Pointe Bloomfield Hills, MI 48304-3806		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$200.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
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If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Lynn Alexander 2092 Eagle Pointe Bloomfield Hills, MI 48304		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/19/2020</u>	
Contributor Name and Address: Jose Aliaga 7610 Clintonville Rd Clarkston, MI 48348-4934		\$ <u>25.00</u>	\$ <u>25.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/04/2020</u>	
Contributor Name and Address: Richard Allen 8356 Fawn Valley Dr. Clarkston, MI 48348-4546		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Iyad J. Alosachie 6918 Dobbs Way West Bloomfield, MI 48322-3077		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Hazel Park Medical Center</u>			
Business Address <u>23411 John R Rd Hazel Park, MI 48030-1404</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$625.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Casey Joseph Ambrose 440 E Walled Lake Dr Walled Lake, MI 48390-3560		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Resturant Owner</u> Employer <u>Casey's</u>			
Business Address <u>1003 E West Maple Rd Walled Lake, MI 48390-3572</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Donna Anderson 1026 Glenhill Drive Northville, MI 48167-1068		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Lawrence Anderson 790 Lochaven Rd Waterford, MI 48327-3910		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Anderson's Boat Sales</u>			
Business Address <u>6477 Highland Rd Waterford, MI 48327-1605</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/2020</u>	
Contributor Name and Address: Christina Archer 25265 Pennsylvania Ave. Novi, MI 48375-1783		\$ <u>40.00</u>	\$ <u>40.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,740.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: William Axtell 813 W. Drayton Ferndale, MI 48220-2732 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>65.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Eddie Bacall 7091 Orchard Lake Rd. Suit 260 West Bloomfield, MI 48322-3651 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Becall Group LLC</u> Business Address <u>7091 Orchard Lake Rd Suite #260 West Bloomfield, MI 48322-3651</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$1,000.00</u>	\$ <u>\$1,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Steven J. Bacall 45643 Marlborough Pl. Novi, MI 48377-3897 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Becall Group LLC</u> Business Address <u>7091 Orchard Lake Rd Ste 260 West Bloomfield, MI 48322-3651</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$1,000.00</u>	\$ <u>\$1,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>08/26/2020</u> Contributor Name and Address: Steve Baer 5944 Snow Apple Dr Clarkston, MI 48346-3045 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal	\$2,075.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Ronald J. Baetens 7973 Pine Ridge Dr. Clarkston, MI 48346-1140		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Patrick Bagley 2254 Carlos Dr Waterford, MI 48327-1006		\$ <u>500.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>BAGLEY & LANGAN PLLC</u>			
Business Address <u>6557 Highland Rd Waterford, MI 48327-1655</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>08/31/2020</u>	
Contributor Name and Address: Bruce Barron 2949 Spring Court Oakland, MI 48363-2157		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Barron Industries, Inc</u>			
Business Address <u>215 Plexus Dr Oxford, MI 48371-2367</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Tina Barton 7985 Clemae Davisburg, MI 48350-2302		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$5,700.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/20/2020</u>	
Contributor Name and Address: Douglas Berg 111 Baseline Rd Northville, MI 48167-2748		\$ <u>250.00</u>	\$ <u>350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/19/2020</u>	
Contributor Name and Address: Bill Bertakis 2120 Park Cir Dr Keeqo Harbor, MI 48320-1220		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>08/26/2020</u>	
Contributor Name and Address: Bill Best 4000 Rosemound Avenue Waterford Township, MI 48329-4141		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/27/2020</u>	
Contributor Name and Address: Bill Best 4000 Rosemound Avenue Waterford Township, MI 48329-4141		\$ <u>100.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$450.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Mike Bishop 883 Great Oaks Blvd. Rochester, MI 48307 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Eleanor Goodfriend Blum 31755 Ridgeside Drive Apt. 21 Farmington Hills, MI 48334-1276 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>200.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Melissa Bogdalek 3292 Timberlake Dr Commerce Township, MI 48390-1267 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Margaret Bonk 2036 N Fairview Ln Rochester Hills, MI 48306-3926 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>

Page Subtotal	\$250.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/02/2020</u>	
Contributor Name and Address: Bruce Brickman 868 Pierce St Birmingham, MI 48009-3654		\$ <u>1,250.00</u>	\$ <u>1,250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/07/2020</u>	
Contributor Name and Address: Thomas Buechel 7320 Biscayne Court White Lake, MI 48383-2817		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>10/18/2020</u>	
Contributor Name and Address: Building Industry Assoc SE MI PAC 30375 Northwestern Hwy Ste 100 Farmington Hills, 48334		\$ <u>750.00</u>	\$ <u>750.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Willis Bullard 1849 Lakeview Ln Highland, MI 48357-4817		\$ <u>50.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Strategic Public Solutions</u>			
Business Address <u>1849 Lakeview Lane Highland, MI 48357-4817</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$2,100.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Willis Bullard 1849 Lakeview Ln Highland, MI 48357-4817		\$ <u>100.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Strategic Public Solutions</u>			
Business Address <u>1849 Lakeview Lane Highland, MI 48357-4817</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/2020</u>	
Contributor Name and Address: Susan Burstein -Kahn 30774 Oak Valley Dr. Suite 100 Farmington Hills, MI 48331		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>ALS of Michigan</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Patricia Carcone 28735 Danvers Ct. South Lyon, MI 48178-9215		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Curt Carson 5000 Paula Ave Clarkston, MI 48346-2626		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Re/Max</u>			
Business Address <u>912 S Old Woodward Ave Birmingham, MI 48009-6721</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$500.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule) \$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/2020</u>	
Contributor Name and Address: Curt Carson 5000 Paula Ave Clarkston, MI 48346-2626		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Re/Max</u>			
Business Address <u>912 S Old Woodward Ave Birmingham, MI 48009-6721</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2020</u>	
Contributor Name and Address: Mary Cash P.O. Box 575 Keego Harbor, MI 48320-0575		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Jean Chamberlain 1213 Vinsetta Blvd Royal Oak, MI 48067-1024		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/06/2020</u>	
Contributor Name and Address: Lawrence Chamberlain 141 Knollwood Boulevard Clawson, MI 48017-1286		\$ <u>30.00</u>	\$ <u>30.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$330.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/2020</u> Contributor Name and Address: Kevin Chase 955 N. Lake Angelus Road Lake Angelus, MI 48326-1024 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Chase Plastic Services, Inc.</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2020</u> Contributor Name and Address: Sreeny Cherukuri 25704 Shoreline Novi, MI 48374-2170 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>80.00</u>	\$ <u>80.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2020</u> Contributor Name and Address: Hany Choulagh 6268 Timberwood N West Bloomfield, MI 48322-2003 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2020</u> Contributor Name and Address: Francis Cizmar 1112 Birchwood Drive Troy, MI 48083-1806 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>25.00</u>	\$ <u>25.00</u>

Page Subtotal **\$1,355.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/17/2020</u>	
Contributor Name and Address: Gaylon Randall Clark 10030 7 Mile Rd Northville, MI 48167-9107		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/22/2020</u>	
Contributor Name and Address: Luther Clyburn 9000 Gale Road White Lake, MI 48386-1411		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Luther Clyburn 9000 Gale Road White Lake, MI 48386-1411		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/2020</u>	
Contributor Name and Address: Thomas Cobb 1467 Lochridge Road Bloomfield Hills, MI 48302-0734		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$550.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Thomas Cobb 1467 Lochridge Road Bloomfield Hills, MI 48302-0734		\$ <u>500.00</u>	\$ <u>750.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/02/2020</u>	
Contributor Name and Address: Steven Cole 4037 E Hanover Ct West Bloomfield, MI 48323-3106		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: David Cornwell 9183 Camelot St White Lake, MI 48386-1530		\$ <u>50.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/12/2020</u>	
Contributor Name and Address: David Cornwell 9183 Camelot Drive White Lake, MI 48386-1530		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,000.00**
Grand Total of all Schedules 3A (Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/22/2020</u>	
Contributor Name and Address: Joyce Cornwell 9183 Camelot St White Lake, MI 48386-1530		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2020</u>	
Contributor Name and Address: Dennis Cowan 2716 Trafford Rd Royal Oak, MI 48073-4418		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>Plunket Cooney</u>			
Business Address <u>38505 Woodward Ave Ste 2000 Bloomfield Hills, MI 48304-5093</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/2020</u>	
Contributor Name and Address: Michael Cox 17430 North Laurel Park Drive Livonia, MI 48152-3981		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>The Mike Cox Law Firm PLLC</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/05/2020</u>	
Contributor Name and Address: Hugh Crawford 46275 West 11 Mile Road Novi, MI 48374-2417		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$1,400.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: CTE Terri Nallamothu 7427 Foxburg Ct Clarkston, MI 48348-5060		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Burke Cueny 2861 Trailwood Dr. Rochester Hills, MI 48309-1441		\$ <u>35.00</u>	\$ <u>35.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/15/2020</u>	
Contributor Name and Address: Jerry Czernel 5400 Bridge Trail E Commerce, MI 48382		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/24/2020</u>	
Contributor Name and Address: Karen Czernel 5400 Bridge Trail East Commerce Township, MI 48382-4888		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy</u> Employer <u>Macomb County Public Works</u> Business Address <u>16381 Chatham Macomb, MI 48044-4070</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$335.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2020</u>	
Contributor Name and Address: Karen Czernel 5400 Bridge Trail East Commerce Township, MI 48382-4888		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy</u> Employer <u>Macomb County Public Works</u>			
Business Address <u>16381 Chatham Macomb, MI 48044-4070</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/2020</u>	
Contributor Name and Address: Maria Damavoletes 22825 Vasilius Ct Novi, MI 48374-3520		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Duraid Kalasho Daoud 2454 Walnut Lake Rd West Bloomfield, MI 48323-3741		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Talk A-Lot Clinton Inc.</u>			
Business Address <u>4000 Town Ctr Ste 1000 Southfield, MI 48075-1501</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/12/2020</u>	
Contributor Name and Address: Patte Day 3580 Reserve Court Highland, MI 48356		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$3,200.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: John Dean 3985 Cambrook Ln Waterford, MI 48329-1601		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/14/2020</u>	
Contributor Name and Address: Mark DeGroff 9776 Bonnie Briar Street White Lake, MI 48386-1509		\$ <u>150.00</u>	\$ <u>400.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>DeGroff Orthopedic Supplies</u>			
Business Address <u>9776 Bonnie Briar St White Lake, MI 48386-1509</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Eddie Denha 6915 Lakemont West Bloomfield, MI 48323-2071		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Dollar Castle</u>			
Business Address <u>7031 Orchard Lake Rd Ste. 201A West Bloomfield, MI 48322-3626</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Julian Denha 6915 Lakemont Cir West Bloomfield, MI 48323-2071		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Advisor</u> Employer <u>KJ Commercial</u>			
Business Address <u>30201 Orchard Lake STE 100 Farmington Hills, MI 48334</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$2,400.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report all contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Kevin Denha 700 N. Old Woodward Ave. Suite 300 Birmingham, MI 48009-1338		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Managing Partner</u> Employer <u>Vision Invistment</u>			
Business Address <u>700 N. Old Woodward Ave Ste 300 Birmingham, MI 48009-1338</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/01/2020</u>	
Contributor Name and Address: Salah Denha 6349 Golden Ln West Bloomfield, MI 48322-3094		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Daniela DeSantis 27 Scenic Oaks Dr S Bloomfield Hills, MI 48304-2228		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Nancy Dolan 54360 Belcrest Dr. Milford, MI 48381-4392		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$5,850.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Brian Dunn 1087 Stable Ln. South Lyon, MI 48178-5318 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Omar M. Elias 1157 Andover Cir. Commerce Township, MI 48390-2246 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>North West Labs</u> Business Address <u>29580 Northwestern Hwy Southfield, MI 48034-1094</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$2,500.00</u>	\$ <u>\$2,500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2020</u> Contributor Name and Address: Paul Elkow 28701 Winter Green Sterling Heights, MI 48311 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Phillip Elkow 26293 S. Hill Rd. New Hudson, MI 48165-9762 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>

Page Subtotal

\$2,775.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Craig Everett 6407 Almond Lane 6407 Almond Ln. Clarkston, MI 48346		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/2020</u>	
Contributor Name and Address: Peter Ewing 7011 Biscayne Avenue White Lake, MI 48383-2809		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Melinda Fernandes 45400 W. Pontiac Trl. Walled Lake, MI 48390-4035		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Richard Fessler 1993 Porter Rd White Lake, MI 48383-2327		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$475.00

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/2020</u>	
Contributor Name and Address: Carol Finkelstein 4372 Hickory Court Orchard Lake, MI 48323		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Norwood Homes</u>			
Business Address <u>31847 Northwestern Hwy Farmington Hills, 48334</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Gerald Fisher 6745 Park Lake Dr Clarkston, MI 48346-1543		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Dennis Flessland 26017 Concord Rd Huntington Woods, MI 48070-1638		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/09/2020</u>	
Contributor Name and Address: Ron Fowkes 320 West Huron Street Milford, MI 48381-2248		\$ <u>100.00</u>	\$ <u>350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Home Inspector</u> Employer <u>Sealtite</u>			
Business Address <u>320 W. Huron St. Milford, MI 48381-2248</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$500.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Todd Fox 7683 Maceday Lake Rd Waterford, MI 48329-2631		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2020</u>	
Contributor Name and Address: Arthur Frasca 576 S Hospital Rd Waterford, MI 48327-3829		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/2020</u>	
Contributor Name and Address: Rick Frazier 223 O'CONNOR Lake Orion, MI 48362		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President of Charity Funding</u> Employer <u>Charity Motors</u>			
Business Address <u>10431 Grand River Ave Detroit, MI 48204-2005</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/02/2020</u>	
Contributor Name and Address: Howard Frehsee 6135 Pickwood Ct West Bloomfield, MI 48322-2222		\$ <u>1,250.00</u>	\$ <u>1,250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Development</u> Employer <u>H & K Enterprises</u>			
Business Address <u>3910 Telegraph Rd Ste 201 Bloomfield Hills, 48302</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$2,875.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report all contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2020</u> Contributor Name and Address: Henry Frenkel 3062 Moon Lake Dr. West Bloomfield, MI 48323-1842 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Money Line Holding LLC</u> Business Address <u>7031 Orchard Lake Rd West Bloomfield, MI 48322-3600</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: David Fritzinger 79 ROBERTSON CT Clarkston, MI 48346-1547 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2020</u> Contributor Name and Address: Scott Frush 18441 Stoneridge Court Northville, MI 48168-8571 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/05/2020</u> Contributor Name and Address: Paul J Gambka 8510 Tipsico Trail Holly, MI 48442-8100 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Gambka & Company PC</u> Business Address <u>204 Franklin Holly, MI 48442-8587</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>1,075.00</u>

Page Subtotal **\$1,625.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/17/2020</u>	
Contributor Name and Address: Eugene Gargaro Jr. 20630 Harper Ave Harper Woods, MI 48225-1448		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CHAIRMAN BOARD OF DIRECTORS</u> Employer <u>DETROIT INSTITUTE OF ARTS</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Thamer S. Gasso 6198 Windcliff Dr. West Bloomfield, MI 48322-2099		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Southgate Lodging</u>			
Business Address <u>17201 Northline Rd Southgate, MI 48195-2336</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Ghassan George 7486 Woodbriar Ln. West Bloomfield, MI 48322-2887		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>C & M CAPITAL MANAGEMENT, LLC</u>			
Business Address <u>7486 WOODBRIAR LN West Bloomfield, MI 48322-2887</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/11/2020</u>	
Contributor Name and Address: William Gerber 1380 Dorstone Pl Bloomfield Hills, MI 48301-2316		\$ <u>25.00</u>	\$ <u>25.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			

Page Subtotal **\$1,525.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Michael Gingell 583 Shady Oaks St Lake Orion, MI 48362-2571		\$ <u>100.00</u>	\$ <u>350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>SR. Vice President</u> Employer <u>Dealer Direct</u>			
Business Address <u>4 Park Ln Blvd Dearborn, MI 48126-4259</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: William Golling 2991 Voorheis Lake Court Lake Orion, MI 48360-1866		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Auto dealer</u> Employer <u>Golling CDJR</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/13/2020</u>	
Contributor Name and Address: George Gomez 2018 Guthrie Avenue Royal Oak, MI 48067		\$ <u>50.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/02/2020</u>	
Contributor Name and Address: Robert Goodman DMD 5600 W Maple Rd West Bloomfield, MI 48322-3704		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Dentist</u> Employer <u>Great Expressions</u>			
Business Address <u>5600 W Maple Rd West Bloomfield, MI 48322-3704</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$900.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/05/2020</u>	
Contributor Name and Address: Robert Gosselin 2377 Cumberland White Lake, MI 48383-2159		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/09/2020</u>	
Contributor Name and Address: Sam Gray 4312 Stoney River Bloomfield Hills, MI 48301-3649		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/06/2020</u>	
Contributor Name and Address: Greater Oakland Republican PO Box 583 Lake Orion, MI 48361-0583		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/2020</u>	
Contributor Name and Address: David L Griffin 23494 Shinnecock Dr South Lyon, MI 48178-9079		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Mortgage Brokerr</u> Employer <u>Griffin CMC LLC</u>			
Business Address <u>28345 Beck Rd Ste 205 Wixom, MI 48393-4737</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$2,200.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Justin Gusick 21494 Equestrian Trl. Northville, MI 48167-9609 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Dale Hampshire 6410 Prairie Lawn Waterford, MI 48329-2971 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Edward L Haroutunian 14926 Rosemont Detroit, MI 48223-2364 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>650.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2020</u> Contributor Name and Address: Edward L Haroutunian 14926 Rosemont Detroit, MI 48223-2364 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>800.00</u>

Page Subtotal **\$500.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Dennis Hatmaker 809 E Highland Rd Highland, MI 48356-2940		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>H & H Auto Collision</u>			
Business Address <u>5005 Williams Lake Rd Waterford, MI 48329-3553</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Mari-Ann Henry 895 Pinery Blvd Lake Orion, MI 48362-1151		\$ <u>50.00</u>	\$ <u>550.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Mgr</u> Employer <u>The Henry Group, PC</u>			
Business Address <u>5700 Crooks Rd. #219 Troy, MI 48098-2818</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Mari-Ann Henry 895 Pinery Blvd Lake Orion, MI 48362-1151		\$ <u>50.00</u>	\$ <u>600.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Mgr</u> Employer <u>The Henry Group, PC</u>			
Business Address <u>5700 Crooks Rd. #219 Troy, MI 48098-2818</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Christine Herriman 9009 Brookville Rd. Plymouth, MI 48170-5819		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$400.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/03/2020</u>	
Contributor Name and Address: John Hicks 29393 Tonester Circle New Hudson, MI 48165-9671		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Christopher Hindo 6560 Orchard Lake Rd. West Bloomfield, MI 48322-3401		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Chinos Holdings LLC</u> Business Address <u>1130 TIENKEN COURT Rochester Hills, MI 48306-4367</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Robert Hoffman 1200 North Telegraph Road Pontiac, MI 48341-1032		\$ <u>100.00</u>	\$ <u>600.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>County Commissioner</u> Employer <u>State of Michigan/Oakland County</u> Business Address <u>1200 North Telegraph Road Pontiac, MI 48341-1032</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Adam Hopper 3534 Quinney Trail Milford, MI 48381-3580		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			

Page Subtotal **\$1,775.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Jay Dennis Howie 29955 Lyon Center Dr. E. New Hudson, MI 48165-8905 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Thomas Hughes 3937 E Commerce Rd Commerce Township, MI 48382-1309 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Kenneth Hurst 13180 Hummingbird Ridge Davisburg, MI 48350-1526 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: John Hutto 58000 8 Mile Rd. Northville, MI 48167-9157 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal **\$300.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/2020</u>	
Contributor Name and Address: Lisa Wheeler Huzella 2388 Lake Angelus Ln Lake Angelus, MI 48326-1008		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address <u>101 W Big Beaver Rd, #800 Troy, MI 48084-5280</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Bradford Jacobsen 2600 Elizabeth Lake Rd Waterford, MI 48328-3213		\$ <u>150.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Vice President</u> Employer <u>Jacobsen's Flowers</u>			
Business Address <u>1079 W Long Lake Rd Bloomfield Hills, MI 48302-2015</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Gregory Jamian 1565 Lakewood Rd Bloomfield Hills, MI 48302-2704		\$ <u>150.00</u>	\$ <u>400.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Americare Medical</u>			
Business Address <u>1938 Woodslee Dr Troy, MI 48083-2235</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>09/05/2020</u>	
Contributor Name and Address: Join Jacobsen 401 N Hayford Ave Lansing, MI 48912-4156		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			

Page Subtotal

\$5,550.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>09/06/2020</u> Contributor Name and Address: Join Jacobsen 401 N Hayford Ave Lansing, MI 48912-4156 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>250.00</u>	\$ <u>500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: John Joliat 4181 Lakewood Dr Waterford, MI 48329-3848 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2020</u> Contributor Name and Address: Judith Jonna If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Jason Kajy 6829 Carrington Cir. E. West Bloomfield, MI 48322-2974 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Big Daddy Liquor</u> Business Address <u>18551 Joy Rd Detroit, MI 48228-3151</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal	\$1,300.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Marlin Kajj 6982 Lexington Dr. West Bloomfield, MI 48322-2966		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Talk A-Lot Wireless</u>			
Business Address <u>21150 Coolidge Hwy Oak Park, MI 48237-3231</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Yousif Kalasho 6242 Timberwood N West Bloomfield, MI 48322-2003		\$ <u>500.00</u>	\$ <u>700.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Exclusive Wholesale World</u>			
Business Address <u>13321 Cloverdale St Oak Park, MI 48237-3247</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Joseph Kapelczak 3656 Lorena Dr Waterford, MI 48329-4238		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Surveyer</u> Employer <u>Tri-County Surveying</u>			
Business Address <u>8615 Richardson Rd Commerce Township, MI 48390-1326</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Gardenia Kattoo 4830 Fairway Rdg. S. West Bloomfield, MI 48323-3314		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$2,700.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule) \$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: S. B. Kennedy 1079 Vassar South Lyon, MI 48178-1519 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>09/14/2020</u> Contributor Name and Address: STEVE kern 5927 Lockwood west bloomfield, MI 48322 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Olivia Kesto 4894 Walnut Creek Dr. West Bloomfield, MI 48322-3492 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>World Cellular</u> Business Address <u>4894 WALNET CREEK DR West Bloomfield, MI 48322-3492</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>10/07/2020</u> Contributor Name and Address: Dean Kiriluk 4868 Willow Lane Orchard Lake, MI 48324-3073 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>CHIEF INVESTMENT OFFICER</u> Employer <u>KIRCO</u> Business Address <u>101 W Big Beaver Rd Ste 200 Troy, MI 48084-5255</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>600.00</u>	\$ <u>900.00</u>

Page Subtotal **\$1,725.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/07/2020</u> Contributor Name and Address: Matt Kiriluk 365 Woodridge Bloomfield Hills, MI 48304-3468 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>KIRCO</u> Business Address <u>101 W Big Beaver Rd Ste 200 Troy, MI 48084-5255</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>600.00</u>	\$ <u>900.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/07/2020</u> Contributor Name and Address: Quinn Kiriluk 5270 Ponvalley Rd Bloomfield Hills, MI 48302-2834 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS DEVELOPMENT</u> Employer <u>KIRCO</u> Business Address <u>101 W Big Beaver Rd Ste 200 Troy, MI 48084-5255</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>600.00</u>	\$ <u>900.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2020</u> Contributor Name and Address: Valerie Knol 26725 Holly Hill Drive Farmington Hills, MI 48334-4526 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>FCA US LLC</u> Business Address <u>1000 Chrysler Dr Auburn Hills, MI 48326-2766</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2020</u> Contributor Name and Address: Laura Kopack 884 Village Way South Lyon, MI 48178-2066 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR GOVERNMENT AFFAIRS</u> Employer <u>MECH CONTRACTORS ASSN</u> Business Address <u>14801 W 8 Mile Rd Detroit, MI 48235-1623</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal **\$1,550.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Laura Kopack 884 Village Way South Lyon, MI 48178-2066		\$ <u>500.00</u>	\$ <u>600.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR GOVERNMENT AFFAIRS</u> Employer <u>MECH CONTRACTORS ASSN</u> Business Address <u>14801 W 8 Mile Rd Detroit, MI 48235-1623</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/06/2020</u>	
Contributor Name and Address: Alexandra Kosik 43 Pontiac St Oxford, MI 48371-4857		\$ <u>7,000.00</u>	\$ <u>7,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Marketing Manager</u> Employer <u>JFK Investment Company</u> Business Address <u>43252 Woodward Ave Ste. 210 Bloomfield Hills, MI 48302-5047</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/05/2020</u>	
Contributor Name and Address: Cynthia Kosik 9277 Pine Knob Rd Clarkston, MI 48348-3025		\$ <u>7,000.00</u>	\$ <u>7,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u> Employer <u>Housewife</u> Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/05/2020</u>	
Contributor Name and Address: Joseph Kosik 9277 Pine Knob Rd Clarkston, MI 48348-3025		\$ <u>7,000.00</u>	\$ <u>7,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>JFK Investment Company</u> Business Address <u>43252 Woodward Ave Ste. 210 Bloomfield Hills, MI 48302-5047</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$21,500.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/06/2020</u> Contributor Name and Address: Thomas Kosik 375 Gray Woods Lane Lake Angelus, MI 48326 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>JFK Investment Company</u> Business Address <u>43252 Woodward Ave Ste. 210 Bloomfield Hills, MI 48302-5047</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>7,000.00</u>	\$ <u>7,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: David Koziara 21354 Parklane St. Farmington Hills, MI 48335 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Larea Kremhelmer 57435 Spaulding Ct. New Hudson, MI 48165-9824 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Thomas Kuhn 1595 Pebble Point Dr. Troy, MI 48085-1364 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney at Law</u> Employer <u>Thomas E. Kuhn PC</u> Business Address <u>615 Griswold St Ste 15 Detroit, MI 48226-3900</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>200.00</u>

Page Subtotal **\$7,275.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/2020</u>	
Contributor Name and Address: John G Kulhavi 1715 Ridge Rd White Lake, MI 48383-1787		\$ <u>1,000.00</u>	\$ <u>4,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR VP</u> Employer <u>MERRILL LYNCH</u>			
Business Address <u>39001 W 12 MILE RD Farmington Hills, MI 48331-2912</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Margaret Kurtzweil 939 Westhills Dr. South Lyon, MI 48178-2534		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/30/2020</u>	
Contributor Name and Address: JUDY LANDUYT 1842 Chase Dr Rochester, MI 48307-6000		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/2020</u>	
Contributor Name and Address: Robert Langan 19759 Clement Northville, MI 48167-1711		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			

Page Subtotal **\$1,300.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/2020</u>	
Contributor Name and Address: Carolyn Laramee 1685 E Wardlow Rd Highland, MI 48356-2219		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Robert Law 43422 West Oakes Dr. Suite 338 Novi, MI 48377-3300		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Burton Leib 5379 Pleasant Lake Dr West Bloomfield, MI 48322-4715		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/08/2020</u>	
Contributor Name and Address: Jeffrey Leib 3205 Parkland Dr West Bloomfield, MI 48322-1830		\$ <u>100.00</u>	\$ <u>300.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>30445 Northwestern Hwy #230 Farmington Hills, MI 48334-3109</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/05/2020</u>	
Contributor Name and Address: Arie Leibovitz 2482 Comfort Ct West Bloomfield, MI 48323-3702		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Developer</u> Employer <u>Ari-EL</u>			
Business Address <u>29355 Northwestern Hwy Ste 301 Southfield, MI 48034-1045</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: John Lipovsky 4444 Lamson Dr Waterford, MI 48329-1933		\$ <u>25.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/2020</u>	
Contributor Name and Address: Rodney Lockwood 650 Lakeview Birmingham, MI 48009-3829		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Rodney Lockwood & Co.</u> Employer <u>Builder</u>			
Business Address <u>27777 Franklin Rd Ste 1410 Southfield, MI 48034-8209</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Timothy Loughrin 6859 Deerhill Dr Clarkston, MI 48346-1305		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$5,575.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Joyce Macleish 1576 Kirkway Rd Bloomfield Hills, MI 48302-1324		\$ <u>100.00</u>	\$ <u>\$1,100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Home Builder</u> Employer <u>MacLeish Builders</u>			
Business Address <u>650 E Big Beaver Rd Ste F Troy, MI 48083-1432</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Robert Maiberger 6812 Trillium Village Dr Clarkston, MI 48346-5202		\$ <u>100.00</u>	\$ <u>\$350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Larry Malace 4596 Oakhurst Ridge Rd Clarkston, MI 48348-5071		\$ <u>200.00</u>	\$ <u>\$200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Malace HR</u>			
Business Address <u>5700 Crooks Road Ste. 112 Troy, MI 48098-2838</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/04/2020</u>	
Contributor Name and Address: Sheila Malkowski 16130 Edgewood Dr Livonia, MI 48154-2228		\$ <u>200.00</u>	\$ <u>\$200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Payroll Analyst</u> Employer <u>Ford Motor</u>			
Business Address <u>1 American Rd Dearborn, MI 48126-2701</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal	\$600.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/08/2020</u> Contributor Name and Address: Frank T Mamat 5484 Crispin Way Road West Bloomfield, MI 48323-3402 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/05/2020</u> Contributor Name and Address: Stephanie Mann 744 E Valley Chase Rd Bloomfield Hills, MI 48304-3166 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/2020</u> Contributor Name and Address: Richard Manoogian 15520 Windmill Pointe Dr Grosse Pointe Park, MI 48230-1857 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Chairman Emeritus</u> Employer <u>Masco Corporation</u> Business Address <u>21001 Van Born Rd Dearborn Heights, MI 48125</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/05/2020</u> Contributor Name and Address: Clifford Marko 204 E Sunnybrook Dr Royal Oak, MI 48073-2674 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal **\$800.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/19/2020</u>	
Contributor Name and Address: Matthew Marko 1222 Forest Bay Ct. Waterford, MI 48328-4290		\$ <u>25.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Marko World Trade</u>			
Business Address <u>1222 Forest Bay Dr Waterford, MI 48328-4290</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Kenneth Massey 36796 Quakertown Lane Farmington Hills, MI 48331-3886		\$ <u>100.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Biomedical Scientist</u> Employer <u>Wayne State University</u>			
Business Address <u>42 W Warren Ave Detroit, MI 48201-1347</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Kenneth Matheis P.O. Box 65 Lake Orion, MI 48361-0065		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Complete Automation</u>			
Business Address <u>1776 W Clarkston Rd Lake Orion, MI 48362-2267</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Nancy Mattar 788 W Ridge Ct Lake Orion, MI 48359-1746		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$475.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/19/2020</u>	
Contributor Name and Address: Michael McLennan 935 Briston Drive Rochester Hills, MI 48307-4604		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/2020</u>	
Contributor Name and Address: Terri Miller 1267 Twin Maples Lane Bloomfield Hills, MI 48301-2251		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Mark Monohon 3517 David K Dr Waterford, MI 48329-1316		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Stanley Moore 2841 Lansdowne Rd Waterford, MI 48329-2947		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Bill's Plumbing</u>			
Business Address <u>3955 Airport Rd Waterford, MI 48329-1308</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$1,200.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Carol Morlan 2761 Rhineberry Road Rochester Hills, MI 48309 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/10/2020</u> Contributor Name and Address: MTR PAC 300 N Pontiac Trl Walled Lake, MI 48390-3436 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Darren Naimi 3665 Lake Front St. Waterford, MI 48328-4332 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>DARREN & DILLON, LLC</u> Business Address <u>3665 Lake Front St Waterford, MI 48328-4332</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Shivajee Nallamothu 7427 Foxburg Ct Clarkston, MI 48348-5060 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>McLaren Health</u> Business Address <u>50 N. Perry St. Pontiac, MI 48342-2217</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>200.00</u>

Page Subtotal

\$4,200.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Robert Namowicz 7300 Sagamore Dr Clarkston, MI 48346-1262		\$ <u>100.00</u>	\$ <u>350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Theodore Nittis 120 North Williamsbury Road Bloomfield Hills, MI 48301		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/15/2020</u>	
Contributor Name and Address: Grace Norris 5574 White Ash Lane Meridian charter Township, MI 48840		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Terence Olexy 205 McPherson Highland, MI 48357-4636		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$300.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Sean Oneil 26181 Great Plains Dr. South Lyon, MI 48178-8605		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/2020</u>	
Contributor Name and Address: Latif Oram 28423 Orchard Lake Road Farmington Hills, MI 48334-2971		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>International Outdoor</u>			
Business Address <u>28423 Orchard Lake Rd Ste. 200 Farmington Hills, MI 48334-2971</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Brenda Orlando 6678 Weston Ct Clarkston, MI 48348-5032		\$ <u>150.00</u>	\$ <u>400.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Brenda Orlando CPA</u>			
Business Address <u>6678 Weston Ct Clarkston, MI 48348-5032</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Michelle Ortiz-Cash 26945 Milford Rd. Apt. 6 South Lyon, MI 48178-9790		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,350.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/2020</u>	
Contributor Name and Address: Eddie Osman 110 Hampshire Ct Dearborn, MI 48124-1124		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Wixom Fuel Stop</u>			
Business Address <u>29330 Wixom Rd Wixom, MI 48393-3424</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/02/2020</u>	
Contributor Name and Address: Lester Owczarski 5817 GLEN EAGLES DR West Bloomfield, MI 48323-2206		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Christie Paciocco 61250 Saddlecreek Dr. South Lyon, MI 48178-8220		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/22/2020</u>	
Contributor Name and Address: Safet Palaj 1381 Valleyview Dr. Clarkston, MI 48348-4097		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>ALFOCCINO OF AUBURN HILLS, INC.</u>			
Business Address <u>2225 N OPDYKE ROAD Auburn Hills, MI 48326-2436</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$2,200.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Steven Pearson 6792 Bluegrass Dr Clarkston, MI 48346-1400 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Steven Perry 4470 Motorway Waterford, MI 48328 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Steven Perry 4470 Motorway Waterford, MI 48328 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Steven Perry 4470 Motorway Waterford, MI 48328 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal

\$400.00

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Steven Perry 4470 Motorway Waterford, MI 48328 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Steven Perry 4470 Motorway Waterford, MI 48328 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Adorno Piccinni 22043 Lujon Dr. Northville, MI 48167-9372 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>09/16/2020</u> Contributor Name and Address: Dennis Pittman 13130 Scott Rd Davisburg, MI 48350 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal	\$325.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/13/2020</u> Contributor Name and Address: Plunkett Cooney Employees PAC 38505 Woodward Ave Ste 2000 Pontiac, MI 48341 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>750.00</u>	\$ <u>750.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2020</u> Contributor Name and Address: Mo Qian 70 Cloveridge Drive Troy, MI 48084 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>20.00</u>	\$ <u>20.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2020</u> Contributor Name and Address: Karl Randall 10698 South Grant Avenue Clare, MI 48617-9484 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Sarmed Raouf 6122 Trailwood Ln. West Bloomfield, MI 48322-2071 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Seven Eleven</u> Business Address <u>1870 N. Milford Rd. Highland, MI 48357-3810</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal **\$1,370.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>08/26/2020</u>	
Contributor Name and Address: RON RENAUD 2673 EAST OAKWOOD ROAD Oxford, MI 48370-1213		\$ <u>25.00</u>	\$ <u>25.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Kathleen Reynolds 3768 Capitol Way Highland, MI 48356-1610		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Scott Reynolds 3768 Capitol Way Highland, MI 48356-1610		\$ <u>100.00</u>	\$ <u>350.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Fireboat Captain</u> Employer <u>City of Detroit</u>			
Business Address <u>1301 3rd Ave Detroit, MI 48226-2503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Donna Ritter 236 Gunder Court Rochester Hills, MI 48309-1231		\$ <u>50.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Senior Software Consultant</u> Employer <u>SAP Concur</u>			
Business Address <u>601 108th Ave NE Ste 1000 Bellevue, WA 98004-4750</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$275.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule) \$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2020</u>	
Contributor Name and Address: Ellyn Rogers 132 N Holcomb Rd Clarkston, MI 48346-1470		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: Edward Roney 40701 W. Mill Rd. Ct. Novi, MI 48375-5026		\$ <u>75.00</u>	\$ <u>75.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Bernd M. Ronnisch 669 Rivenoak St. Birmingham, MI 48009-5733		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Ronnisch Construction Group</u>			
Business Address <u>4327 Delemere Court Royal Oak, MI 48073-1809</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Run Michigan Right Fund 2210 Teggerdine Rd White Lake, MI 48386-1755		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$875.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Omar Salah 28948 Hearthstone Dr. Novi, MI 48377-2723		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Diamond Cannabis</u>			
Business Address <u>211 Salzburg Ave Bay City, MI 48706-5317</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/14/2020</u>	
Contributor Name and Address: Michael Sandler		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Michael Santi 1455 Quarten Birmingham, MI 48009-1036		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Nagle Paving</u>			
Business Address <u>39525 W 13 Mile Rd Novi, MI 48377-2363</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/01/2020</u>	
Contributor Name and Address: Andrea Schroeder 5641 Golf Pointe Dr Clarkston, MI 48348-5148		\$ <u>150.00</u>	\$ <u>150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Representative</u> Employer <u>State of Michigan</u>			
Business Address <u>100 N Capitol Ave Lansing, MI 48933-1363</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,200.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/21/2020</u>	
Contributor Name and Address: Terry Schulz 3990 Embarcadero St Waterford, MI 48329-2246		\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Jennifer Sear 10136 St Ives Way Grand Blanc, MI 48439-2539		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Philip Seaver 4225 Wendell Rd West Bloomfield, MI 48323-3264		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Seaver Title Agency</u> Business Address <u>31440 Northwestern Hwy Ste 100 Farmington Hills, MI 48334-5419</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Dominic T. Semaan 6127 Quaker Hill Dr. West Bloomfield, MI 48322-3112		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Henry Ford Hospital</u> Business Address <u>2799 W Grand Blvd Detroit, MI 48202-2608</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$1,650.00

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Dominic T. Semaan 6127 Quaker Hill Dr. West Bloomfield, MI 48322-3112		\$ <u>1,000.00</u>	\$ <u>1,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Henry Ford Hospital</u>			
Business Address <u>2799 W Grand Blvd Detroit, MI 48202-2608</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Anthony Serra 9709 Parkway E Ste D Birmingham, AL 35215-7854		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Auto Dealer</u> Employer <u>Serra Automotive Mgmt</u>			
Business Address <u>2345 Crest Rd Birmingham, AL 35223-1017</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/16/2020</u>	
Contributor Name and Address: Gary Shapiro 4642 Chelsea Ln Bloomfield Hills, MI 48301-3618		\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Ivanhoe Companies</u>			
Business Address <u>6689 Orchard Lake Rd # 314 West Bloomfield, MI 48322-3404</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2020</u>	
Contributor Name and Address: James P Shea 2260 Private Dr Waterford Twp, MI 48329-4456		\$ <u>7,150.00</u>	\$ <u>7,150.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$9,650.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Russ Shelton 960 Dutton Road Rochester Hills, MI 48306-2512		\$ <u>200.00</u>	\$ <u>200.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Automobile Dealer</u> Employer <u>Shelton Buick GMC</u>			
Business Address <u>855 S Rochester Rd Rochester Hills, MI 48307-2741</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/13/2020</u>	
Contributor Name and Address: Sami Shunia 1799 Kinghill Drive Commerce, MI 48382		\$ <u>250.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/17/2020</u>	
Contributor Name and Address: Sam Simon 150 Lone Pine Rd Bloomfield Hills, MI 48304-3537		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Chairman</u> Employer <u>Atlas Oil</u>			
Business Address <u>24501 Ecorse Rd Taylor, MI 48180-1641</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/2020</u>	
Contributor Name and Address: David Smith 1625 Mead Ln White Lake, MI 48386-1838		\$ <u>50.00</u>	\$ <u>250.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>LAND SURVEYOR</u> Employer <u>DPS&A INC</u>			
Business Address <u>8615 Richardson Rd, Ste 100 Commerce Township, MI 48390-1325</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$1,500.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2020</u>	
Contributor Name and Address: David Smith 1625 Mead Ln White Lake, MI 48386-1838		\$ <u>75.00</u>	\$ <u>\$325.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>LAND SURVEYOR</u> Employer <u>DPS&A INC</u> Business Address <u>8615 Richardson Rd, Ste 100 Commerce Township, MI 48390-1325</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/01/2020</u>	
Contributor Name and Address: Tim Smith 5465 whipple lake rd Clarkston, MI 48348-3058		\$ <u>\$2,500.00</u>	\$ <u>\$2,500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>contractor</u> Employer <u>City Renovation & Trim Inc.</u> Business Address <u>2685 Paldan Dr, Auburn Hills, MI 48326-1825</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Christopher Smither 1325 Bald Eagle Lake Rd. Ortonville, MI 48462-9038		\$ <u>\$500.00</u>	\$ <u>\$500.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal</u> Employer <u>Dynamic Hvac, Inc.</u> Business Address <u>1325 Bald Eagle Lake Rd Ortonville, MI 48462-9038</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/2020</u>	
Contributor Name and Address: Kevin Van Sparrentak 54340 Belcrest Dr. Milford, MI 48381-4392		\$ <u>\$100.00</u>	\$ <u>\$100.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$3,175.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>08/30/2020</u> Contributor Name and Address: Michael Spisz 3661 High View Dr. Oxford, MI 48371-5737 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: John Spokaeski 2845 Orion Rd. Oakland, MI 48363-1964 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Greg Stanalajczo 617 Dewey St Royal Oak, MI 48067-1358 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/2020</u> Contributor Name and Address: David Staudt 23715 Nilan Drive Novi, MI 48375-3746 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Campaign Management</u> Employer <u>Impact Media Professionals</u> Business Address <u>43155 Main Street Ste 2210E Novi, MI 48375-1799</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>150.00</u>	\$ <u>500.00</u>

Page Subtotal

\$500.00

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2020</u> Contributor Name and Address: Roger Stroup 5719 Blandford Rd Bloomfield Hills, MI 48302-4011 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2020</u> Contributor Name and Address: Robert Swain 30005 Cherry Ln. New Hudson, MI 48165-9749 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>75.00</u>	\$ <u>75.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/12/2020</u> Contributor Name and Address: Shelley Taub 1959 Shore Hill Drive Bloomfield Township, MI 48302 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2020</u> Contributor Name and Address: James Tedder 4900 Lakeview Blvd Clarkston, MI 48348-3834 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal **\$275.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/19/2020</u>	
Contributor Name and Address: James Thienel 5161 Shoreline Blvd Waterford Twp, MI 48329-1669		\$ <u>25.00</u>	\$ <u>25.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Patricia Thomas 2597 Elsinore Dr Waterford, MI 48328-3623		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/2020</u>	
Contributor Name and Address: Russell Tierney 6000 Buckhorn Highland, MI 48357		\$ <u>100.00</u>	\$ <u>300.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>RT Sales</u>			
Business Address <u>1625 N Milford Rd Highland, MI 48357-3807</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/09/2020</u>	
Contributor Name and Address: Don Tocco 1985 W. Big Beaver Road Suite 308 Troy, MI 48084-3409		\$ <u>50.00</u>	\$ <u>50.00</u>
If from a committee, enter the committee treasurer's Name: _____			
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **\$225.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Paul Tomasko 6828 Serenity Dr Troy, MI 48098-1748 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Comptroller</u> Employer <u>M. Shapiro Management LLC</u> Business Address <u>31550 Northwestern Hwy Farmington Hills, MI 48334-2571</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>300.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2020</u> Contributor Name and Address: Paul Tomasko 6828 Serenity Dr Troy, MI 48098-1748 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Comptroller</u> Employer <u>M. Shapiro Management LLC</u> Business Address <u>31550 Northwestern Hwy Farmington Hills, MI 48334-2571</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>400.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/19/2020</u> Contributor Name and Address: Cynthia Toth 4076 Ironside Dr Waterford Twp, MI 48329-1686 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>25.00</u>	\$ <u>25.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/2020</u> Contributor Name and Address: Martha Usztan 2483 Spyglass Dr. Oakland, MI 48363-2461 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal **\$275.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2020</u> Contributor Name and Address: Frank Vivio 6947 Northpoint Dr Troy, MI 48085-1244 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2020</u> Contributor Name and Address: Laura Vogel 6220 Whispering Meadows Drive White Lake, MI 48383-2776 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/09/2020</u> Contributor Name and Address: Michael Warren 30358 Georgetown Drive Beverly Hills, MI 48025-4727 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>75.00</u>	\$ <u>75.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Heidi Warrington 5366 Wild Daisy Ct Clarkston, MI 48346-4984 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Chief Nursing Officer</u> Employer <u>Pontiac General</u> Business Address <u>461 W Huron St Pontiac, MI 48341-1601</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>175.00</u>

Page Subtotal	\$275.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2020</u> Contributor Name and Address: Ray Watts 133 Maclynn Dr. Troy, MI 48098-4678 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/2020</u> Contributor Name and Address: Gregory Weddle 525 Coats Road Lake Orion, MI 48362-1017 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>25.00</u>	\$ <u>25.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Mary Jane Weipert 404 N. Lafayette South Lyon, MI 48178-1213 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Phillip Weipert 400 S. Lafayette St. South Lyon, MI 48178-1459 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal **\$275.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/2020</u> Contributor Name and Address: Barry Whitehead 683 Hillwood White Lake, MI 48383-2959 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/14/2020</u> Contributor Name and Address: Pat Wierzbicki 10704 Nadine Avenue Huntington Woods, MI 48070 If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/2020</u> Contributor Name and Address: Thomas Wilhelm 2785 Diane Marie Ct Waterford, MI 48329-4834 If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Wilhelm & Associates</u> Business Address <u>6485 Dixie Hwy Clarkston, MI 48346-3417</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/25/2020</u> Contributor Name and Address: Nicholas Winters 1819 Village Green Blvd Apt 204 Rochester Hills, MI 48307-5696 If from a committee, enter the committee treasurer's Name: _____ 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	\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal **\$700.00**

Grand Total of all Schedules 3A
(Complete on last page of Schedule) **\$140,205.00**



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2020</u> Contributor Name and Address: Gary Yang 20300 Spring Ln Northville, MI 48167-1948	\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Masoud S. Yono 7486 Lakepoint Dr. West Bloomfield, MI 48323-1044	\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>YONO FAMILY L.L.C.</u> Business Address <u>7486 LAKEPOINT West Bloomfield, MI 48323-1044</u>		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2020</u> Contributor Name and Address: Sam Yono 3955 Lakefront St. Waterford, MI 48328-4337	\$ <u>500.00</u>	\$ <u>500.00</u>
If from a committee, enter the committee treasurer's Name: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Global Ties</u> Business Address <u>1250 H Street NW Ste. 305 Washington, DC 20005-5906</u>		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # _____ Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2020</u> Contributor Name and Address: Leslie Zawada 2050 Wildflower Ln. Milford, MI 48380-1551	\$ <u>100.00</u>	\$ <u>100.00</u>
If from a committee, enter the committee treasurer's Name: _____ 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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal

\$1,200.00

Grand Total of all Schedules 3A
(Complete on last page of Schedule)

\$140,205.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

If contribution is from an individual, enter last name first and street address. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). If contribution is from a committee, enter committee name, street address and treasurer's name. Report <u>all</u> contributions,		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #	Is this contribution from a PAC? <input type="checkbox"/> YES	4. Date of Receipt <u>09/26/2020</u>	
Contributor Name and Address: Michael Zeer 6874 Maple Creek Blvd. West Bloomfield, MI 48322-4558		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
If from a committee, enter the committee treasurer's Name: _____			
5. If over \$100.00 cumulative, please provide:			
Occupation	<u>President</u>	Employer	<u>ZeerCO</u>
Business Address <u>30201 Orchard Lake Road Ste. 250 Farmington Hills, MI 48334-2292</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal	\$1,000.00
Grand Total of all Schedules 3A (Complete on last page of Schedule)	\$140,205.00



ITEMIZED EXPENDITURES

1. Committee I.D. Number 97381

SCHEDULE 1B

2. Committee Name Committee to Elect Mike Kowall

CANDIDATE COMMITTEE

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Anedot 1340 Poydras St Ste 1770 New Orleans, LA 70112-5204 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Card processing fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/16/2020</u>	\$ <u>\$875.60</u>
Expenditure # Name & Address: C&G Newspapers 13650 E Eleven Mile Rd Warren, MI 48089-1422 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Newspaper ads</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/13/2020</u>	\$ <u>\$3,233.00</u>
Expenditure # Name & Address: Great Dane Marketing Services 5833 Bingham Dr Troy, MI 48085-3866 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Campaign Management Fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/05/2020</u>	\$ <u>\$2,000.00</u>
Expenditure # Name & Address: Great Dane Marketing Services 5833 Bingham Dr Troy, MI 48085-3866 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Campaign Management Fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/09/2020</u>	\$ <u>\$4,000.00</u>

Page Subtotal	\$10,108.60
Grand Total of all Schedules 3B (Complete on last page of Schedule)	\$112,041.47



ITEMIZED EXPENDITURES

1. Committee I.D. Number 97381

SCHEDULE 1B

2. Committee Name Committee to Elect Mike Kowall

CANDIDATE COMMITTEE

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Greater Oakland Republican PO Box 583 Lake Orion, MI 48361-0583 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Direct Contribution</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/08/2020</u>	\$ <u>\$250.00</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Event Sponsorship</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>08/30/2020</u>	\$ <u>\$100.00</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Palm cards</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>08/30/2020</u>	\$ <u>\$313.76</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Yard Signs</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>08/30/2020</u>	\$ <u>\$4,467.90</u>

Page Subtotal	\$5,131.66
Grand Total of all Schedules 3B (Complete on last page of Schedule)	\$112,041.47



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Campaign Management Fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/05/2020</u>	\$ <u>\$5,570.50</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Yard Signs</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/26/2020</u>	\$ <u>\$3,301.90</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Campaign Management Fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/29/2020</u>	\$ <u>\$6,612.50</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Yard Signs</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/29/2020</u>	\$ <u>\$2,255.34</u>

Page Subtotal **\$17,740.24**
 Grand Total of all Schedules 3B **\$112,041.47**
 (Complete on last page of Schedule)



ITEMIZED EXPENDITURES

1. Committee I.D. Number 97381

SCHEDULE 1B

2. Committee Name Committee to Elect Mike Kowall

CANDIDATE COMMITTEE

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Mailing</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/11/2020</u>	\$ <u>\$17,941.00</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Postcard Printing</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/13/2020</u>	\$ <u>\$9,273.32</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Campaign Management Fee</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/15/2020</u>	\$ <u>\$7,627.50</u>
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Radio time purchase</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/15/2020</u>	\$ <u>\$13,000.00</u>

Page Subtotal	\$47,841.82
Grand Total of all Schedules 3B (Complete on last page of Schedule)	\$112,041.47



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Impact Media Professionals 43155 Main St Ste 2210 Novi, MI 48375-1778 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Radio time purchase</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/16/2020</u>	\$ <u>\$9,000.00</u>
Expenditure # Name & Address: JAC Advertising Consultants 2776 W Amberly Blvd Howell, MI 48843-9516 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Online ads</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/09/2020</u>	\$ <u>\$5,050.00</u>
Expenditure # Name & Address: JAC Advertising Consultants 2776 W Amberly Blvd Howell, MI 48843-9516 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Online ads</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/16/2020</u>	\$ <u>\$8,580.00</u>
Expenditure # Name & Address: Miller Media Vision 27437 Pond Dr New Hudson, MI 48165-8537 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Video taping</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/17/2020</u>	\$ <u>\$950.00</u>

Page Subtotal	\$23,580.00
Grand Total of all Schedules 3B (Complete on last page of Schedule)	\$112,041.47



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Multi-Lakes Conservation Association 3860 Newton Road Commerce Township, MI 48382-4273 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Program Advertising</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/11/2020</u>	\$ <u>\$250.00</u>
Expenditure # Name & Address: Oakland County Republican Party 42611 Woodward Ave Bloomfield Hills, MI 48304-5039 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Direct Contribution</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/10/2020</u>	\$ <u>\$532.07</u>
Expenditure # Name & Address: Spinal Column Media Group 1103 S Milford Rd Highland, MI 48357-4856 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Newspaper ad</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/14/2020</u>	\$ <u>\$1,675.00</u>
Expenditure # Name & Address: Strategic Public Solutions 4748 Marian Ave Warren, MI 48092-2589 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Fundraising Management</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>08/28/2020</u>	\$ <u>\$2,000.00</u>

Page Subtotal **\$4,457.07**
 Grand Total of all Schedules 3B
 (Complete on last page of Schedule) **\$112,041.47**



ITEMIZED EXPENDITURES

**SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

3. Name and address of person or vendor to whom the expenditure was made	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure # Name & Address: Strategic Public Solutions 4748 Marian Ave Warren, MI 48092-2589 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Fundraising Management</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/29/2020</u>	\$ <u>\$3,000.00</u>
Expenditure # Name & Address: Zoom 55 Almaden Blvd Fl 6 San Jose, CA 95113-1608 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Video Conference Service</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>09/08/2020</u>	\$ <u>\$58.29</u>
Expenditure # Name & Address: Zoom 55 Almaden Blvd Fl 6 San Jose, CA 95113-1608 <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Video Conference Service</u> <input type="checkbox"/> Check Box if expenditure is payment of Debt or Obligation reported on previous statement	Date <u>10/08/2020</u>	\$ <u>\$58.29</u>

Page Subtotal	\$3,116.58
Grand Total of all Schedules 3B (Complete on last page of Schedule)	\$112,041.47



**Fund Raiser Schedule 1F
Candidate Committee**

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/16/2020</u>	4. Number of Individuals Attending or Participating. (whichever is greater) 100	5. Type of Fund Raising Activity Meet & Greet	Address and Name (if any) of the place where the activity was 6167 White Lake Rd, Clarkston, MI 48346 <input type="checkbox"/> Private Residence
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7. Total Contributions \$27,820.00

8. Other Receipts \$0.00

9. Gross Receipts \$27,820.00

10. Total Cost of Event \$0.00

(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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 funder raiser must file a Fund Raiser Schedule for the event.



**Fund Raiser Schedule 1F
Candidate Committee**

1. Committee I.D. Number 97381
2. Committee Name Committee to Elect Mike Kowall

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/24/2020</u>	4. Number of Individuals Attending or Participating. (whichever is greater) 50	5. Type of Fund Raising Activity Meet & Greet	Address and Name (if any) of the place where the activity was 4000 Clubgate Dr. Bloomfield Hills, MI 48302 <input type="checkbox"/> Private Residence
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7. Total Contributions \$42,150.00
8. Other Receipts \$0.00
9. Gross Receipts \$42,150.00
10. Total Cost of Event \$12.00
(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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 funder raiser must file a Fund Raiser Schedule for the event.



**Fund Raiser Schedule 1F
Candidate Committee**

1. Committee I.D. Number 97381

2. Committee Name Committee to Elect Mike Kowall

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/08/2020</u>	4. Number of Individuals Attending or Participating. (whichever is greater) 75	5. Type of Fund Raising Activity Fundraiser featuring Sen. Jim Runestad, Rep. Kathy Crawford, Commissioner Phil	Address and Name (if any) of the place where the activity was 56870 Grand River Avenue New Hudson, MI 48165 <input type="checkbox"/> Private Residence
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7. Total Contributions \$4,200.00

8. Other Receipts \$0.00

9. Gross Receipts \$4,200.00

10. Total Cost of Event \$0.00

(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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 fundraiser must file a Fund Raiser Schedule for the event.