

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: 07/21/2022 To: 10/20/2022
 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)
 Attorney General - 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 _____
 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
 Type or Print Name

[Signature] Date 10/25/2022
 Signature

Candidate Karen McDonald
 Type or Print Name

[Signature] Date 10/25/2022
 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.) \$9,725.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$9,725.00	(18.) \$138,044.00
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$0.00	(19.) \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$9,725.00	(20.) \$138,044.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$0.00	(21.) \$6,792.50
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$0.00	(22.) \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$2,809.88	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$2,809.88	(23.) \$62,185.33
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$0.00	(24.) \$0.00
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$0.00	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$115,890.40	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + \$9,725.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$125,615.40	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$2,809.88	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$122,805.52 *	

*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 09/12/2022

Name & Address
 Archer Jr, Dennis
 151 W Congress St
 Detroit, MI 48226-3204

\$4,000.00 \$4,000.00

5. If over \$100.00 cumulative, please provide:
 Occupation Lawyer Employer Ignition Media Group
 Business Address 151 W Congress St Ste 410 Detroit, MI 48226-3204
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 09/12/2022

Name & Address
 Brochert, Mr.Max
 38500 Woodward Ave
 Bloomfield Hills, MI 48304-5047

\$1,500.00 \$1,500.00

5. If over \$100.00 cumulative, please provide:
 Occupation Vice President Employer KAM Yacht Sales
 Business Address 38500 Woodward Ave Bloomfield Hills, MI 48304-5047
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 09/12/2022

Name & Address
 Bryant, Ms.Michele
 250 Butternut Ln
 Stamford, CT 06903-3830

\$1,000.00 \$1,000.00

5. If over \$100.00 cumulative, please provide:
 Occupation National Business Services Employer Deloitte
 Business Address 695 E Main St Ste 6 Stamford, CT 06901-2150
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 08/07/2022

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

\$15.00 \$180.00

5. If over \$100.00 cumulative, please provide:
 Occupation Paralegal 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

Page Subtotal \$6,515.00

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 09/07/2022

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

\$15.00 \$195.00

5. If over \$100.00 cumulative, please provide:
 Occupation Paralegal Employer Oakland County Prosecutor's
 Business Address 1200 N Telegraph Rd Pontiac, MI 48391-1032
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 10/07/2022

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

\$15.00 \$210.00

5. If over \$100.00 cumulative, please provide:
 Occupation Paralegal Employer Oakland County Prosecutor's
 Business Address 1200 N Telegraph Rd Pontiac, MI 48391-1032
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 08/01/2022

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

\$20.00 \$180.00

5. If over \$100.00 cumulative, please provide:
 Occupation Not Employed Employer Not Employed
 Business Address 23377 N Stockton Ave Farmington Hills, MI 48336-3450
 Type of Contribution: Direct Loan from a person Fund Raiser

3. PAC Receipt? YES 4. DATE OF RECEIPT 09/01/2022

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

\$20.00 \$200.00

5. If over \$100.00 cumulative, please provide:
 Occupation Not Employed Employer Not Employed
 Business Address 23377 N Stockton Ave Farmington Hills, MI 48336-3450
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$70.00

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. Name & Address Dabish, Janet 23377 N Stockton Ave Farmington Hills, MI 48336-3450	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>10/01/2022</u>	\$20.00	\$220.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer <u>Not Employed</u> Business Address <u>23377 N Stockton Ave Farmington Hills, MI 48336-3450</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Name & Address Fraiberg, Matt 2074 Lakeshire Dr West Bloomfield, MI 48323-3835	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>08/10/2022</u>	\$30.00	\$265.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Fraiberg & Pernie</u> Business Address <u>1000 S Old Woodward Ave Ste 103 Birmingham, MI 48009-6729</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Name & Address Fraiberg, Matt 2074 Lakeshire Dr West Bloomfield, MI 48323-3835	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/10/2022</u>	\$30.00	\$295.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Fraiberg & Pernie</u> Business Address <u>1000 S Old Woodward Ave Ste 103 Birmingham, MI 48009-6729</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Name & Address Fraiberg, Matt 2074 Lakeshire Dr West Bloomfield, MI 48323-3835	PAC Receipt? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>10/10/2022</u>	\$30.00	\$325.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Fraiberg & Pernie</u> Business Address <u>1000 S Old Woodward Ave Ste 103 Birmingham, MI 48009-6729</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

Page Subtotal \$110.00

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 08/15/2022

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

\$10.00 \$620.00

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 09/15/2022

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

\$10.00 \$630.00

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 10/15/2022

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

\$10.00 \$640.00

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 09/12/2022

Name & Address
 Pitts, Byron H
 535 Griswold St
 Ste 1630
 Detroit, MI 48226-3667

\$1,500.00 \$1,500.00

5. If over \$100.00 cumulative, please provide:
 Occupation Attorney Employer Byron Pitts
 Business Address 535 Griswold St Detroit, MI 48226-3604
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$1,530.00
 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? <input type="checkbox"/> YES	4. DATE OF RECEIPT <u>09/12/2022</u>
Name & Address		
Torre, Mr. Frank		
255 E Brown St		
Ste 320		
Birmingham, MI 48009-6209		
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Co-CEO</u>	Employer <u>Signal Restoration Services</u>	
Business Address <u>2490 Industrial Row Dr Troy, MI 48084-7005</u>		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

\$1,500.00	\$1,500.00
------------	------------

Page Subtotal	\$1,500.00
Grand Total of all Schedules 1A (Complete on last page of Schedule)	\$9,725.00

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>08/05/2022</u> Date	<u>\$1.13</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>09/06/2022</u> Date	<u>\$1.13</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>10/05/2022</u> Date	<u>\$83.63</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>08/03/2022</u> Date	<u>\$25.00</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>09/06/2022</u> Date	<u>\$25.00</u>

Subtotal this page \$135.89
 Grand Total of All Schedules 1B
 (Complete on last page of Schedule)

Enter this total on
line 8a 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 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>10/03/2022</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>08/01/2022</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>09/01/2022</u> Date	<u>\$119.99</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>10/03/2022</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>07/29/2022</u> Date	<u>\$123.00</u>

Subtotal this page \$507.99

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

Enter this total on
 line 8a 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 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>08/29/2022</u> Date	<u>\$123.00</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>09/29/2022</u> Date	<u>\$123.00</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>07/21/2022</u> Date	<u>\$960.00</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>09/29/2022</u> Date	<u>\$960.00</u>

Subtotal this page	\$2,166.00
Grand Total of All Schedules 1B (Complete on last page of Schedule)	\$2,809.88

Enter this total on
 line 8a of Summary
 Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

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

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/12/2022</u>	4. Number of Individuals Attending or Participating (whichever is greater) 20	5. Type of Fund Raising Activity Cocktail Reception	6. Address and Name (if any) of the place where the activity was held 19240 Burlington Drive Detroit, MI 48203 <input type="checkbox"/> Private Residence
---	--	--	--

7. Total Contributions	\$9,500.00
8. Other Receipts	\$0.00
9. Gross Receipts (Add lines 7 and 8)	\$9,500.00
10. Total Cost of Event	\$0.00

*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-K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.