



**FILED**  
**25 OCT 2024 PM 04:49**  
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: 08/27/2024 to 10/20/2024

1. Committee I.D. Number  
**97181**  
  
2. Committee Name  
**KAREN MCDONALD FOR PROSECUTOR**

4. Candidate Last Name **MCDONALD** First Name **KAREN** M.I. **D**  
4a. Office Sought Including District # or Community Served (If applicable)  
**COUNTY PROSECUTOR, OAKLAND COUNTY**  
4b. County of Residence **OAKLAND COUNTY**

5. Committee's Mailing Address  
**PO BOX 1750  
STE. 100  
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  
**26080 YORK  
HUNTINGTON WOODS, MI 48070**  
  
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 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  
11/05/2024

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 \_\_\_\_\_ / \_\_\_\_\_  
Type or Print Name Signature  
Submitted electronically, signature on file Date 10/25/2024  
  
Candidate \_\_\_\_\_ / \_\_\_\_\_  
Type or Print Name Signature  
Submitted electronically, signature on file Date 10/25/2024



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 this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>147,038.80</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>147,038.80</u>	(18.) \$ <u>857,451.80</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>147,038.80</u>	(20.) \$ <u>857,451.80</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>5,125.00</u>	(21.) \$ <u>36,718.78</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>151,029.25</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>151,029.25</u>	(23.) \$ <u>426,118.19</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>482,270.91</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>147,038.80</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>629,309.71</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>151,029.25</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>478,280.46</u> *	



**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, 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>08/27/2024</u> Name & Address: <b>RENEE AXT</b> <b>3821 CRESTLAKE DR</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>RCP ASSOCIATES</u> Business Address <u>3821 CRESTLAKE DR, BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>MOTHER BADALUCCO</b> <b>1440 OTTER DR</b> <b>ROCHESTER HILLS, MI 48306</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>NEISHA CHUDLER</b> <b>2410 AVONDALE ST W</b> <b>SYLVAN LAKE, MI 48320</b>	\$ <u>20.00</u>	\$ <u>575.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARALEGAL</u> Employer <u>OAKLAND COUNTY PROSECUTOR'S OFFICE</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>KELLY COLLINS</b> <b>272 W DRAYTON</b> <b>FERNDAL, MI 48220</b>	\$ <u>250.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,370.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>08/27/2024</u> Name & Address: <b>NICOLE GARMO</b> <b>6563 STILLWELL</b> <b>WEST BLOOMFIELD TOWNSHIP, MI 48322</b>	\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>CAROLYN GLENN</b> <b>595 ARTHUR AVE</b> <b>PONTIAC, MI 48341</b>	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>SARAH GREENE</b> <b>42160 WOODWARD AVE</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>250.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>GEOFFREY GREENLEES</b> <b>1111 N OLD WOODWARD AVE</b> <b>BIRMINGHAM, MI 48009</b>	\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 600.00

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>08/27/2024</u> Name & Address: <b>ANDRE HAGE</b> 24068 WESTMONT DR NOVI, MI 48374	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>DAVID HUTSON</b> 1723 FLEMINGTON DR TROY, MI 48098	\$ <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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>JEFFREY KAELIN</b> 65 OAK PL WHITE LAKE, MI 48386	\$ <u>500.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>JENNFER KRUTEN</b> 3375 CAMBRIDGE AVE DETROIT, MI 48221	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 700.00

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**ITEMIZED CONTRIBUTIONS  
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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>SAMIRA MONTLOUIS</b> <b>43576 ELLESMERE CIR</b> <b>NOVI, MI 48377</b>	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>PATRICK O'MEARA</b> <b>101 FOXBORO DR</b> <b>ROCHESTER HILLS, MI 48309</b>	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>ROLAND PEET</b> <b>924 POLO PL</b> <b>AUBURN HILLS, MI 48326</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/27/2024</u> Name & Address: <b>RICARDO POLANCO</b> <b>1967 HOWLAND BLVD</b> <b>WHITE LAKE, MI 48386</b>	\$ <u>250.00</u>	\$ <u>460.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **450.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
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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, 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>08/27/2024</u> Name & Address: <b>MAGGIE ROURKE</b> <b>319 CRESTVIEW BLVD</b> <b>COMMERCE, MI 48390</b>	\$ <u>50.00</u>	\$ <u>50.00</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>08/27/2024</u> Name & Address: <b>DILLON SALGE</b> <b>1257 PARKLAND RD</b> <b>ORION, MI 48360</b>	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>RONNIE BOJI</b> <b>255 S OLD WOODWARD AVE</b> <b>BIRMINGHAM, MI 48009</b>	\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>BOJI GROUP</u> Business Address <u>255 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>MEGAN BONANNI</b> <b>2500 VINSETTA BLVD</b> <b>ROYAL OAK, MI 48073</b>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PITT MCGEHEE</u> Business Address <u>117 W 4TH ST, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **600.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97181  
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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>08/28/2024</u> Name & Address: <b>DAVID CHAMPINE</b> <b>807 MAPLEGROVE AVE</b> <b>ROYAL OAK, MI 48067</b>	<b>\$ 50.00</b>	<b>\$ 50.00</b>
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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>EMILINA DOUDA</b> <b>2883 RIVERSIDE DR</b> <b>WATERFORD, MI 48329</b>	<b>\$ 100.00</b>	<b>\$ 100.00</b>
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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>ELLENA GATZAROS</b> <b>400 MONROE ST</b> <b>DETROIT, MI 48226</b>	<b>\$ 500.00</b>	<b>\$ 500.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>INVESTOR</u> Employer <u>SELF</u> Business Address <u>400 MONROE ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>TODD LANCTOT</b> <b>16051 KEPPEM AVE</b> <b>ALLEN PARK, MI 48101</b>	<b>\$ 500.00</b>	<b>\$ 500.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>401 N MAIN ST, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,150.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97181  
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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>08/28/2024</u> Name & Address: <b>STEVEN MAMAT</b> 24100 SOUTHFIELD RD SOUTHFIELD, MI 48075	<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ELIMITIX</u> Business Address <u>2111 WOODWARD AVE, DETROIT, MI 48201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>RALPH MCDOWELL</b> 8561 HENDRIE BLVD HUNTINGTON WOODS, MI 48070	<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BODMAN</u> Business Address <u>1901 GRISWOLD ST, NORTHVILLE, MI 48167</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/28/2024</u> Name & Address: <b>VINNIE PORTER</b> 9750 ALLEN RD ALLEN PARK, MI 48101	<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>SHARYL ACKERMAN</b> 365 PINE RIDGE DR BLOOMFIELD HILLS, MI 48304	<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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,350.00**

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

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line 3a of Summary  
Page.



**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, 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>08/29/2024</u> Name & Address: <b>SARAH ALOGAILI</b> 1314 MCLEAN AVE ROYAL OAK, MI 48067	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>ASCENDANT HEALTH</u> Business Address <u>24681 NORTHWESTERN HWY, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>JORDAN BOLTON</b> 844 PILGRIM AVE BIRMINGHAM, MI 48009	\$ <u>100.00</u>	\$ <u>640.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT LAW</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>MICHELE BRYANT</b> 250 BUTTERNUT LN STAMFORD, CT 06903	\$ <u>500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>DELOITTE</u> Business Address <u>695 E MAIN ST, STAMFORD, CT 06902</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>CAROL DRILLER</b> 11666 BRANDYWINE DR BRIGHTON, MI 48114	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 900.00

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

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**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, 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>08/29/2024</u> Name & Address: <b>DAVID GORCYCA</b> 6608 TREE KNOLL DR TROY, MI 48098  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>GMH PC</u> Business Address <u>101 W BIG BEAVER RD, TROY, MI 48084</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>DAN GRANO</b> 22701 BAYVIEW DR ST CLAIR SHORES, MI 48081  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>525 W OTTAWA ST, LANSING, MI 48933</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>VINCENT HAISHA</b> 826 CHAPIN AVE BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>FLOOD LAW</u> Business Address <u>155 W CONGRESS ST, DETROIT, MI 48226</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>NICKOLAS HANNAWA</b> 2909 E BIG BEAVER RD TROY, MI 48083  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>HANNAWA HIRMIZ LAW PLLC</u> Business Address <u>2909 E BIG BEAVER RD, TROY, MI 48083</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>2,700.00</u>

Page Subtotal 2,250.00

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

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**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, 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>08/29/2024</u> Name & Address: <b>BRIDGET HATHAWAY</b> <b>360 BELANGER AVE</b> <b>GROSSE POINTE FARMS, MI 48236</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>JUDGE</u> Employer <u>WAYNE COUNTY</u> Business Address <u>1441 ST ANTOINE, DETROIT, MI 48226</u> 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>150.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>DANA HATHAWAY</b> <b>15827 WINDMILL POINTE DR</b> <b>GROSSE POINTE PARK, MI 48230</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>JUDGE</u> Employer <u>WAYNE COUNTY</u> Business Address <u>2 WOODWARD AVE, DETROIT, MI 48226</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>DANIEL HATHAWAY</b> <b>65 SHOREHAM RD</b> <b>GROSSE POINTE SHORES, MI 48236</b>  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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>RICHARD HATHAWAY</b> <b>514 HIDDEN LN</b> <b>GROSSE POINTE WOODS, MI 48236</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>WAYNE COUNTY</u> Business Address <u>1441 ST ANTOINE, DETROIT, MI 48226</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 **1,000.00**

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

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**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, 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>08/29/2024</u> Name & Address: <b>MELVIN HOLLOWELL</b> <b>8162 E JEFFERSON AVE</b> <b>DETROIT, MI 48214</b>	<u>\$ 750.00</u>	<u>\$ 750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>POWELL LAW FIRM</u> Business Address <u>8162 E JEFFERSON AVE, DETROIT, MI 48214</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>JAMES HOWARTH</b> <b>207 GROSSE POINTE BLVD</b> <b>GROSSE POINTE FARMS, MI 48236</b>	<u>\$ 250.00</u>	<u>\$ 1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>645 GRISWOLD ST, DETROIT, MI 48226</u> 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>08/29/2024</u> Name & Address: <b>VEN JOHNSON</b> <b>264 GEORGE ST</b> <b>BIRMINGHAM, MI 48009</b>	<u>\$ 1,000.00</u>	<u>\$ 1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>535 GRISWOLD ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>KEVEH KASHEF</b> <b>65 BELLE MEADE RD</b> <b>GROSSE POINTE SHORES, MI 48236</b>	<u>\$ 250.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BUTZEL LONG</u> Business Address <u>4100 WOODWARD AVE, DETROIT, MI 48201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 2,250.00

Grand Total of All Schedules 1A  
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**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, 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>08/29/2024</u> Name & Address: <b>SHANE KOLO</b> 2344 WINDEMERE RD BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2344 WINDEMERE RD, BIRMINGHAM, MI 48009</u> 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>300.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>LISA LANGTON</b> 4825 RIVERCHASE DR TROY, MI 48098  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>JUDGE</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>VALENTINA LUCAJ</b> 101 W BIG BEAVER RD TROY, MI 48084  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>101 W BIG BEAVER RD, TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>TIMOTHY MATOUK</b> 22601 RIO VISTA ST ST CLAIR SHORES, MI 48081  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>INVESTIGATOR</u> Employer <u>WAYNE COUNTY</u> Business Address <u>5301 RUSSELL ST, DETROIT, MI 48211</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>

Page Subtotal **1,300.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97181  
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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>08/29/2024</u> Name & Address: <b>ERIC MICHAELS</b> 40285 PLYMOUTH RD PLYMOUTH, MI 48170  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>CONSULTANT</u> Employer <u>AZ POLITICAL</u> Business Address <u>40285 PLYMOUTH RD, PLYMOUTH, MI 48170</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>ROBERT MORAD</b> 355 S OLD WOODWARD AVE 100 BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>355 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> 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>1,900.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>JULES OLSMAN</b> 26341 HENDRIE BLVD HUNTINGTON WOODS, MI 48070  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>OLSMAN MACKENZIE</u> Business Address <u>2684 W ELEVEN MILE RD, BERKLEY, MI 48072</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>1,300.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>LATIF ORAM</b> 3294 WARDS POINT DR WEST BLOOMFIELD TOWNSHIP, MI 48324  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>MANAGER</u> Employer <u>INTERNATIONAL OUTDOOR</u> Business Address <u>28423 MIDDLEBELT RD, FARMINGTON HILLS, MI 48334</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>1,250.00</u>

Page Subtotal **1,150.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97181  
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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>08/29/2024</u> Name & Address: <b>TODD PERKINS</b> <b>49 HAMPTON RD</b> <b>GROSSE POINTE SHORES, MI 48236</b>	<u>\$ 500.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>615 GRISWOLD ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>JOHN J PIETRFESA</b> <b>PO BOX 99</b> <b>BLOOMFIELD HILLS, MI 48303</b>	<u>\$ 250.00</u>	<u>\$ 1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PSYCHOLOGIST</u> Employer <u>SELF</u> Business Address <u>74 W LONG LAKE RD, STE. 104, BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>ROCHESTER AREA DEMOCRATIC CLUB</b> <b>870 S ROCHESTER RD</b> <b>ROCHESTER HILLS, MI 48307</b>	<u>\$ 300.00</u>	<u>\$ 300.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2024</u> Name & Address: <b>LAYNE SAKWA</b> <b>6450 WORLINGTON RD</b> <b>BLOOMFIELD HILLS, MI 48301</b>	<u>\$ 50.00</u>	<u>\$ 1,300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FRIED SAPERSTEIN SAKWA</u> Business Address <u>150 W 2ND ST, STE. 250, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,100.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97181  
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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>08/29/2024</u> Name & Address: <b>JOHN SKRZYNSKI</b> 2902 BEMBRIDGE RD ROYAL OAK, MI 48073		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/01/2024</u> Name & Address: <b>MOUSSA BAZZI</b> 6160 UNIVERSITY DR DEARBORN HEIGHTS, MI 48127		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DOCTOR</u> Employer <u>PROVIDER TEK PLLC</u> Business Address <u>4700 GREENFIELD RD, DEARBORN, MI 48126</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/01/2024</u> Name & Address: <b>DAVID GORDON</b> 16805 BAY IS CT BONITA SPRINGS, FL 34135		\$ <u>25.00</u>	\$ <u>25.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/03/2024</u> Name & Address: <b>MICHAEL MEERON</b> 1439 W WASHINGTON AVE ROYAL OAK, MI 48067		\$ <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			

Page Subtotal **1,375.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/05/2024</u> Name & Address: <b>STACEY JEWETT</b> 1146 S LONG LAKE BLVD LAKE ORION, MI 48362	<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF</u> Business Address <u>1146 S LONG LAKE BLVD, LAKE ORION, MI 48362</u> 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>09/06/2024</u> Name & Address: <b>KENDELL BOUTELL</b> 4942 TREESIDE LN TROY, MI 48098	<u>\$ 100.00</u>	<u>\$ 400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MORTGAGE UNDERWRITER</u> Employer <u>ROCKET MORTGAGE</u> Business Address <u>1050 WOODWARD AVE, DETROIT, MI 48226</u> 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>09/06/2024</u> Name & Address: <b>MARCUS EVANGELISTA</b> 790 DAVIS AVE BIRMINGHAM, MI 48009	<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>EVANGELISTA DEVELOPMENT LLC</u> Business Address <u>10475 FARMINGTON RD, LIVONIA, MI 48150</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>DEBORAH GORDON</b> 798 PILGRIM AVE BIRMINGHAM, MI 48009	<u>\$ 1,000.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>33 BLOOMFIELD HILLS PKWY, BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,850.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/06/2024</u> Name & Address: <b>THOMAS KRALL</b> 26640 HARPER AVE ST CLAIR SHORES, MI 48081	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>DAVID KRAMER</b> 364 W LEWISTON AVE FERNDALE, MI 48220	\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INSURANCE BROKER</u> Employer <u>GEMINI RISK PARTNERS</u> Business Address <u>1000 E GLENGARRY CIR, BLOOMFIELD HILLS, MI 48301</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>JONATHAN 1 MARKO</b> 1300 BROADWAY ST DETROIT, MI 48226	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>1300 BROADWAY ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>SUSAN MORSE</b> 32741 ROBINHOOD DR BEVERLY HILLS, MI 48025	\$ <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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **2,350.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/06/2024</u> Name & Address: <b>JOHN NACHAZEL</b> 554 WHITEHALL RD BLOOMFIELD HILLS, MI 48304  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MIKE MORSE LAW FIRM</u> Business Address <u>554 WHITEHALL RD, BLOOMFIELD HILLS, MI 48304</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>LAYNE SAKWA</b> 6450 WORLINGTON RD BLOOMFIELD HILLS, MI 48301  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FRIED SAPERSTEIN SAKWA</u> Business Address <u>150 W 2ND ST, STE. 250, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>1,500.00</u>	\$ <u>2,800.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/2024</u> Name & Address: <b>SAMANTHA SCHANTA</b> 3327 SOUTHFIELD RD BIRMINGHAM, MI 48009  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PADILLA</u> Business Address <u>1821 W MAPLE RD, BIRMINGHAM, MI 48009</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/09/2024</u> Name & Address: <b>KARI DOTSTRY</b> 54195 VERONA PARK DR MACOMB, MI 48042  5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>THE KARRING GROUP</u> Business Address <u>54195 VERONA PARK DR, MACOMB, MI 48042</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>

Page Subtotal 2,250.00

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/09/2024</u> Name & Address: <b>CELESTE DUNN</b> 5472 BRISTOL PARKE DR CLARKSTON VLG, MI 48348	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ATTORNEYS FOR ANIMALS</u> Business Address <u>5472 BRISTOL PARKE DR, CLARKSTON VLG, MI 48348</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/09/2024</u> Name & Address: <b>SHELBY GLAZER</b> 1670 KELLER LN BLOOMFIELD HILLS, MI 48302	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHIROPRACTOR</u> Employer <u>SELF</u> Business Address <u>1670 KELLER LN, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/09/2024</u> Name & Address: <b>LEWIS MELFI</b> 3617 WOODVIEW AVE WEST BLOOMFIELD, MI 48324	\$ <u>50.00</u>	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/09/2024</u> Name & Address: <b>JEREMY MODELL</b> 800 WILLOWAY ESTATES DR BLOOMFIELD HILLS, MI 48302	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>CLARKSTON CAPITAL PARTNERS</u> Business Address <u>800 WILLOWAY ESTATES DR, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **2,550.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/09/2024</u> Name & Address: <b>FRAN MURPHY</b> 27735 JEFFERSON AVE ST CLAIR SHORES, MI 48081	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>27735 JEFFERSON AVE, ST CLAIR SHORES, MI 48081</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/09/2024</u> Name & Address: <b>WALTER PISZCZATOWSKI</b> 5341 PUTNAM DR WEST BLOOMFIELD, MI 48323	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>HERTZ</u> Business Address <u>5341 PUTNAM DR, WEST BLOOMFIELD, MI 48323</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>JEFFREY ABOOD</b> 470 N OLD WOODWARD AVE BIRMINGHAM, MI 48009	\$ <u>1,000.00</u>	\$ <u>1,550.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ABOOD LAW FIRM</u> Business Address <u>470 N OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>BEVERLY BEATHAM</b> 22275 BORDMAN RD BERLIN, MI 48002	\$ <u>25.00</u>	\$ <u>25.00</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 **1,525.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/10/2024</u> Name & Address: <b>KEITH BINKOWSKI</b> 272 W DRAYTON FERNDALE, MI 48220	\$ <u>25.00</u>	\$ <u>275.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>HAZEL PARK PUBLIC SCHOOLS</u> Business Address <u>1620 E AVE, HAZEL PARK, MI 48030</u> 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>09/10/2024</u> Name & Address: <b>SUZANNE CHRISTOPHERSON</b> 384 CHESTERFIELD AVE BIRMINGHAM, MI 48009	\$ <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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>NICHOLAS DRAUGULIS</b> 25615 JEFFERSON AVE ST CLAIR SHORES, MI 48081	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>22100 HARPER AVE, ST CLAIR SHORES, MI 48080</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>ELYSE GERMACK</b> 579 PURITAN AVE BIRMINGHAM, MI 48009	\$ <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		

Page Subtotal **1,225.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/10/2024</u> Name & Address: <b>KELLY HALL</b> <b>401 WASHINGTON ST</b> <b>TRAVERSE CITY, MI 49686</b>	<b>\$ 500.00</b>	<b>\$ 1,500.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>CONSUMERS ENERGY</u> Business Address <u>1 ENERGY PLAZA, JACKSON, MI 49201</u> 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>09/10/2024</u> Name & Address: <b>DONNA HARRISON-NOSKA</b> <b>383 ARGYLE ST</b> <b>BIRMINGHAM, MI 48009</b>	<b>\$ 25.00</b>	<b>\$ 25.00</b>
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>09/10/2024</u> Name & Address: <b>ZACHARY HOUCHIN</b> <b>1088 RIVENOAK ST</b> <b>BIRMINGHAM, MI 48009</b>	<b>\$ 50.00</b>	<b>\$ 50.00</b>
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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>MARGARET HUGGARD</b> <b>3286 AQUINAS DR</b> <b>ROCHESTER HILLS, MI 48309</b>	<b>\$ 25.00</b>	<b>\$ 25.00</b>
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 **600.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/10/2024</u> Name & Address: <b>MICHAEL JAAFAR</b> 6304 ORCHARD LAKE RD WEST BLOOMFIELD, MI 48322  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>FARIMAX</u> Business Address <u>23756 MICHIGAN AVE, DEARBORN, MI 48124</u> 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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>STACEY JEWETT</b> 1146 S LONG LAKE BLVD LAKE ORION, MI 48362  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>CONSULTANT</u> Employer <u>SELF</u> Business Address <u>1146 S LONG LAKE BLVD, LAKE ORION, MI 48362</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>500.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>WENDY JOHNSON</b> 3797 N DARLINGTON RD BLOOMFIELD HILLS, MI 48301  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>ANDREA JONES</b> 2736 WINDEMERE RD BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>OWNER</u> Employer <u>A LYNN LLC</u> Business Address <u>2736 WINDEMERE RD, BIRMINGHAM, MI 48009</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>150.00</u>

Page Subtotal **800.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/10/2024</u> Name & Address: <b>RONALD KUMON</b> <b>23700 MAUDE LEA ST</b> <b>NOVI, MI 48375</b>	\$ <u>50.00</u>	\$ <u>50.00</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>09/10/2024</u> Name & Address: <b>MATTHEW LESTER</b> <b>5625 SHADOW LN</b> <b>BLOOMFIELD HILLS, MI 48302</b>	\$ <u>7,000.00</u>	\$ <u>8,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>PRINCETON MANAGEMENT</u> Business Address <u>26600 TELEGRAPH RD, STE. 200, SOUTHFIELD, MI 48033</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>AMY MEYERSIECK</b> <b>1303 W HAZELHURST ST</b> <b>FERNDAL, MI 48220</b>	\$ <u>55.00</u>	\$ <u>55.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>PAUL MURPHY</b> <b>15576 TROON CT</b> <b>NORTHVILLE, MI 48168</b>	\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>360 RICK MANAGEMENT</u> Business Address <u>21500 HAGGERTY RD, NORTHVILLE, MI 48167</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 7,255.00

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/10/2024</u> Name & Address: <b>KAMELSH PAREKH</b> <b>5214 GREAT OAKS CT</b> <b>WEST BLOOMFIELD, MI 48323</b>	<b>\$ 250.00</b>	<b>\$ 250.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>ROBYN ROBERTS</b> <b>992 PLEASANT ST</b> <b>BIRMINGHAM, MI 48009</b>	<b>\$ 100.00</b>	<b>\$ 100.00</b>
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>09/10/2024</u> Name & Address: <b>BRADLY SEWICK</b> <b>1109 LAKE PARK DR</b> <b>BIRMINGHAM, MI 48009</b>	<b>\$ 250.00</b>	<b>\$ 250.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>PSYCHOLOGIST</u> Employer <u>SPETRUM</u> Business Address <u>26555 EVERGREEN RD, SOUTHFIELD, MI 48076</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/2024</u> Name & Address: <b>MARK SISSON</b> <b>19107 ADDINGTON DR</b> <b>COMMERCE, MI 48390</b>	<b>\$ 500.00</b>	<b>\$ 500.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>30200 TELEGRAPH RD, BINGHAM FARMS, MI 48025</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,100.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/12/2024</u> Name & Address: <b>DONNA CUNNINGHAM</b> <b>3995 OAKLAND DR</b> <b>BLOOMFIELD HILLS, MI 48301</b>	<b>\$ 50.00</b>	<b>\$ 50.00</b>
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>09/12/2024</u> Name & Address: <b>DOROTHY DEAN</b> <b>23831 BRAZIL AVE</b> <b>SOUTHFIELD, MI 48033</b>	<b>\$ 80.00</b>	<b>\$ 80.00</b>
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>09/12/2024</u> Name & Address: <b>STEVE LYNCH</b> <b>4121 ECHO RD</b> <b>BLOOMFIELD, MI 48302</b>	<b>\$ 150.00</b>	<b>\$ 400.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>261 E MAPLE RD, BIRMINGHAM, MI 48009</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 type="checkbox"/> YES      4. Date of Receipt <u>09/12/2024</u> Name & Address: <b>CARY MCGEHEE</b> <b>13161 BORGMAN AVE</b> <b>HUNTINGTON WOODS, MI 48070</b>	<b>\$ 100.00</b>	<b>\$ 100.00</b>
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 **380.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/12/2024</u> Name & Address: <b>MIKE NABOLSI</b> 6900 ORCHARD AVE DEARBORN, MI 48126		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHARAMIST</u> Employer <u>WARRIOR PHARMACY</u> Business Address <u>5265 ANTHONY WAYNE DR, DETROIT, MI 48202</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/12/2024</u> Name & Address: <b>LINDSAY SIKORA</b> 1720 WASHINGTON BLVD BIRMINGHAM, MI 48009		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>26211 CENTRAL PARK BLVD, SOUTHFIELD, MI 48076</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/17/2024</u> Name & Address: <b>CASSONDRA BARRON</b> 3411 ROXBURY DR TROY, MI 48084		\$ <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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/17/2024</u> Name & Address: <b>LAURA FISHMAN</b> 3081 MYDDLETON DR TROY, MI 48084		\$ <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			

Page Subtotal **1,200.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/17/2024</u> Name & Address: <b>PATRICK MUSCAT</b> 852 HARVARD RD BERKLEY, MI 48072	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>WAYNE COUNTY</u> Business Address <u>1441 ST ANTOINE, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>JORDAN ACKER</b> 26654 HUMBER ST HUNTINGTON WOODS, MI 48070	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GOODMAN ACKER</u> Business Address <u>17000 W 10 MILE RD, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>NEISHA CHUDLER</b> 2410 AVONDALE ST W SYLVAN LAKE, MI 48320	\$ <u>25.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARALEGAL</u> Employer <u>OAKLAND COUNTY PROSECUTOR'S OFFICE</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</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 type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>MARK DENHA</b> 6215 HILLS DR BLOOMFIELD HILLS, MI 48301	\$ <u>1,000.00</u>	\$ <u>6,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>WIRELESS VISION</u> Business Address <u>40700 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304</u> 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 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/18/2024</u> Name & Address: <b>CHERRILL FLYNN</b> 5601 HATCHERY RD WATERFORD, MI 48329	\$ <u>25.00</u>	\$ <u>25.00</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>09/18/2024</u> Name & Address: <b>KATHLEEN GIANCARLO</b> 760 GRAND MARAIS ST GROSSE POINTE PARK, MI 48230	\$ <u>80.00</u>	\$ <u>230.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STUDENT</u> Employer <u>NA</u> Business Address <u>760 GRAND MARAIS ST, GROSSE POINTE PARK, MI 48230</u> 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>09/18/2024</u> Name & Address: <b>CHRISTINA HAGE</b> 1893 LUDGATE LN ROCHESTER HILLS, MI 48309	\$ <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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>MARCY 2 HAHN</b> 2134 FAIRWAY DR BIRMINGHAM, MI 48009	\$ <u>1,000.00</u>	\$ <u>1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>LOTUS LEGAL SOLUTIONS</u> Business Address <u>550 W MERRILL ST, #100, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,205.00**

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

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line 3a of Summary  
Page.



**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, 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>09/18/2024</u> Name & Address: <b>TRACY HEWAT</b> <b>53 WINGATE RD</b> <b>PROVIDENCE, RI 02906</b>	<u>\$ 5,000.00</u>	<u>\$ 5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF</u> Business Address <u>53 WINGATE RD, PROVIDENCE, RI 02906</u> 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>09/18/2024</u> Name & Address: <b>TAMARA JONIK</b> <b>1085 SUFFIELD AVE</b> <b>BIRMINGHAM, MI 48009</b>	<u>\$ 80.00</u>	<u>\$ 130.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>CHRISTINE KEMPEL</b> <b>548 CHESTERFIELD AVE</b> <b>BIRMINGHAM, MI 48009</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/2024</u> Name & Address: <b>CHRISTINE LAKER</b> <b>571 LINDEN RD</b> <b>BIRMINGHAM, MI 48009</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		

Page Subtotal **5,280.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/18/2024</u> Name & Address: <b>ALLISON NALETTE</b> <b>4681 MCMILLAN CT</b> <b>ROCHESTER HILLS, MI 48306</b>	\$ <u>20.00</u>	\$ <u>70.00</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>09/18/2024</u> Name & Address: <b>TAHR SAVIWALA</b> <b>2325 3RD ST</b> <b>SF, CA 94107</b>	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BIOTECH</u> Employer <u>CARBON SILICON</u> Business Address <u>1089 MILLS WAY, REDWOOD CITY, CA 94063</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/2024</u> Name & Address: <b>LELAND BASSETT</b> <b>30751 CEDAR CREEK DR</b> <b>FARMINGTON HILLS, MI 48336</b>	\$ <u>100.00</u>	\$ <u>1,595.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>BASSETT &amp; BASSETT</u> Business Address <u>660 WOODWARD AVE, DETROIT, MI 48226</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 type="checkbox"/> YES      4. Date of Receipt <u>09/19/2024</u> Name & Address: <b>DEBORAH HOROWITZ</b> <b>6223 DAKOTA CIR</b> <b>BLOOMFIELD HILLS, MI 48301</b>	\$ <u>10.00</u>	\$ <u>10.00</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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **2,130.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/19/2024</u> Name & Address: <b>SAM HUSZCZO</b> 26211 CENTRAL PARK BLVD 601 SOUTHFIELD, MI 48076 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>26211 CENTRAL PARK BLVD, SOUTHFIELD, MI 48076</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>450.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/2024</u> Name & Address: <b>MARY MILLS</b> 5065 CROOKS RD ROYAL OAK, MI 48073 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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/2024</u> Name & Address: <b>JULIE NELSON-KLEIN</b> 6430 APPLE GROVE LN BLOOMFIELD HILLS, MI 48301 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>4000 TOWN CENTER, 550, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>450.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/2024</u> Name & Address: <b>LISA SERRA</b> 816 MAJESTIC DR ROCHESTER HILLS, MI 48306 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 **525.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/22/2024</u> Name & Address: <b>GEORGE BARNES</b> <b>30980 WENDBROOK LN</b> <b>BEVERLY HILLS, MI 48025</b>  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>OWNER</u> Employer <u>HERITAGE VISION</u> Business Address <u>30980 WENDBROOK LN, BEVERLY HILLS, MI 48025</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/22/2024</u> Name & Address: <b>GERALD CAVELLIER</b> <b>1842 LYSTER CT</b> <b>TROY, MI 48085</b>  <b>5. If over \$100.00 cumulative, please provide:</b> 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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/22/2024</u> Name & Address: <b>DANYA POLEHANKI FOR STATE REP</b> <b>PO BOX 51843</b> <b>LIVONIA, MI 48151</b>  <b>5. If over \$100.00 cumulative, please provide:</b> 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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>MICHAEL ABRAMS</b> <b>808 CRANBROOK RD</b> <b>BLOOMFIELD HILLS, MI 48304</b>  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>CONSULTANT</u> Employer <u>BAC HOLDINGS</u> Business Address <u>4190 TELEGRAPH RD, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal **1,700.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u> Name & Address: <b>STACEY BOEGNER</b> <b>3062 MYDDLETON CT</b> <b>TROY, MI 48084</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>09/23/2024</u> Name & Address: <b>THERESA BRUNE</b> <b>2126 KRISTIN DR</b> <b>TROY, MI 48084</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>SAM ELIA</b> <b>27231 CAMBRIDGE LN</b> <b>FARMINGTON HILLS, MI 48331</b>	<u>\$ 1,000.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ELIA &amp; PONTO</u> Business Address <u>25800 NORTHWESTERN HWY, STE. 850, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>KRISTINE FRANCOIS</b> <b>90 FABIVS ST</b> <b>TROY, MI 48098</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		

Page Subtotal **1,300.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u> Name & Address: <u>ILTEFAT HAMZAVI</u> <u>49199 PARKSHORE DR</u> <u>NORTHVILLE, MI 48168</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>SELF</u> Business Address <u>361 N CANTON CENTER RD, CANTON, MI 48187</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>350.00</u>	\$ <u>350.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <u>MATTHEW KARDEL</u> <u>50623 GLADES CT</u> <u>NOVI, MI 48374</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>APTV</u> Business Address <u>5725 INNOVATION DR, TROY, MI 48098</u> 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>250.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <u>ANDREW KHURANA</u> <u>5853 CLEARVIEW DR</u> <u>TROY, MI 48098</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>880 W LONG LAKE RD, MI 48302</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>1,500.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <u>DEBORAH LOBRING</u> <u>410 OAK RUN CT</u> <u>ROYAL OAK, MI 48073</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> 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>125.00</u>

Page Subtotal **1,125.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u>	
Name & Address: <b>DANIEL MAHONEY</b> 772 FOREST AVE PLYMOUTH, MI 48170		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>DTE</u> Business Address <u>1 ENERGY PLAZA, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>ANDY MEISNER</b> 12786 TALBOT LN HUNTINGTON WOODS, MI 48070		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>COMMUNITY UNITY BANK</u> Business Address <u>34040 WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>DESPINA MOURTOS</b> 904 BLAIRMOOR CT GROSSE POINTE WOODS, MI 48236		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INVESTOR</u> Employer <u>VISION INVESTMENT PARTNERS</u> Business Address <u>700 N OLD WOODWARD AVE, BIRMINGHAM, MI 48009</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 type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>APURV PAREKH</b> 28428 W 8 MILE RD FARMINGTON HILLS, MI 48336		\$ <u>20.00</u>	\$ <u>20.00</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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,770.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u> Name & Address: <b>CHETAN PAREKH</b> 3450 GREENSPRING LN ROCHESTER HILLS, MI 48309	<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>PARSON</u> Business Address <u>3345 W AUBURN RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>TARAL PATEL</b> 51224 SUMMER BREEZE DR NORTHVILLE, MI 48167	<u>\$ 125.00</u>	<u>\$ 125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PT</u> Employer <u>CONCENTRA</u> Business Address <u>627 E MAPLE RD, TROY, MI 48083</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>RACHEL POSIGIAN</b> 24380 WOODCROFT DR DEARBORN, MI 48124	<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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>MOHAMMAD QAZI</b> 6405 MIDDLEBELT RD ROMULUS, MI 48174	<u>\$ 1,000.00</u>	<u>\$ 1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>CIENA</u> Business Address <u>4000 TOWN CENTER, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,475.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u> Name & Address: <b>KELLI RICHARDSON</b> <b>181 WESTCHESTER WAY</b> <b>BIRMINGHAM, MI 48009</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>09/23/2024</u> Name & Address: <b>SHAVI SARNA</b> <b>47924 MANORWOOD DR</b> <b>NORTHVILLE, MI 48168</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>MICHAEL SERRA</b> <b>20605 W 14 MILE RD</b> <b>BEVERLY HILLS, MI 48025</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/23/2024</u> Name & Address: <b>THERESA SERRA</b> <b>59014 PALMER DR</b> <b>WASHINGTON, MI 48094</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		

Page Subtotal **400.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/23/2024</u>	
Name & Address: <b>NIRAV SHAH</b> 20910 TURNBERRY BLVD NORTHVILLE, MI 48167		\$ <u>2,000.00</u>	\$ <u>3,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRINCIPAL</u> Employer <u>KMI FAMILY VENTURES</u> Business Address <u>20910 TURNBERRY BLVD, NORTHVILLE, MI 48167</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>SANJAY SHARMA</b> 1314 MCLEAN AVE ROYAL OAK, MI 48067		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>ASCENDANT</u> Business Address <u>24681 NORTHWESTERN HWY, SOUTHFIELD, MI 48075</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>SHASHIDHAR SHASTRI</b> 37279 ASPEN DR FARMINGTON HILLS, MI 48335		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>LGC GLOBAL</u> Business Address <u>7310 WOODWARD AVE, DETROIT, MI 48202</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: <b>KENNETH WITTENBERG</b> 701 NW 11TH AVE BOCA RATON, FL 33486		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FINANCIAL ADVISOR</u> Employer <u>WITTENBERG INVESTMENTS</u> Business Address <u>2855 COOLIDGE HWY, TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,750.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/24/2024</u> Name & Address: <b>DAVID AUGHTON</b> <b>3401 W BRECKENRIDGE LN</b> <b>BLOOMFIELD HILLS, MI 48301</b>	\$ <u>10.00</u>	\$ <u>10.00</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>09/24/2024</u> Name & Address: <b>IRA JAFFE</b> <b>27777 FRANKLIN RD</b> <b>SOUTHFIELD, MI 48034</b>	\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT LAW</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> 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>09/24/2024</u> Name & Address: <b>SARA KRUSE</b> <b>104 CAMBRIDGE BLVD</b> <b>PLEASANT RIDGE, MI 48069</b>	\$ <u>110.00</u>	\$ <u>110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</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 type="checkbox"/> YES      4. Date of Receipt <u>09/24/2024</u> Name & Address: <b>DHRUVA PATEL</b> <b>51224 SUMMER BREEZE DR</b> <b>NORTHVILLE, MI 48167</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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **5,220.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/25/2024</u> Name & Address: <b>JOE ALES</b> 247 W MAPLE RD BIRMINGHAM, MI 48009	\$ <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>09/25/2024</u> Name & Address: <b>SANDRA GREEN</b> 237 TILBURY RD BLOOMFIELD HILLS, MI 48301	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GREEN &amp; GREEN</u> Business Address <u>30300 NORTHWESTERN HWY, FARMINGTON HILLS, MI 48334</u> 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>09/25/2024</u> Name & Address: <b>VINAYAK SAKLANI</b> 3000 ROXBURY DR TROY, MI 48084	\$ <u>25.00</u>	\$ <u>25.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/26/2024</u> Name & Address: <b>JOHN BREZA</b> 310 N CONNECTICUT AVE ROYAL OAK, MI 48067	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FIRST HOLDING</u> Employer <u>REAL ESTATE MANAGER</u> Business Address <u>6960 FRANKLIN RD, BLOOMFIELD TWP, MI 48301</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal **1,375.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>09/26/2024</u> Name & Address: <b>DALEN HANNA</b> <b>33717 WOODWARD AVE</b> <b>BIRMINGHAM, MI 48009</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>26481 NORTHWESTERN HWY, SOUTHFIELD, MI 48076</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/26/2024</u> Name & Address: <b>GRAFF KENNELLY</b> <b>1301 W LONG LAKE RD</b> <b>TROY, MI 48098</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>STOCKBROKER</u> Employer <u>AMERIPRISE</u> Business Address <u>1853 VINSETTA BLVD, ROYAL OAK, MI 48073</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>150.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/26/2024</u> Name & Address: <b>STACEY 1 KING</b> <b>1506 N ALTADENA AVE</b> <b>ROYAL OAK, MI 48067</b>  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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/26/2024</u> Name & Address: <b>ALAN LATHAM</b> <b>346 PARK ST</b> <b>BIRMINGHAM, MI 48009</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>346 PARK ST, BIRMINGHAM, MI 48009</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 **1,750.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>09/26/2024</u> Name & Address: <b>MARK RUBENFIRE</b> 5064 SILVERWOOD DR WEST BLOOMFIELD, MI 48322	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> 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>09/27/2024</u> Name & Address: <b>JEFFREY KIRKEY</b> 7305 YORK CT DEXTER, MI 48130	\$ <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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/27/2024</u> Name & Address: <b>JEFFREY KIRKEY</b> 7305 YORK CT DEXTER, MI 48130	\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/27/2024</u> Name & Address: <b>MAHESH NAYAK</b> 1904 NEW CASTLE DR TROY, MI 48098	\$ <u>200.00</u>	\$ <u>700.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DICKINSON WRIGHT</u> Business Address <u>2600 W BIG BEAVER RD, TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 650.00

Grand Total of All Schedules 1A  
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**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, 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>09/29/2024</u> Name & Address: <b>FRAN GRASHA</b> 28167 PALMER ST MADISON HEIGHTS, MI 48071  <b>5. If over \$100.00 cumulative, please provide:</b> 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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/29/2024</u> Name & Address: <b>ROBERT JOHNCOX</b> 21401 CONCORD ST SOUTHFIELD, MI 48076  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>21401 CONCORD ST, SOUTHFIELD, MI 48076</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>40.00</u>	\$ <u>280.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>KEVIN CAMPBELL</b> 33620 GRAND RIVER AVE FARMINGTON, MI 48335  <b>5. If over \$100.00 cumulative, please provide:</b> 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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>GERALD CAVELLIER</b> 1842 LYSTER CT TROY, MI 48085  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>HERTZ SCHRAM</u> Business Address <u>1760 S MAPLE, BLOOMFIELD HILLS, MI 48302</u> 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>150.00</u>

Page Subtotal **240.00**

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

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**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, 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>09/30/2024</u> Name & Address: <u>MARY ANN FONTANA</u> <u>26080 SALEM RD</u> <u>HUNTINGTON WOODS, MI 48070</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>26080 SALEM RD, HUNTINGTON WOODS, MI 48070</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>725.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <u>FRAN GRASHA</u> <u>28167 PALMER ST</u> <u>MADISON HEIGHTS, MI 48071</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	\$ <u>50.00</u>	\$ <u>100.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <u>GEOFFREY GREENLEES</u> <u>1111 N OLD WOODWARD AVE</u> <u>BIRMINGHAM, MI 48009</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20.00</u>	\$ <u>120.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <u>ZACHARY HALLMAN</u> <u>14339 FORD RD</u> <u>DEARBORN, MI 48126</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MEROUEH &amp; HOLLAND</u> Business Address <u>14339 FORD RD, DEARBORN, MI 48126</u> 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>250.00</u>

Page Subtotal 420.00

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

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line 3a of Summary  
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**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, 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>09/30/2024</u> Name & Address: <b>DAVID HARTMAN</b> 1227 GREEN RIDGE RD ROCHESTER HILLS, MI 48309  <b>5. If over \$100.00 cumulative, please provide:</b> 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>10.00</u>	\$ <u>10.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>JOHN KENNEDY</b> 3664 EDGEMONT DR TROY, MI 48084  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> 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>105.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>ELIZABETH KLOS</b> 18136 BUCKINGHAM AVE BEVERLY HILLS, MI 48025  <b>5. If over \$100.00 cumulative, please provide:</b> 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>10.00</u>	\$ <u>10.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>MARGO LESSER</b> 1044 N GLENHURST DR BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> 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 **95.00**

Grand Total of All Schedules 1A  
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**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, 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>09/30/2024</u> Name & Address: <b>DOV LUSTIG</b> 5724 BLOOMFIELD GLENS RD WEST BLOOMFIELD TOWNSHIP, MI 48322	\$ <u>250.00</u>	\$ <u>8,450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>240 DAINES ST, BIRMINGHAM, MI 48009</u> 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>09/30/2024</u> Name & Address: <b>DANIEL PADILLA</b> 727 HAZELWOOD ST BIRMINGHAM, MI 48009	\$ <u>250.00</u>	\$ <u>1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>1821 W MAPLE RD, BIRMINGHAM, MI 48009</u> 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>09/30/2024</u> Name & Address: <b>BENTON RICHARDSON</b> 13334 ELGIN AVE HUNTINGTON WOODS, MI 48070	\$ <u>50.00</u>	\$ <u>50.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/30/2024</u> Name & Address: <b>B. ANDREW RIFKIN</b> 1930 FAIRVIEW ST BIRMINGHAM, MI 48009	\$ <u>500.00</u>	\$ <u>2,750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BANK RIFKIN</u> Business Address <u>1930 FAIRVIEW ST, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal **1,050.00**

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

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**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, 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>10/01/2024</u> Name & Address: <b>JEANNE BOURGET</b> <b>536 STANLEY BLVD</b> <b>BIRMINGHAM, MI 48009</b>	\$ <u>25.00</u>	\$ <u>25.00</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>10/01/2024</u> Name & Address: <b>CHRIS BROCHERT</b> <b>38500 WOODWARD AVE</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>1,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>LORMAX STERN</u> Business Address <u>38500 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>JIM BUSH</b> <b>2757 WARWICK DR</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>25.00</u>	\$ <u>95.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>WINIFRED DAVIES-HANCOCK</b> <b>39221 WOODWARD AVE</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>25.00</u>	\$ <u>25.00</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 **1,075.00**

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

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**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, 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>10/01/2024</u> Name & Address: <b>KENNETH GUTMAN</b> <b>4930 E STONEGATE CIR</b> <b>LAKE ORION, MI 48359</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>SUPERINTENDENT</u> Employer <u>WALLED LAKE SCHOOLS</u> Business Address <u>850 LADD RD, WALLED LAKE, MI 48390</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>MAX HOCHKAMER</b> <b>1504 BIRMINGHAM BLVD</b> <b>BIRMINGHAM, MI 48009</b>  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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>BRUCE KAHN</b> <b>325 GREENWOOD ST</b> <b>BIRMINGHAM, MI 48009</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT LAW</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>2,200.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>SHIRLEY KAIGLER</b> <b>27777 FRANKLIN RD</b> <b>SOUTHFIELD, MI 48034</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>

Page Subtotal **1,500.00**

Grand Total of All Schedules 1A  
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**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, 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>10/01/2024</u> Name & Address: <b>RICHARD LIPPITT</b> <b>545 N MAIN ST</b> <b>MILFORD, MI 48381</b>  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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>KATHY MECHIGIAN</b> <b>32724 BINGHAM LN</b> <b>BINGHAM FARMS, MI 48025</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> 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>250.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>JOHN O'NEILL</b> <b>898 N ADAMS RD</b> <b>#3</b> <b>BIRMINGHAM, MI 48009</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> 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>450.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/2024</u> Name & Address: <b>AVINASH RACHMALE</b> <b>160 CANTERBURY RD</b> <b>BLOOMFIELD HILLS, MI 48304</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>LAKESHORE GLOBAL</u> Business Address <u>7310 WOODWARD AVE, DETROIT, MI 48202</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>1,500.00</u>

Page Subtotal **1,400.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/01/2024</u> Name & Address: <b>JORIN RUBIN</b> 25020 DEVON LN FRANKLIN, MI 48025	\$ <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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>KENT ANDERSON</b> 22140 ORCHARD WAY BEVERLY HILLS, MI 48025	\$ <u>10.00</u>	\$ <u>10.00</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>10/06/2024</u> Name & Address: <b>ANGELA BALDWIN</b> 2 WOODWARD AVE DETROIT, MI 48226	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MILLER LAW</u> Business Address <u>211 W FORT ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>MICHAEL BAUER</b> 28932 LAKE PARK DR FARMINGTON HILLS, MI 48331	\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 760.00

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/06/2024</u> Name & Address: <b>DEBRA CURRIER</b> <b>2836 SEVERN LN</b> <b>BLOOMFIELD HILLS, MI 48304</b>  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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>RENEE DELSIGNORE</b> <b>1162 MINERS RUN</b> <b>ROCHESTER, MI 48306</b>  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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>KELLIE DEVITO</b> <b>445 SHREWSBURY DR</b> <b>CLARKSTON VLG, MI 48348</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GMH</u> Business Address <u>101 W BIG BEAVER RD, TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>110.00</u>	\$ <u>3,110.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>MARGUERITE DONAHUE</b> <b>21640 RIVERVIEW DR</b> <b>BEVERLY HILLS, MI 48025</b>  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 260.00

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

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line 3a of Summary  
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**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, 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>10/06/2024</u> Name & Address: <b>STEVEN ENWRIGHT</b> <b>700 RUFFNER AVE</b> <b>BIRMINGHAM, MI 48009</b> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>LIPPIT O'KEEFE GORNBEIN</u> Business Address <u>370 E MAPLE RD, BIRMINGHAM, MI 48009</u> 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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>CHRISTINE FARRUG</b> <b>INFORMATION REQUESTED</b> <b>ROCHESTER, MI 48307</b> 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>5.00</u>	\$ <u>5.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>FRANK FEDERICK</b> <b>740 DRIFTWOOD AVE</b> <b>ROCHESTER HILLS, MI 48307</b> 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> Business Address _____ 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>150.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>MATT FILLMORE</b> <b>2679 BURNHAM</b> <b>ROYAL OAK, MI 48073</b> 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>

Page Subtotal **430.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/06/2024</u> Name & Address: <b>MARK GUTMAN</b> 3674 LOCH BEND DR COMMERCE TWP, MI 48382	\$ <u>50.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3674 LOCH BEND DR, COMMERCE TWP, MI 48382</u> 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>10/06/2024</u> Name & Address: <b>MARGARET HUGGARD</b> 3286 AQUINAS DR ROCHESTER HILLS, MI 48309	\$ <u>25.00</u>	\$ <u>50.00</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>10/06/2024</u> Name & Address: <b>ANDREA MCDANIEL</b> 1584 SCIO RIDGE RD ANN ARBOR, MI 48103	\$ <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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>DONNA MEDINA</b> 6720 BLUE SPRUCE CT WEST BLOOMFIELD, MI 48324	\$ <u>50.00</u>	\$ <u>50.00</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 225.00

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

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line 3a of Summary  
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**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, 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>10/06/2024</u> Name & Address: <b>MONIQUE MERRITT</b> <b>26180 WOODVILLA PL</b> <b>SOUTHFIELD, MI 48076</b>	\$ <u>25.00</u>	\$ <u>25.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>THOMAS MINES</b> <b>208 CHARLES RD</b> <b>ROCHESTER, MI 48307</b>	\$ <u>10.00</u>	\$ <u>10.00</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>10/06/2024</u> Name & Address: <b>THOMAS MINES</b> <b>208 CHARLES RD</b> <b>ROCHESTER, MI 48307</b>	\$ <u>25.00</u>	\$ <u>35.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/2024</u> Name & Address: <b>RUDENE PEVZNER</b> <b>2154 S HAMMOND LAKE RD</b> <b>WEST BLOOMFILED, MI 48324</b>	\$ <u>25.00</u>	\$ <u>25.00</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 **85.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/07/2024</u> Name & Address: <b>NEISHA CHUDLER</b> 2410 AVONDALE ST W SYLVAN LAKE, MI 48320	\$ <u>15.00</u>	\$ <u>615.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARALEGAL</u> Employer <u>OAKLAND COUNTY PROSECUTOR'S OFFICE</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> 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>10/07/2024</u> Name & Address: <b>NEISHA CHUDLER</b> 2410 AVONDALE ST W SYLVAN LAKE, MI 48320	\$ <u>25.00</u>	\$ <u>640.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARALEGAL</u> Employer <u>OAKLAND COUNTY PROSECUTOR'S OFFICE</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> 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>10/07/2024</u> Name & Address: <b>LYNN SIRISH</b> 521 GOLF VIEW BIRMINGHAM, MI 48009	\$ <u>500.00</u>	\$ <u>1,750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DICKINSON WRIGHT</u> Business Address <u>2600 W BIG BEAVER RD, TROY, MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/07/2024</u> Name & Address: <b>KRISTIE SPARKS</b> 3475 BURNS AVE DETROIT, MI 48214	\$ <u>500.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,040.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/08/2024</u> Name & Address: <b>BEVERLY BEATHAM</b> 22275 BORDMAN RD BERLIN, MI 48002  <b>5. If over \$100.00 cumulative, please provide:</b> 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>30.00</u>	\$ <u>55.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>ERICA BROWN</b> 13358 VICTORIA AVE HUNTINGTON WOODS, MI 48070  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>401 S WOODWARD AVE, BIRMINGHAM, MI 48009</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>110.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>TRICIA DARE</b> 170 GREAT PINES DR OXFORD, MI 48371  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</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>1,700.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>CATRINA FARRUGIA</b> 5238 GRAYSON ST FERNDALE, MI 48220  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>DOMSTEIN &amp; FARRUGIA</u> Business Address <u>1668 S TELEGRAPH RD, BLOOMFIELD HILLS, MI 48302</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>

Page Subtotal **480.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/08/2024</u> Name & Address: <b>CAROLYN GLENN</b> 595 ARTHUR AVE PONTIAC, MI 48341	\$ <u>50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>FRENTZ HURD</b> 1617 VINSETTA BLVD ROYAL OAK, MI 48067	\$ <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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>PAUL JONES</b> 4202 COLLINS RD LANSING, MI 48910	\$ <u>10.00</u>	\$ <u>10.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>CINDY LAFERLE</b> 1525 VINSETTA BLVD ROYAL OAK, MI 48067	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>JOURNALIST</u> Employer <u>SELF</u> Business Address <u>1525 VINSETTA BLVD, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **360.00**

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

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**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, 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>10/08/2024</u> Name & Address: <b>JENNIFER LATOSH</b> <b>715 W BRECKENRIDGE ST</b> <b>FERNDALE, MI 48220</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</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>350.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/2024</u> Name & Address: <b>NICOLE SIMAAN</b> <b>9400 KIER RD</b> <b>HOLLY, MI 48442</b>  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>30.00</u>	\$ <u>30.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>MICHAEL ABRAMS</b> <b>808 CRANBROOK RD</b> <b>BLOOMFIELD HILLS, MI 48304</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>BAC HOLDINGS</u> Business Address <u>4190 TELEGRAPH RD, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>5,000.00</u>	\$ <u>5,500.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>SALVATORE AMODEO</b> <b>23531 SHERMAN ST</b> <b>OAK PARK, MI 48237</b>  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 **5,230.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>MADLINE BADGLEY</b> <b>76 E COY AVE</b> <b>HAZEL PARK, MI 48030</b>	<b>\$ 50.00</b>	<b>\$ 50.00</b>
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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>ROBERTA BADGLEY</b> <b>6531 PARK LAKE DR</b> <b>CLARKSTON VLG, MI 48346</b>	<b>\$ 100.00</b>	<b>\$ 100.00</b>
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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>MEGAN BONANNI</b> <b>2500 VINSETTA BLVD</b> <b>ROYAL OAK, MI 48073</b>	<b>\$ 1,000.00</b>	<b>\$ 1,250.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PITT MCGEHEE</u> Business Address <u>117 W 4TH ST, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>MYRA DANISH</b> <b>1536 KIRKWAY RD</b> <b>BLOOMFIELD HILLS, MI 48302</b>	<b>\$ 750.00</b>	<b>\$ 750.00</b>
5. If over \$100.00 cumulative, please provide: Occupation <u>SURGEON</u> Employer <u>SELF</u> Business Address <u>4550 INVESTMENT DR, TROY, MI 48098</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,900.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>JULIE DRUMMOND</b> 400 SOUTHFIELD RD 1C BIRMINGHAM, MI 48009 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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>NANCY HODARI</b> 542 TOWNSEND ST BIRMINGHAM, MI 48009 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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>ERIN HUTT</b> 4644 PAPER BIRCH LN TRAVERSE CITY, MI 49686 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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>KERI JAMES</b> 31525 FRANKLIN FAIRWAY ST FARMINGTON HILLS, MI 48334 5. If over \$100.00 cumulative, please provide: Occupation <u>FOUNDER</u> Employer <u>JAMES GROUP</u> Business Address <u>4335 W FORT ST, DETROIT, MI 48209</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1,500.00</u>	\$ <u>1,500.00</u>

Page Subtotal **1,750.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>LAUREN JASINSKI</b> <b>642 S VERMONT</b> <b>ROYAL OAK, MI 48067</b>  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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>KATIE KENNEDY</b> <b>229 CLIFTON RD</b> <b>BLOOMFIELD HILLS, MI 48301</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>SELF</u> Business Address <u>229 CLIFTON RD, BLOOMFIELD HILLS, MI 48301</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>MARGO LESSER</b> <b>1044 N GLENHURST DR</b> <b>BIRMINGHAM, MI 48009</b>  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>75.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>SUSAN LICHTERMAN</b> <b>26080 YORK RD</b> <b>HUNTINGTON WOODS, MI 48070</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, 2500, SOUTHFIELD, MI 48034</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>3,250.00</u>

Page Subtotal 900.00

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>NICOLE MACWILLIAMS</b> <b>3154 SHADYDALE LN</b> <b>WEST BLOOMFIELD, MI 48323</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>ANNA MAIURI</b> <b>3500 WORMER DR</b> <b>WATERFORD, MI 48329</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>ANGELA MARSHALL</b> <b>24686 ACORN TRAIL</b> <b>NOVI, MI 48374</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>DAVID MENDELSON</b> <b>5017 MOHR VALLEY LN</b> <b>BLOOMFIELD HILLS, MI 48304</b>	<u>\$ 2,500.00</u>	<u>\$ 2,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>355 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 2,800.00

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>DIANA MILETIC</b> 5716 ROUNDHILL RD BLOOMFIELD HILLS, MI 48301	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DOCTOR</u> Employer <u>SELF</u> Business Address <u>36800 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>MEGAN MISKA</b> 1602 HILLSIDE LANE ROCHESTER, MI 48307	\$ <u>25.00</u>	\$ <u>25.00</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>10/09/2024</u> Name & Address: <b>LEEN NACHAWATI</b> 1104 MAYA CT TROY, MI 48085	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>31000 NORTHWESTERN HWY, 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		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/09/2024</u> Name & Address: <b>ROBERT NOVY</b> 630 POINTE DR WALLED LAKE, MI 48390	\$ <u>100.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 575.00

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/09/2024</u>	
Name & Address: <b>MARY O'DONNELL</b> 2161 W LINCOLN ST BIRMINGHAM, MI 48009		\$ <u>500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BLUE FILAMENT LAW</u> Business Address <u>700 E MAPLE RD, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/09/2024</u>	
Name & Address: <b>RACHEL POSIGIAN</b> 24380 WOODCROFT DR DEARBORN, MI 48124		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>LEGAL ASSISTANT</u> Employer <u>LOTUS LEGAL</u> Business Address <u>550 W MERRILL ST, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/09/2024</u>	
Name & Address: <b>NABILA RABAA</b> 2933 CONSTITUTION CT WEST BLOOMFIELD, MI 48322		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>31000 NORTHWESTERN HWY, 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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/09/2024</u>	
Name & Address: <b>ALICIA SCHEHR</b> 4797 APPLE GROVE CT BLOOMFIELD HILLS, MI 48301		\$ <u>500.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>TAFT</u> Business Address <u>27777 FRANKLIN RD, 2500, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,300.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/09/2024</u> Name & Address: <b>CRAIG SINGER</b> <b>520 TALL TREE LN</b> <b>BLOOMFIELD HILLS, MI 48302</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER</u> Employer <u>MILFORD SINGER</u> Business Address <u>6960 MAPLE, WEST BLOOMFIELD, MI 48322</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>JEFFREY EDWARDS</b> <b>1135 SHELBY ST</b> <b>DETROIT, MI 48226</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> Business Address _____ Type of Contribution: <input 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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>CYNTHIA FORD</b> <b>241 LAKE SHORE RD</b> <b>GROSSE POINTE FARMS, MI 48236</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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>5,000.00</u>	\$ <u>6,000.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>EDSEL FORD</b> <b>241 LAKE SHORE RD</b> <b>GROSSE POINTE FARMS, MI 48236</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>FORD MOTOR COMPANY</u> Business Address <u>1 AMERICAN RD, DEARBORN, MI 48126</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>5,000.00</u>	\$ <u>5,000.00</u>

Page Subtotal **11,000.00**

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

Enter this total on  
line 3a of Summary  
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**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, 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>10/10/2024</u> Name & Address: <b>TERRY FREEMAN</b> <b>86 E COY AVE</b> <b>HAZEL PARK, MI 48030</b>	\$ <u>25.00</u>	\$ <u>25.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>SETH HERKOWITZ</b> <b>2700 W LONG LAKE RD</b> <b>WEST BLOOMFILED, MI 48323</b>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>HUNTER PASTEUR</u> Business Address <u>32300 NORTHWESTERN HWY, FARMINGTON HILLS, MI 48334</u> 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>10/10/2024</u> Name & Address: <b>JENNIFER JANSSEN</b> <b>5401 WENTWORTH DR</b> <b>COMMERCE TOWNSHIP, MI 48382</b>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GREEN AND GREEN</u> Business Address <u>30300 NORTHWESTERN HWY, 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		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>NAZLI KHEDER</b> <b>723 WINDEMERE CT</b> <b>BLOOMFIELD HILLS, MI 48304</b>	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 **1,025.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/10/2024</u> Name & Address: <b>DAVID MELLEROWICZ</b> <b>492 CHARLEVOIX ST</b> <b>COMMERCE, MI 48382</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NA</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>WILLIAM PREDHOMME</b> <b>1090 N GLENHURST DR</b> <b>BIRMINGHAM, MI 48009</b>  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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>ROCHELLE RAZNICK</b> <b>1941 CRAGIN DR</b> <b>BLOOMFIELD HILLS, MI 48302</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>KRISTYN RECCHIA</b> <b>2600 W BIG BEAVER RD</b> <b>TROY, MI 48084</b>  5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DICKINSON</u>  Business Address <u>2600 W BIG BEAVER RD, TROY, MI 48084</u> 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>150.00</u>

Page Subtotal **2,250.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/10/2024</u> Name & Address: <b>KELLI RICHARDSON</b> <b>181 WESTCHESTER WAY</b> <b>BIRMINGHAM, MI 48009</b>	<u>\$ 200.00</u>	<u>\$ 300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>ENSONO</u> Business Address <u>3333 FINLEY RD, DOWNERS GROVE, IL 60515</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>SHEA RIGA</b> <b>1 AMGEN CENTER DR</b> <b>THOUSAND OAKS, CA 91320</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/2024</u> Name & Address: <b>KATHERINE SHANNON</b> <b>474 W HAZELHURST ST</b> <b>FERNDALE, MI 48220</b>	<u>\$ 200.00</u>	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE ASSISTANT</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>BENJAMIN ALOIA</b> <b>54439 WHITE SPRUCE LN</b> <b>SHELBY TOWNSHIP, MI 48315</b>	<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ALOIA &amp; ASSOCIATES</u> Business Address <u>48 S MAIN ST, MT CLEMENS, MI 48043</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 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/15/2024</u> Name & Address: <b>PETER ALTER</b> 377 PINE RIDGE DR BLOOMFIELD HILLS, MI 48304	\$ <u>1,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NA</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>JASON DESANTIS</b> 1711 DEVONWOOD DR ROCHESTER HILLS, MI 48306	\$ <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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>CHERYL DREW</b> 598 MILLSTONE DR ROCHESTER HILLS, MI 48309	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>WILLIAMS SONOMA</u> Business Address <u>268 N ADAMS RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>BENJAMIN FALIK</b> 13129 BORGMAN AVE HUNTINGTON WOODS, MI 48070	\$ <u>10.00</u>	\$ <u>10.00</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 **1,610.00**

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

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line 3a of Summary  
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**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, 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>10/15/2024</u> Name & Address: <b>MATT FRAIBERG</b> 1710 ORCHARD LN BLOOMFIELD HILLS, MI 48301	<u>\$ 250.00</u>	<u>\$ 1,605.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FRAIBERG &amp; PERNIE</u> Business Address <u>1000 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>FREDERICK FRANK</b> 740 DRIFTWOOD AVE ROCHESTER HILLS, MI 48307	<u>\$ 150.00</u>	<u>\$ 150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>PRAKASH GANDHI</b> 4954 HICKORY POINTE DR ORCHARD LAKE VILLAGE, MI 48323	<u>\$ 2,800.00</u>	<u>\$ 2,800.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>MED-SHARE</u> Business Address <u>26222 TELEGRAPH RD, SOUTHFIELD, MI 48033</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>BETH GREENBERG MORROW</b> 18672 OAK DR DETROIT, MI 48221	<u>\$ 500.00</u>	<u>\$ 750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u> Business Address <u>18672 OAK DR, DETROIT, MI 48221</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **3,700.00**

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

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line 3a of Summary  
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**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, 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>10/15/2024</u> Name & Address: <b>JEFFREY HEUER</b> 27777 FRANKLIN RD SOUTHFIELD, MI 48034  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>TAFT LAW</u> Business Address <u>27777 FRANKLIN RD, SOUTHFIELD, MI 48034</u> 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>750.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>KELLEY KENNEDY</b> 1479 STANLEY BLVD BIRMINGHAM, MI 48009  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>THERAPEUTIC SPECIALIST</u> Employer <u>SUNOVISION PHARMA</u> Business Address <u>155 S MAPLE, BLOOMFIELD HILLS, MI 48301</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>288.80</u>	\$ <u>288.80</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>JOE KNAUF</b> 1007 PEARSON DR MILFORD, MI 48381  <b>5. If over \$100.00 cumulative, please provide:</b> 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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>BRENDA ORLANDO</b> 6678 WESTON CT CLARKSTON VLG, MI 48348  <b>5. If over \$100.00 cumulative, please provide:</b> 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 **688.80**

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

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**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, 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>10/15/2024</u> Name & Address: <b>B. ANDREW RIFKIN</b> 1930 FAIRVIEW ST BIRMINGHAM, MI 48009	<u>\$ 500.00</u>	<u>\$ 3,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BANK RIFKIN</u> Business Address <u>1930 FAIRVIEW ST, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>CAROL SCHMIDT</b> 6251 DAKOTA CIR BLOOMFIELD HILLS, MI 48301	<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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/15/2024</u> Name & Address: <b>KURT SCHNELZ</b> 6719 QUEEN ANNE DR WEST BLOOMFIELD, MI 48322	<u>\$ 250.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>280 N WOODWARD, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>FLOYD ALLEN</b> 3011 W GRAND BLVD DETROIT, MI 48202	<u>\$ 500.00</u>	<u>\$ 500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>THE ALLEN LAW GROUP</u> Business Address <u>3011 W GRAND BLVD, DETROIT, MI 48202</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,350.00**

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

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line 3a of Summary  
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**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, 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>10/16/2024</u> Name & Address: <b>VARSHA BAXI</b> 1955 ROLLING WOODS DR TROY, MI 48098  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>OWNER</u> Employer <u>FIND D CORP</u> Business Address <u>1955 ROLLING WOODS DR, TROY, MI 48098</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>RENEE CHELIAN</b> 5719 BLOOMFIELD GLENS RD WEST BLOOMFIELD, MI 48322  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>CEO</u> Employer <u>NORTHLAND FAMILY PLANNING</u> Business Address <u>35000 ANN ARBOR RD, PLYMOUTH, MI 48170</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>1,050.00</u>
3. Contribution # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>CLARK HILL PAC</b> 500 WOODWARD AVE 3500 DETROIT, MI 48226  <b>5. If over \$100.00 cumulative, please provide:</b> 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>750.00</u>	\$ <u>750.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>GERALD GLEESON</b> 1731 BLAIR HOUSE CT BLOOMFIELD HILLS, MI 48302  <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>MILLER CANFIELD</u> Business Address <u>150 W JEFFERSON AVE, DETROIT, MI 48226</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>750.00</u>

Page Subtotal 2,000.00

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

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**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, 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 checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>HEALTH ALLIANCE PAC</b> <b>2850 W GRAND BLVD</b> <b>DETROIT, MI 48202</b>	<u>\$ 500.00</u>	<u>\$ 500.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>SIDNEY KARDON</b> <b>13307 VERNON AVE</b> <b>HUNTINGTON WOODS, MI 48070</b>	<u>\$ 50.00</u>	<u>\$ 50.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>KERI MIDDLEDITCH WIGOD</b> <b>4189 ARLINGTON DR</b> <b>ROYAL OAK, MI 48073</b>	<u>\$ 2,500.00</u>	<u>\$ 2,750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>355 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>E. POWELL MILLER</b> <b>950 W UNIVERSITY DR</b> <b>ROCHESTER, MI 48307</b>	<u>\$ 5,000.00</u>	<u>\$ 5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>950 W UNIVERSITY DR, ROCHESTER, MI 48307</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **8,050.00**

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

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**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, 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>10/16/2024</u> Name & Address: <b>MARCIE ORLEY</b> 25251 RIVER DR FRANKLIN, MI 48025	\$ <u>5,000.00</u>	\$ <u>6,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NA</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>PLUNKETT COONEY PAC</b> 38505 WOODWARD AVE BLOOMFIELD HILLS, MI 48304	\$ <u>500.00</u>	\$ <u>500.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/16/2024</u> Name & Address: <b>REALTORS PAC</b> 720 N WASHINGTON AVE LANSING, MI 48906	\$ <u>1,000.00</u>	\$ <u>1,000.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/17/2024</u> Name & Address: <b>MICHAEL ABRAMSKY</b> 954 CANTERBURY ST BIRMINGHAM, MI 48009	\$ <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		

Page Subtotal **6,600.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/17/2024</u> Name & Address: <b>MARCEL BENAVIDES</b> 18118 BUCKINGHAM AVE BEVERLY HILLS, MI 48025	\$ <u>1,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>801 W 11 MILE RD, ROYAL OAK, MI 48067</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/17/2024</u> Name & Address: <b>CHARLES BULLOCK</b> 26100 AMERICAN DR SOUTHFIELD, MI 48034	\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>STEVENSON &amp; BULLOCK</u> Business Address <u>26100 AMERICAN DR, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: <b>JAMES BLANCHARD</b> 22326 VALLEY OAKS DR BEVERLY HILLS, MI 48025	\$ <u>1,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DLA PIPER</u> Business Address <u>500 8TH ST NW, WASHINGTON, DC 20004</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>10/18/2024</u> Name & Address: <b>DTE ENERGY PAC</b> 101 S WASHINGTON SQUARE LANSING, MI 48933	\$ <u>500.00</u>	\$ <u>500.00</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 checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **7,500.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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 checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: <b>GLM PAC</b> 1155 BREWERY PARK BLVD DETROIT, MI 48207	\$ <u>250.00</u>	\$ <u>250.00</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 checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: <b>BRIAN LEGGHIO</b> 645 GRISWOLD ST DETROIT, MI 48226	\$ <u>250.00</u>	\$ <u>1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>134 MARKET ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: <b>BARRY MALONE</b> 3627 HUTCHINS HILL DR WEST BLOOMFIELD TOWNSHIP, MI 48323	\$ <u>100.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>LAKESHORE LEGAL AID</u> Business Address <u>30500 VAN DYKE AVE, WARREN, MI 48093</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 type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: <b>DORAID MARKUS</b> 6750 OAKHILLS DR BLOOMFIELD HILLS, MI 48301	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FREID SAPERSTEIN</u> Business Address <u>29800 TELEGRAPH RD, SOUTHFIELD, MI 48034</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **1,100.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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 checked="" type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: PLUMBERS LOCAL 98 700 TOWER DR 300 TROY, MI 48098 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>1,000.00</u>	\$ <u>1,500.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/18/2024</u> Name & Address: ALLEN SALYER 1657 WELLING DR TROY, MI 48085 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>70.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/19/2024</u> Name & Address: DENNIS ARCHER, JR 151 W CONGRESS ST DETROIT, MI 48226 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>IGNITION MEDIA GROUP</u> Business Address <u>151 W CONGRESS ST, DETROIT, MI 48226</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>6,000.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/19/2024</u> Name & Address: CHRISTINE FARRUG INFORMATION REQUESTED ROCHESTER, MI 48307 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>2.00</u>	\$ <u>7.00</u>

Page Subtotal **3,027.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/19/2024</u> Name & Address: <b>SUZANNE FINLEY</b> 20899 VERANDA DR NOVI, MI 48375	\$ <u>50.00</u>	\$ <u>50.00</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>10/19/2024</u> Name & Address: <b>THOMAS KIRBY</b> 26 OAKDALE BLVD PLEASANT RIDGE, MI 48069	\$ <u>10.00</u>	\$ <u>10.00</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>10/19/2024</u> Name & Address: <b>JIM NEWMAN</b> 31134 HARMONY LN FARMINGTON HILLS, MI 48331	\$ <u>18.00</u>	\$ <u>18.00</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/19/2024</u> Name & Address: <b>ROBERT PRAETORIUS</b> 10 MOCKINGBIRD LANE MAYNARD, MA 01754	\$ <u>25.00</u>	\$ <u>25.00</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 **103.00**

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

Enter this total on  
line 3a of Summary  
Page.



**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, 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>10/19/2024</u> Name & Address: <b>JEFFREY SCHWARTZ</b> <b>5403 DEERFIELD VILLAGE DR</b> <b>WEST BLOOMFIELD, MI 48322</b>	\$ <u>100.00</u>	\$ <u>100.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> 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 _____ Name & Address _____	\$ _____	\$ _____
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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 _____ Name & Address _____	\$ _____	\$ _____
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____	\$ _____	\$ _____
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

[Click Here for Memo Itemization](#)

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Page Subtotal **100.00**

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

**147,038.80**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

1. Committee I. D. Number 97181

**CANDIDATE COMMITTEE**

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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>TODD FLOOD</b> <b>10555 LINCOLN DR</b> <b>HUNTINGTON WOODS, MI 48070</b>  <b>If over \$100.00 cumulative, please provide:</b> Occupation: <b>ATTORNEY</b>  Employer Name & Business Address: <b>FLOOD LAW</b> <b>401 N MAIN ST,</b> <b>ROYAL OAK, MI 48067</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 <u>FOOD AND BEVERAGE</u>  5. Date Of Receipt: <u>08/28/2024</u>  6. <b>Vendor Name &amp; Address:</b>	\$ <u>1,800.00</u>	\$ <u>2,800.00</u>
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>MICHAEL MORSE</b> <b>26232 PEMBROKE RD</b> <b>HUNTINGTON WOODS, MI 48070</b>  <b>If over \$100.00 cumulative, please provide:</b> Occupation: <b>ATTORNEY</b>  Employer Name & Address: <b>SELF</b> <b>24901 NORTHWESTERN HWY,</b> <b>SOUTHFIELD, MI 48075</b>  <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 checked="" 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 <u>FOOD AND BEVERAGE</u>  5. Date Of Receipt: <u>09/10/2024</u>  6. <b>Vendor Name &amp; Address:</b>	\$ <u>1,225.00</u>	\$ <u>3,225.00</u>
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>RACHEL GANDHI</b> <b>18679 CLAIRMONT CIR E</b> <b>NORTHVILLE, MI 48168</b>  <b>If over \$100.00 cumulative, please provide:</b> Occupation: <b>NOT EMPLOYED</b>  Employer Name & Address: <b>NA</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 <u>FOOD AND BEVERAGE</u>  5. Date Of Receipt: <u>09/22/2024</u>  6. <b>Vendor Name &amp; Address:</b>	\$ <u>2,100.00</u>	\$ <u>2,100.00</u>

Page Subtotal **5,125.00**      **8,125.00**

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) **5,125.00**

Enter this total on line 6 of Summary Page



**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
Expenditure #1 Name <b>MAILCHIMP</b>  Address 675 PONCE DE LEON AVE NE STE. 5000 ATLANTA, GA 30308  <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>08/29/2024</u> Date	<u>\$ 138.00</u>
Expenditure #2 Name MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE  Address 606 TOWNSEND ST LANSING, MI 48933  <input type="checkbox"/> Fund Raiser	Purpose: <u>EVENT SPONSORHIP</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/29/2024</u> Date	<u>\$ 5,000.00</u>
Expenditure #3 Name <b>ALLIED MEDIA</b>  Address 240 N FENWAY DR FENTON, MI 48430  <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/2024</u> Date	<u>\$ 1,988.85</u>
Expenditure #4 Name <b>FLYWHEEL</b>  Address 1111 N 13TH ST STE. 208 OMAHA, NE 68102  <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>09/03/2024</u> Date	<u>\$ 30.00</u>
Expenditure #5 Name <b>GOOGLE</b>  Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043  <input type="checkbox"/> Fund Raiser	Purpose: <u>EMAIL SERVICES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/2024</u> Date	<u>\$ 158.40</u>

Subtotal this page **7,315.25**  
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 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
Expenditure #1 Name <b>NEW BLUE INTERACTIVE</b>  Address 1146 19TH ST NW WASHINGTON, DC 20036  <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL SERVICES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/2024</u> Date	<u>\$ 4,002.50</u>
Expenditure #2 Name <b>NGP VAN, INC</b>  Address 1445 NEW YORK AVE NW STE. 200 WASHINGTON, DC 20005  <input type="checkbox"/> Fund Raiser	Purpose: <u>DATABASE</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/05/2024</u> Date	<u>\$ 960.00</u>
Expenditure #3 Name <b>HOME DEPOT</b>  Address 1177 COOLIDGE HWY TROY, MI 48084  <input type="checkbox"/> Fund Raiser	Purpose: <u>SUPPLIES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/11/2024</u> Date	<u>\$ 338.35</u>
Expenditure #4 Name <b>CHANGE MEDIA GROUP</b>  Address 1000 S WASHINGTON AVE LANSING, MI 48910  <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL ADS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/16/2024</u> Date	<u>\$ 104,447.00</u>
Expenditure #5 Name <b>OAKLAND COUNTY DEMOCRATIC PARTY</b>  Address 555 HORACE BROWN DR STE. 202 MADISON HEIGHTS, MI 48071  <input type="checkbox"/> Fund Raiser	Purpose: <u>EVENT SPONSORSHIP</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/2024</u> Date	<u>\$ 2,250.00</u>

Subtotal this page **111,997.85**

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 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
Expenditure #1 Name <b>CLARK HILL</b>  Address 500 WOODWARD AVE 3500 DETROIT, MI 48226 <input type="checkbox"/> Fund Raiser	Purpose: <u>LEGAL SERVICES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/2024</u> Date	<u>\$ 3,000.00</u>
Expenditure #2 Name <b>DETROIT JEWISH NEWS</b>  Address 32255 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334 <input type="checkbox"/> Fund Raiser	Purpose: <u>ADVERTISING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/2024</u> Date	<u>\$ 690.00</u>
Expenditure #3 Name <b>MAILCHIMP</b>  Address 675 PONCE DE LEON AVE NE STE. 5000 ATLANTA, GA 30308 <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>09/29/2024</u> Date	<u>\$ 138.00</u>
Expenditure #4 Name <b>FLYWHEEL</b>  Address 1111 N 13TH ST STE. 208 OMAHA, NE 68102 <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>10/01/2024</u> Date	<u>\$ 30.00</u>
Expenditure #5 Name <b>CHANGE MEDIA GROUP</b>  Address 1000 S WASHINGTON AVE LANSING, MI 48910 <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL ADS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/02/2024</u> Date	<u>\$ 22,500.00</u>

Subtotal this page **26,358.00**

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 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
Expenditure #1 Name <b>GOOGLE</b>  Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043  <input type="checkbox"/> Fund Raiser	Purpose: <u>EMAIL SERVICES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/02/2024</u> Date	\$ <u>158.40</u>
Expenditure #2 Name <b>CHALDEAN NEWS</b>  Address 30095 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334  <input type="checkbox"/> Fund Raiser	Purpose: <u>ADVERTISING</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/2024</u> Date	\$ <u>1,250.00</u>
Expenditure #3 Name <b>STAPLES</b>  Address 43313 WOODWARD AVE BLOOMFIELD HILLS, MI 48302  <input type="checkbox"/> Fund Raiser	Purpose: <u>SUPPLIES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/07/2024</u> Date	\$ <u>116.55</u>
Expenditure #4 Name <b>FIFTH AVENUE</b>  Address 215 W FIFTH ST ROYAL OAK, MI 48067  <input type="checkbox"/> Fund Raiser	Purpose: <u>EVENT COSTS</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/2024</u> Date	\$ <u>2,387.70</u>
Expenditure #5 Name <b>NEW BLUE INTERACTIVE</b>  Address 1146 19TH ST NW WASHINGTON, DC 20036  <input type="checkbox"/> Fund Raiser	Purpose: <u>DIGITAL SERVICES</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/2024</u> Date	\$ <u>1,445.50</u>

Subtotal this page **5,358.15**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **151,029.25**

Enter this total  
on line 8a of  
Summary Page



**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>08/27/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>40</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. TOP GOLF 500 GREAT LAKES CROSSING DR <input type="checkbox"/> AUBURN HILLS, MI 48326 Private Residence
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7. Total Contributions 13,670.00  
8. Other Receipts 0.00  
9. Gross Receipts (Add lines 7 and 8) 13,670.00  
10. Total Cost of Event 4,177.00  
(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 fund raiser must file a Fund Raiser Schedule for the event.



**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>08/28/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>50</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>53 OXFORD RD</u> <u>GROSSE POINTE</u> <u>SHORES, MI 48236</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 13,100.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 13,100.00

10. Total Cost of Event 1,800.00  
(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 fund raiser must file a Fund Raiser Schedule for the event.



**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>09/05/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>67</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>26232 PEMBROKE RD</u> <u>HUNTINGTON WOODS,</u> <u>MI 48070</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 30,600.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 30,600.00

10. Total Cost of Event 1,225.00  
(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 fund raiser must file a Fund Raiser Schedule for the event.



**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>09/22/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>43</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>18679 CLAIRMONT CIR</u> <u>E</u> <u>NORTHVILLE, MI 48168</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 23,445.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 23,445.00

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 fund raiser must file a Fund Raiser Schedule for the event.



**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>10/09/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>48</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>FIFTH AVENUE</u> <u>215 W FIFTH ST</u> <u>ROYAL OAK, MI 48067</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 19,765.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 19,765.00

10. Total Cost of Event 2,387.70  
(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 fund raiser must file a Fund Raiser Schedule for the event.



**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>10/16/2024</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>70</u>	5. Type of Fund Raising Activity  <u>RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>1750 SAXON DR BIRMINGHAM, MI 48009</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 72,053.80

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 72,053.80

10. Total Cost of Event 3,155.02  
(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.
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