



FILED

07 DEC 2023 PM 08:00

OAKLAND COUNTY CLERK  
PONTIAC, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE  
COVER PAGE**

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 10/23/2023 to 11/27/2023

1. Committee I.D. Number

**95371**

2. Committee Name

**FRIENDS OF MIKE FOURNIER**

4. Candidate Last Name

**FOURNIER**

First Name

**MICHAEL**

M.I.

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

**MAYOR, ROYAL OAK**

4b. County of Residence **OAKLAND COUNTY**

5. Committee's Mailing Address

**711 S ALEXANDER AVE  
ROYAL OAK, MI 48067**

Area Code and Phone (248) 224-3772  
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

**MICHAEL FOURNIER  
711 S ALEXANDER AVE  
ROYAL OAK, MI 48067**

Area Code & Phone (248) 224-3772

7. Treasurer's Business Address

**711 S ALEXANDER AVE  
ROYAL OAK, MI 48067**

Area Code and Phone (248) 224-3772

8. Designated Record keeper's Name and Mailing 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

11/07/2023

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

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

12/07/2023

Candidate

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

12/07/2023



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 95371

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name FRIENDS OF MIKE FOURNIER

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>6,175.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>6,175.00</u>	(18.) \$ <u>36,293.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>6,175.00</u>	(20.) \$ <u>36,293.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>180.01</u>	(21.) \$ <u>2,645.51</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>37,750.08</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>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>37,750.08</u>	(23.) \$ <u>48,996.09</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (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>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed <b>by</b> the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed <b>to</b> the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>43,051.84</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>6,175.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>49,226.84</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>37,750.08</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>11,476.76</u> *	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95371  
2. Committee Name FRIENDS OF MIKE FOURNIER

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/24/2023</u> Name & Address: <b>JEFF PLACHTA</b> <b>2621 BEMBRIDGE RD</b> <b>ROYAL OAK, MI 48073</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/29/2023</u> Name & Address: <b>ANDREW LORENZ</b> <b>1037 N ALTADENA AVE</b> <b>ROYAL OAK, MI 48067</b>		\$ <u>75.00</u>	\$ <u>75.00</u>
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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/31/2023</u> Name & Address: <b>ROBERT MURRAY</b> <b>2314 ROWLAND AVE</b> <b>ROYAL OAK, MI 48067</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>CONTRACT DESIGN GROUP</u> Business Address <u>423 N MAIN ST, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/31/2023</u> Name & Address: <b>UAW MICHIGAN V-PAC</b> <b>8000 E JEFFERSON AVE</b> <b>DETROIT, MI 48214</b>		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
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 **6,175.00**

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

**6,175.00**

Enter this total on  
line 3a of Summary  
Page.



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number **95371**

## CANDIDATE COMMITTEE

2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>SHIRLEY HUNT</b> <b>23090 SCOTIA RD</b> <b>OAK PARK, MI 48237</b> <b>If over \$100.00 cumulative, please provide:</b> Occupation: <b>RETIRED</b> Employer Name & Business Address: <b>RETIRED</b> <b>23090 SCOTIA RD,</b> <b>OAK PARK, MI 48237</b> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <b>STAMPS AND MAILERS</b> 5. Date Of Receipt: <b>11/03/2023</b> 6. Vendor Name & Address:	\$ <b>180.01</b>	\$ <b>180.01</b>
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address:   <b>If over \$100.00 cumulative, please provide:</b> Occupation: Employer Name & Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description 5. Date Of Receipt: 6. Vendor Name & Address:  <a href="#">Click Here for Memo Itemization</a>	\$	\$
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address:   <b>If over \$100.00 cumulative, please provide:</b> Occupation: Employer Name & Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description 5. Date Of Receipt: 6. Vendor Name & Address:  <a href="#">Click Here for Memo Itemization</a>	\$	\$

Page Subtotal

**180.01**

**180.01**

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

**180.01**

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **95371**  
2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CALL ORGANIZATION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/24/2023</b> Date	<b>\$ 1,400.00</b>
<b>Expenditure #2</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/24/2023</b> Date	<b>\$ 217.48</b>
<b>Expenditure #3</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/24/2023</b> Date	<b>\$ 459.27</b>
<b>Expenditure #4</b> Name <b>ACTBLU</b>  Address <b>366 SUMMER ST</b> <b>SOMERVILLE, MA 02144</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>ONLINE CONTRIBUTION FEES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/26/2023</b> Date	<b>\$ 4.17</b>
<b>Expenditure #5</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAILING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/30/2023</b> Date	<b>\$ 3,000.00</b>

Subtotal this page **5,080.92**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **95371**  
2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>GRAPHIC DESIGN</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/30/2023</b> Date	<b>\$ 450.00</b>
Expenditure #2 Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAILING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/31/2023</b> Date	<b>\$ 3,000.00</b>
Expenditure #3 Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/31/2023</b> Date	<b>\$ 400.00</b>
Expenditure #4 Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAILING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/01/2023</b> Date	<b>\$ 940.57</b>
Expenditure #5 Name <b>ACTBLU</b>  Address <b>366 SUMMER ST</b> <b>SOMERVILLE, MA 02144</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>ONLINE CONTRIBUTION FEES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/01/2023</b> Date	<b>\$ 3.01</b>

Subtotal this page

**4,793.58**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **95371**  
2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 1,297.44</b>
<b>Expenditure #2</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 2,059.81</b>
<b>Expenditure #3</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 1,510.44</b>
<b>Expenditure #4</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 2,048.68</b>
<b>Expenditure #5</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 1,315.92</b>

Subtotal this page **8,232.29**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **95371**  
2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 2,404.11</b>
<b>Expenditure #2</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 1,825.65</b>
<b>Expenditure #3</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAIL</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 336.55</b>
<b>Expenditure #4</b> Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CONSULTING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/03/2023</b> Date	<b>\$ 1,250.00</b>
<b>Expenditure #5</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAILERS</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/06/2023</b> Date	<b>\$ 442.55</b>

Subtotal this page

**6,258.86**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **95371**  
2. Committee Name **FRIENDS OF MIKE FOURNIER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>INLAND PRESS</b>  Address <b>2001 W LAFAYETTE BLVD</b> <b>DETROIT, MI 48216</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>PRINT AND MAILERS</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/09/2023</b> Date	<b>\$ 3,000.00</b>
<b>Expenditure #2</b> Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CONSULTING, DESIGN WORK</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/24/2023</b> Date	<b>\$ 5,775.00</b>
<b>Expenditure #3</b> Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CONSULTING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/25/2023</b> Date	<b>\$ 750.00</b>
<b>Expenditure #4</b> Name <b>PIVOT POINT STRATEGIES</b>  Address <b>312 FAIRGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CONSULTING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>11/26/2023</b> Date	<b>\$ 3,859.43</b>
<b>Expenditure #5</b> Name  Address  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **13,384.43**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **37,750.08**

Enter this total  
on line 8a of  
Summary Page