

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
**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: 10/21/2021 To: 12/31/2021
 Mo Day Year Mo Day Year

1. Committee I.D. Number
 97181

4. Candidate Last Name First Name M.I.
 McDonald Karen D

2. Committee Name
 Karen McDonald for Prosecutor

4a. Office Sought including District # or Community Served (If applicable)
 County Prosecutor - Countywide
 4b. County of Residence
 Oakland

5. Committee's Mailing Address
 PO Box 1750
 Birmingham, MI 48009
 Area Code and Phone (248) 229-5339
 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
 Susan Lichterman
 26080 York
 Huntington Woods, MI 48070
 Area Code & Phone (248) 351-3000

7. Treasurer's Business Address
 27777 Franklin Road
 Ste. 2500
 Southfield, MI 48034
 Area Code and Phone (248) 351-3000

8. Designated Record Keeper's Name and Mailing Address (if the committee has a Designated Record Keeper)
 Area Code & Phone _____

9. TYPE OF STATEMENT
 9a. Pre-Election OR 9b. Post-Election
 Pre-Election or Post Election Statement relates to:
 Primary
 Special
 Convention
 General
 School
 Caucus
 Date of Election, Convention, or Caucus

Required ONLY if candidate is not on the ballot for the current year:
 July Quarterly
 October Quarterly
 9c. Annual Statement 2021
 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 late fees or has any outstanding debt.
 Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
 Effective Date of Dissolution

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

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record Keeper Susan Lichterman Date 1/31/22
 Type or Print Name Signature
 Candidate Karen McDonald Date 1/31/22
 Type or Print Name Signature

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 97181

2. Committee Name Karen McDonald for Prosecutor

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative for this Election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) <u>\$3,030.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) <u>\$3,030.00</u>	(18.) <u>\$36,561.00</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>\$3,030.00</u>	(20.) <u>\$36,561.00</u>
<hr/> IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) <u>\$0.00</u>	(21.) <u>\$6,792.50</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) <u>\$0.00</u>	(22.) <u>\$0.00</u>
<hr/> EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) <u>\$9,250.15</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>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) <u>\$9,250.15</u>	(23.) <u>\$53,094.06</u>
<hr/> 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>
<hr/> 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>	
<hr/> BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) <u>\$36,483.94</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + <u>\$3,030.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>\$39,513.94</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>\$9,250.15</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) <u>\$30,263.79 *</u>	

*If your ending balance is negative, please recheck your math.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
--	-----------	--

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Adamiak, Kevin
 16441 Kinloch
 Redford, MI 48240-2428

\$50.00 \$50.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/30/2021

Name & Address
 Bronstein, Mr. Harvey S
 22490 Hallcroft Trl
 Southfield, MI 48034-5498

\$110.00 \$110.00

5. If over \$100.00 cumulative, please provide:
 Occupation Professor Employer Oakland Community College
 Business Address 22490 Hallcroft Trl Southfield, MI 48034-5498
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/07/2021

Name & Address
 Chudler, Neisha
 2410 Avondale St W
 Sylvan Lake, MI 48320-1602

\$15.00 \$45.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/07/2021

Name & Address
 Chudler, Neisha
 2410 Avondale St W
 Sylvan Lake, MI 48320-1602

\$15.00 \$60.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$190.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
--	-----------	--

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 Curtiss, Kristina
 3470 Scenic Hills Dr
 Williamsburg, MI 49690-9319

\$10.00 \$10.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/01/2021

Name & Address
 Dabish, Janet
 23377 N Stockton Ave
 Farmington Hills, MI 48336-3450

\$20.00 \$20.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Dare, Tricia
 170 Great Pines Dr
 Oxford, MI 48371-3446

\$200.00 \$200.00

5. If over \$100.00 cumulative, please provide:
 Occupation Assistant Prosecuting Attorney Employer Oakland County Prosecutor's
 Business Address 1200 N Telegraph Rd Pontiac, MI 48341-1032
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 DeCuir, Emille
 16278 Bright Morning Ct
 Riverside, CA 92503-0500

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal	\$255.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 Eckardt, Jenna
 54 Arthur Glick Blvd
 Franklin Park, NJ 08823-1663

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Garmo, Nicole
 543 Wilshire Dr
 Bloomfield Hills, MI 48302-1069

\$50.00 \$50.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/15/2021

Name & Address
 George, Derrick
 444 S Washington Ave
 Royal Oak, MI 48067-3824

\$10.00 \$530.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer George Law
 Business Address 444 S Washington Ave Royal Oak, MI 48067-3824
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/15/2021

Name & Address
 George, Derrick
 444 S Washington Ave
 Royal Oak, MI 48067-3824

\$10.00 \$540.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer George Law
 Business Address 444 S Washington Ave Royal Oak, MI 48067-3824
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$95.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 11/30/2021

Name & Address
 Goodwin, Cheryl
 3292 Green Oak Dr
 Commerce Township, MI 48390-1614

\$10.00 \$10.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 10/21/2021

Name & Address
 Higbee, Robert
 535 Griswold St
 Ste 1000
 Detroit, MI 48226-3692

\$250.00 \$250.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer Law Offices of Robert Higbee
 Business Address 535 Griswold St Ste 1000 Detroit, MI 48226-3692
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 Irvine, Margaret
 209 Vine Way
 Lynden, WA 98264-1048

\$20.00 \$20.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 10/21/2021

Name & Address
 Jacobsen, Carol
 2104 Pauline Blvd
 Apt 306
 Ann Arbor, MI 48103-5171

\$50.00 \$100.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal	\$330.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Keast, Marc
 2366 Wiltshire Rd
 Berkley, MI 48072-1824

\$100.00 \$100.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 LAKIN, LAURA
 6215 Cochiti Dr NW
 Albuquerque, NM 87120-4487

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Long, Emily
 4165 Nearbrook Rd
 Bloomfield Hills, MI 48302-2138

\$250.00 \$250.00

5. If over \$100.00 cumulative, please provide:
 Occupation Not Employed Employer Not Employed
 Business Address 4165 Nearbrook Rd Bloomfield Hills, MI 48302-2138
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/02/2021

Name & Address
 Martell, Edward
 PO Box 2492
 Taylor, MI 48180-6592

\$250.00 \$250.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer Perkins Law Group
 Business Address 615 Griswold St Ste 400 Detroit, MI 48226-3987
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$625.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 10/21/2021

Name & Address
 Martinez, Aaron
 31168 Shorecrest Dr
 Apt 28308
 Novi, MI 48377-4708

\$110.00 \$110.00

5. If over \$100.00 cumulative, please provide:
 Occupation Law Clerk Employer Nichols Law Firm PLLC
 Business Address 3452 E Lake Lansing Rd East Lansing, MI 48823-1511
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/02/2021

Name & Address
 McIntyre, Nicholas
 2341 Cambridge Rd
 Berkley, MI 48072-1708

\$150.00 \$150.00

5. If over \$100.00 cumulative, please provide:
 Occupation Assistant Prosecuting Employer Oakland County
 Business Address 1200 N Telegraph Rd Pontiac, MI 48341-1032
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 10/28/2021

Name & Address
 Meah, Amru
 30815 Billington Ct
 Beverly Hills, MI 48025-4908

\$10.00 \$10.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/04/2021

Name & Address
 Miranda, Jaime
 375 Acorn Park Dr
 Apt 2313
 Belmont, MA 02478-1446

\$55.00 \$55.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$325.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 12/04/2021

Name & Address
 Monahan, Collin
 238 E 111th St
 Apt 2D
 New York, NY 10029-2915

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/03/2021

Name & Address
 Morita, Tim
 2343 NE 21st Ave
 Portland, OR 97212-4648

\$200.00 \$200.00

5. If over \$100.00 cumulative, please provide:
 Occupation Founder Employer SBI
 Business Address 2343 NE 21st Ave Portland, OR 97212-4648
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Morrison, Barb
 2709 Windsor Dr
 Troy, MI 48085-3727

\$250.00 \$250.00

5. If over \$100.00 cumulative, please provide:
 Occupation Assistant Prosecuting Attorney Employer Oakland County Prosecutor's
 Business Address 1200 N Telegraph Rd Pontiac, MI 48341-1032
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Norman, Michael
 7473 Coach Ln
 West Bloomfield, MI 48322-4024

\$250.00 \$250.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer Barton Morris
 Business Address 520 N Main St Royal Oak, MI 48067-1815
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$725.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 O'Brien, Shannon
 2023 Roseland Ave
 Royal Oak, MI 48073-5014

\$50.00 \$50.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 11/07/2021

Name & Address
 Polanco, Ricardo
 1967 Howland Blvd
 White Lake, MI 48386-1857

\$10.00 \$30.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/07/2021

Name & Address
 Polanco, Ricardo
 1967 Howland Blvd
 White Lake, MI 48386-1857

\$10.00 \$40.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/02/2021

Name & Address
 Rico, Jessica
 1849 Kinmount Dr
 Lake Orion, MI 48359-1642

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$95.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

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--	-----------	--

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Rillovick, Darren
 45 Lura St
 Lowell, MA 01851-3509

\$25.00 \$25.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 10/28/2021

Name & Address
 Rose, SYLVIA
 29100 Pointe O Woods Pl
 Apt 207
 Southfield, MI 48034-1227

\$20.00 \$20.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/05/2021

Name & Address
 Saro, Rennell
 73-1279 Kaiminani Dr
 Kailua Kona, HI 96740-9584

\$30.00 \$30.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Schwartz, Steven
 240 Dawes St
 Birmingham, MI 48009

\$150.00 \$150.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer Self
 Business Address 240 Dawes St. Birmingham, MI 48009
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$225.00
 Grand Total of all Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED CONTRIBUTIONS
 SCHEDULE 1A
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. PAC Receipt? YES 4. DATE OF RECEIPT 10/21/2021

Name & Address
 Stanley, Lesley
 57 Park Pl
 Upp
 Pontiac, MI 48342-3144

\$10.00 \$10.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/04/2021

Name & Address
 Swearingen, Valerie
 2408 Fayette St
 North Kansas City, MO 64116-3055

\$50.00 \$50.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/01/2021

Name & Address
 Talwar, Mrs. Gillian H
 28825 Salem Rd
 Farmington Hills, MI 48334-3139

\$55.00 \$55.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 12/08/2021

Name & Address
 Vida, Cindy
 1059 Alter Rd
 Bloomfield Hills, MI 48304-1401

\$50.00 \$50.00

5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal	\$165.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$3,030.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
 ITEMIZED EXPENDITURES
 SCHEDULE 1B
 CANDIDATE COMMITTEE

1. Committee I.D. Number 97181
 2. Committee Name Karen McDonald for Prosecutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Actblue Address PO Box 441146 West Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/03/2021</u> Date	<u>\$64.90</u>
Name Actblue Address PO Box 441146 West Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/04/2021</u> Date	<u>\$84.46</u>
Name Actblue Address PO Box 441146 West Somerville, MA 02144-0031 <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/03/2021</u> Date	<u>\$2.33</u>
Name Comerica Bank Address PO Box 3001 Birmingham, MI 48012-3001 <input type="checkbox"/> Fund Raiser	Purpose: <u>Service Charge</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/17/2021</u> Date	<u>\$0.55</u>
Name Flywheel Address 1111 N 13th St Ste 208 Omaha, NE 68102-4251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Web Hosting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/03/2021</u> Date	<u>\$25.00</u>

Subtotal this page \$177.24
 Grand Total of All Schedules 1B
 (Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS
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Name Flywheel Address 1111 N 13th St Ste 208 Omaha, NE 68102-4251 <input type="checkbox"/> Fund Raiser	Purpose: <u>Web Hosting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/03/2021</u> Date	<u>\$25.00</u>
Name Google Address 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 <input type="checkbox"/> Fund Raiser	Purpose: <u>Software</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/04/2021</u> Date	<u>\$120.00</u>
Name Google Address 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 <input type="checkbox"/> Fund Raiser	Purpose: <u>Software</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/03/2021</u> Date	<u>\$120.00</u>
Name Mailchimp Address 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172 <input type="checkbox"/> Fund Raiser	Purpose: <u>Email</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/2021</u> Date	<u>\$109.97</u>
Name Mailchimp Address 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172 <input type="checkbox"/> Fund Raiser	Purpose: <u>Email</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/30/2021</u> Date	<u>\$109.97</u>

Subtotal this page \$484.94

Grand Total of All Schedules 1B
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 BUREAU OF ELECTIONS
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Name Mailchimp Address 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172 <input type="checkbox"/> Fund Raiser	Purpose: <u>Email</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/30/2021</u> Date	<u>\$109.97</u>
Name NGP VAN, Inc Address 1445 New York Ave NW Ste 200 Washington, DC 20005-2158 <input type="checkbox"/> Fund Raiser	Purpose: <u>Database services</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/26/2021</u> Date	<u>\$960.00</u>
Name The Action Factory, LLC Address 3317 W Fullerton Ave Chicago, IL 60647-2513 <input type="checkbox"/> Fund Raiser	Purpose: <u>Invoice Digital</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/2021</u> Date	<u>\$2,518.00</u>
Name The Action Factory, LLC Address 3317 W Fullerton Ave Chicago, IL 60647-2513 <input type="checkbox"/> Fund Raiser	Purpose: <u>Invoice Digital</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/22/2021</u> Date	<u>\$5,000.00</u>

Subtotal this page	\$8,587.97
Grand Total of All Schedules 1B (Complete on last page of Schedule)	\$9,250.15

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