



FILED

25 OCT 2024 PM 03:41

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

97280

2. Committee Name

FRIENDS OF DAVE COULTER

5. Committee's Mailing Address

**PO BOX 201073
FERNDAL, MI 48220**

Area Code and Phone (248) 622-2257
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.

4. Candidate Last Name

COULTER

First Name

DAVID

M.I.

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

COUNTY EXECUTIVE, OAKLAND COUNTY

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

6. Treasurer's Name & Residential Address

**DAVID COULTER
555 LEROY ST.
FERNDAL, MI 48220**

Area Code & Phone (248) 568-5049

7. Treasurer's Business Address

**555 LEROY ST.
FERNDAL, MI 48220**

Area Code and Phone (248) 568-5049

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 late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

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

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

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/25/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/25/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 97280

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name FRIENDS OF DAVE COULTER

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>108,220.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>108,220.00</u>	(18.) \$ <u>882,019.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>1,784.66</u>	(19.) \$ <u>2,269.91</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>110,004.66</u>	(20.) \$ <u>884,288.91</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>450.00</u>	(21.) \$ <u>21,291.21</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>576,967.35</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>576,967.35</u>	(23.) \$ <u>963,661.88</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>94.44</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>53,420.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>550,733.61</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>110,004.66</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>660,738.27</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>576,967.35</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>83,770.92</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: MARK ADAMS 28724 CASTLEGATE DR SOUTHFIELD, MI 48034		\$ <u>35.00</u>	\$ <u>85.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>CITY OF TROY</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: ALICE AUDIE-FIGUEROA 25502 PARKWOOD DR HUNTINGTON WOODS, MI 48070		\$ <u>250.00</u>	\$ <u>525.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>HERE2THERE, LLC</u> Business Address <u>25502 PARKWOOD DR, HUNTINGTON WOODS, MI 48070</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: JACK BAKER 4483 ARDMORE DR BLOOMFIELD TOWNSHIP, MI 48302		\$ <u>250.00</u>	\$ <u>850.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>4483 ARDMORE DR, BLOOMFIELD TOWNSHIP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: MICHELLE CLEGG 687 LIVERNOIS ST FERNDAL, MI 48220		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>AT&T</u> Business Address <u>444 MICHIGAN AVE, DETROIT, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 635.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: RUTH JORDAN 86 CARR ST PONTIAC, MI 48342		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: MARGARET RABEN 5301 W DOHERTY DR WEST BLOOMFIELD, MI 48323		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GUREWITZ AND RABEN PLC</u> Business Address <u>5301 W DOHERTY DR, WEST BLOOMFIELD, MI 48323</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: ERIC RADER 588 MEADOWDALE ST FERNDAL, MI 48220		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>HENRY FORD</u> Business Address <u>5101 EVERGREEN RD, DEARBORN, MI 48128</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/2024</u> Name & Address: NANCY RODDA 6576 CHERRYLAWN AVE CLARKSTON, MI 48346		\$ <u>50.00</u>	\$ <u>285.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>6576 CHERRYLAWN AVE, CLARKSTON, MI 48346</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **685.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>08/28/2024</u>	
Name & Address: GREG SHERMAN 3361 PADDINGTON 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: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/28/2024</u>	
Name & Address: JUDITH WINEMAN 13110 NADINE AVE HUNTINGTON WOODS, MI 48070		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>WAYNE STATE UNIVERSITY</u> Business Address <u>5447 WOODWARD AVE, DETROIT, MI 48202</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/29/2024</u>	
Name & Address: HELAINE M ZACK 8320 HENDRIE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>8320 HENDRIE BLVD, HUNTINGTON WOODS, MI 48070</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/03/2024</u>	
Name & Address: RICHARD BEATTIE 3366 WILLET AVE ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>85.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR MINISTER</u> Employer <u>UNITY OF ROYAL OAK</u> Business Address <u>2500 CROOKS RD, ROYAL OAK, MI 48073</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>09/03/2024</u> Name & Address: CHRISTOPHER CLASON 1938 GRAYSLAKE DR ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>4758 CIDER HILL DR, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/03/2024</u> Name & Address: BERNARD CONFLITTI 1635 GRANGER RD OXFORD, MI 48371		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/03/2024</u> Name & Address: JEFFREY DENHA 5971 BURNHAM RD BLOOMFIELD TWP, MI 48302		\$ <u>3,325.00</u>	\$ <u>8,325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>BRASS ALUMINUM FORGING</u> Business Address <u>1351 JARVIS ST, FERNDAL, MI 48220</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/03/2024</u> Name & Address: VIVIAN DENHA 5971 BURNHAM RD BLOOMFIELD TWP, MI 48302		\$ <u>1,625.00</u>	\$ <u>1,625.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer <u>N/A</u> Business Address <u>5971 BURNHAM RD, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 5,075.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>09/03/2024</u>	
Name & Address: MARCUS JACKSON 7985 SADBURY DR WEST BLOOMFIELD, MI 48322		\$ <u>35.00</u>	\$ <u>540.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER CONSULTANT</u> Employer <u>ACCION GROUP</u> Business Address <u>1101 15TH ST NW, WASHINGTON, DC 20005</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/03/2024</u>	
Name & Address: MARY MILLS 5065 CROOKS RD ROYAL OAK, MI 48073		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/04/2024</u>	
Name & Address: SARA KEIDAN PO BOX 250036 WEST BLOOMFIELD, MI 48325		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☒ YES	4. Date of Receipt <u>09/04/2024</u>	
Name & Address: MICHIGAN BUILDING AND CONSTRUCTION TRADES COUNCIL PAC 435 S WASHINGTON SQUARE LANSING, MI 48933		\$ <u>500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 685.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☒ YES	4. Date of Receipt <u>09/04/2024</u>	
Name & Address: PIPEFITTERS LOCAL 636 PAC 30100 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334		\$ <u>2,500.00</u>	\$ <u>5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/05/2024</u>	
Name & Address: ASHOK GUPTA PO BOX 645 KEEGO HARBOR, MI 48320		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/06/2024</u>	
Name & Address: JAMES CALLAGHAN 666 LAKEVIEW AVE BIRMINGHAM, MI 48009		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/07/2024</u>	
Name & Address: WILLIAM FADER 311 W HAZELHURST ST FERNDAL, MI 48220		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 2,600.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>09/10/2024</u>	
Name & Address: RONALD KUMON 23700 MAUDE LEA ST 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: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/10/2024</u>	
Name & Address: SUSAN MCLEOD 1010 E 14 MILE RD ROYAL OAK, MI 48073		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/11/2024</u>	
Name & Address: WILLIAM ASHER 1003 IRVING AVE ROYAL OAK, MI 48067		\$ <u>50.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOFTWARE ENGINEER</u> Employer <u>MERKLE</u> Business Address <u>2000 TOWN CTR, SOUTHFIELD, MI 48075</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/12/2024</u>	
Name & Address: BARRY BRICKNER 28580 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **160.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>09/12/2024</u> Name & Address: BILL WEATHERSTON 31316 W CHELTON DR BEVERLY HILLS, MI 48025		\$ <u>200.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>31316 W CHELTON DR, BEVERLY HILLS, MI 48025</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2024</u> Name & Address: NINA ABRAMS 12959 TALBOT LN HUNTINGTON WOODS, MI 48070		\$ <u>1,000.00</u>	\$ <u>3,200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>12959 TALBOT LN, HUNTINGTON WOODS, MI 48070</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/17/2024</u> Name & Address: EDMUND CARNEY 359 W MAPLEHURST AVE FERNDAL, MI 48220		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/17/2024</u> Name & Address: PETER REMINGTON 777 PURDY ST BIRMINGHAM, MI 48009		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHILANTHROPIC ADVISOR</u> Employer <u>REMINGTON GROUP</u> Business Address <u>21820 DOVER CT, BEVERLY HILLS, MI 48025</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 2,235.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>09/20/2024</u>	
Name & Address: RICHARD BEATTIE 3366 WILLET AVE ROCHESTER HILLS, MI 48309		\$ <u>35.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR MINISTER</u> Employer <u>UNITY OF ROYAL OAK</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/20/2024</u>	
Name & Address: JULIE FRONTERA 3607 CEDAR SHAKE DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/23/2024</u>	
Name & Address: DAVID AUGHTON 3401 W BRECKENRIDGE LN BLOOMFIELD HILLS, MI 48301		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/24/2024</u>	
Name & Address: BARON BROWN 9753 GIBBS RD CLARKSTON VLG, MI 48348		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>09/25/2024</u>	
Name & Address: BRIAN CASTERLINE 32366 VALLEY VIEW CIR FARMINGTON HILLS, MI 48336		\$ <u>5.00</u>	\$ <u>260.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>32366 VALLEY VIEW CIR, FARMINGTON HILLS, MI 48336</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/26/2024</u>	
Name & Address: CATHERINE KINZEY 3152 QUAIL RIDGE CIR 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: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/27/2024</u>	
Name & Address: BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506		\$ <u>500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGING PARTNER</u> Employer <u>WINMATT GROUP</u> Business Address <u>1455 BALL AVE NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/27/2024</u>	
Name & Address: JANICE ROWE 3442 DEVON RD ROYAL OAK, MI 48073		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **615.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>09/29/2024</u>	
Name & Address: FRAN GRASHA 28167 PALMER ST MADISON HEIGHTS, MI 48071		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/01/2024</u>	
Name & Address: LOREN CLIFT 29170 TESSMER CT MADISON HEIGHTS, MI 48071		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/01/2024</u>	
Name & Address: RALPH GERSON 2300 HARMON RD AUBURN HILLS, MI 48326		\$ <u>1,000.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>2300 HARMON RD, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/01/2024</u>	
Name & Address: GEORGE PITCHFORD 25264 SURREY LN FARMINGTON HILLS, MI 48335		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

1,185.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>10/01/2024</u>	
Name & Address: MICHAEL ROSS 27177 FARMBROOK VILLA DR SOUTHFIELD, MI 48034		\$ <u>35.00</u>	\$ <u>365.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>27177 FARMBROOK VILLA DR, SOUTHFIELD, MI 48034</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/01/2024</u>	
Name & Address: PETER WERTHMANN 3845 CHEVRON DR HIGHLAN, MI 48356		\$ <u>15.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/02/2024</u>	
Name & Address: MICHIGAN REGIONAL COUNCIL OF CARPENTERS PAC 400 RENAISSANCE CENTER SUITE 1010 DETROIT, MI 48243		\$ <u>10,000.00</u>	\$ <u>35,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/03/2024</u>	
Name & Address: ANDREW COULOURIS 2110 LONDONDERRY RD ANN ARBOR, MI 48104		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>DTE ENERGY</u> Business Address <u>1 ENERGY PLAZA, DETROIT, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 10,550.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>10/04/2024</u> Name & Address: JARED FLEISHER 2829 BRUSH ST DETROIT, MI 48201		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>ROCK</u> Business Address <u>2829 BRUSH ST, DETROIT, MI 48201</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/06/2024</u> Name & Address: UNITY FUND 426 ALBANY ST FERNDAL, MI 48220		\$ <u>1,250.00</u>	\$ <u>1,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/07/2024</u> Name & Address: STACEY BARBAS 837 W MAPLEHURST AVE FERNDAL, MI 48220		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/07/2024</u> Name & Address: ENRIQUE ECHARTEA 244 LAPRAIRIE ST FERNDAL, MI 48220		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **2,885.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☒ YES 4. Date of Receipt <u>10/08/2024</u> Name & Address: BLUE CROSS BLUE SHIELD MI PAC 232 S CAPITOL AVE LANSING, MI 48933		\$ <u>25,000.00</u>	\$ <u>25,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/08/2024</u> Name & Address: RACHEL STEWART 393 MARTELL DR BLOOMFIELD HILLS, MI 48304		\$ <u>1,000.00</u>	\$ <u>4,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>GARDNER WHITE</u> Business Address <u>4445 N ATLANTIC BLVD, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/08/2024</u> Name & Address: STEVEN TRONSTEIN 1482 SODON CT BLOOMFIELD TWP, MI 48302		\$ <u>3,325.00</u>	\$ <u>8,325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS CONSULTANT</u> Employer <u>GARDNER WHITE</u> Business Address <u>4445 N ATLANTIC BLVD, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/08/2024</u> Name & Address: BARBARA TRONSTEIN 1482 SODON CT BLOOMFIELD HILLS, MI 48302		\$ <u>175.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>GARDNER WHITE</u> Business Address <u>4445 N ATLANTIC BLVD, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 29,500.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>10/10/2024</u>	
Name & Address: CHRISTOPHER CLASON 1938 GRAYSLAKE DR ROCHESTER HILLS, MI 48306		\$ <u>20.00</u>	\$ <u>195.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>4758 CIDER HILL DR, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/10/2024</u>	
Name & Address: JILL FARBER-BRAMSON 6118 WESTBROOKE DR W BLOOMFIELD, MI 48322		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/10/2024</u>	
Name & Address: TOM LEWAND PO BOX 5 MACKINAC ISLAND, MI 49757		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/11/2024</u>	
Name & Address: BLAIR BOWMAN 46100 GRAND RIVER AVE NOVI, MI 48374		\$ <u>1,000.00</u>	\$ <u>3,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>BOCO ENTERPRISES</u> Business Address <u>46100 GRAND RIVER AVE, NOVI, MI 48374</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **1,170.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES 4. Date of Receipt <u>10/11/2024</u> Name & Address: SUZANNE COLUCCI 4 KENDAL DR OBERLIN, OH 44074		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>4 KENDAL DR, OBERLIN, OH 44074</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/11/2024</u> Name & Address: DETROIT REGIONAL CHAMBER PAC 1 WOODWARD AVE SUITE 1900 DETROIT, MI 48226		\$ <u>2,500.00</u>	\$ <u>3,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/11/2024</u> Name & Address: ZINA KRAMER 1600 APPLE LN BLOOMFIELD TWP, MI 48302		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>1600 APPLE LN, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☒ YES 4. Date of Receipt <u>10/11/2024</u> Name & Address: MICHIGAN DEMOCRATIC JEWISH CAUCUS PO BOX 250972 WEST BLOOMFIELD, MI 48325		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 4,150.00

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☒ YES	4. Date of Receipt <u>10/11/2024</u>	
Name & Address: MICHIGAN LABORER'S POLITICAL LEAGUE 1118 CENTENNIAL WAY LANSING, MI 48917		\$ <u>5,000.00</u>	\$ <u>10,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/11/2024</u>	
Name & Address: KENNETH SCHRAMM 1545 MCMANUS 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: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2024</u>	
Name & Address: HERITAGE VISION PLANS 30980 WENDBROOK LN BEVERLY HILLS, MI 48025		\$ <u>3,000.00</u>	\$ <u>3,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2024</u>	
Name & Address: PHIL PIERCE 17 OXFORD RD GROSSE POINTE SHORES, MI 48236		\$ <u>3,825.00</u>	\$ <u>8,325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGING MEMBER</u> Employer <u>PIERCE, MONROE & ASSOCIATES, LLC</u> Business Address <u>535 GRISWOLD ST STE 1680, DETROIT, MI 48226</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **11,925.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>10/14/2024</u>	
Name & Address: CLAUDIA SILLS 120 HAWTHORNE ST BIRMINGHAM, MI 48009		\$ <u>1,000.00</u>	\$ <u>6,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR/ OWNER</u> Employer <u>FIRST HOLDING MANAGEMENT</u> Business Address <u>6960 ORCHARD LAKE RD STE 300, WEST BLOOMFIELD, MI 48322</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>100.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3053 CARLY CT, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: SEAN CARLSON 5531 HILLSBORO CT COMMERCE TOWNSHIP, MI 48382		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY COUNTY EXECUTIVE</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>2800 PONTIAC LAKE RD, WATERFORD, MI 48328</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: FARMINGTON DEMOCRATIC CLUB 28825 SALEM ROAD FARMINGTON, MI 48334		\$ <u>550.00</u>	\$ <u>550.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **6,650.00**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: JEFFREY AXT 407 E FORT ST DETROIT, MI 48226		\$ <u>2,000.00</u>	\$ <u>7,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE</u> Employer <u>AXT INC</u> Business Address <u>407 E FORT ST, DETROIT, MI 48226</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: PAULINE OSHAUGHNESSY 1593 GERUNDECUT DR WEST BLOOMFIELD, MI 48324		\$ <u>1,666.67</u>	\$ <u>1,666.67</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>GREAT LAKES BAKING COMPANY</u> Business Address <u>14430 DEXTER AVE, DETROIT, MI 48238</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: ROCHESTER AREA DEMOCRATIC CLUB PAC PO BOX 8059 ROCHESTER, MI 48308		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/15/2024</u>	
Name & Address: GREG TATARIAN 4470 RUE DEMERS WEST BLOOMFIELD, MI 48323		\$ <u>1,666.67</u>	\$ <u>1,666.67</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>GREAT LAKES BAKING CO</u> Business Address <u>14430 DEXTER AVE, DETROIT, MI 48238</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **5,633.34**

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 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ YES	4. Date of Receipt <u>10/16/2024</u>	
Name & Address: MILAN GANDHI 26222 TELEGRAPH RD SOUTHFIELD, MI 48033		\$ <u>1,000.00</u>	\$ <u>6,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>NORTHLAND RADIOLOGY</u> Business Address <u>26222 TELEGRAPH RD, SOUTHFIELD, MI 48033</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/16/2024</u>	
Name & Address: SOPHIE NEMETH 2 JOHN R ST DETROIT, MI 48226		\$ <u>1,666.66</u>	\$ <u>1,666.66</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>GREAT LAKES BAKING COMPANY</u> Business Address <u>14430 DEXTER AVE, DETROIT, MI 48238</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/18/2024</u>	
Name & Address: DTE ENERGY PAC 1 ENERGY PLAZA DETROIT, MI 48226		\$ <u>5,000.00</u>	\$ <u>5,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/18/2024</u>	
Name & Address: OPERATING ENGINEERS LOCAL 324 STATE OF MICHIGAN PAC 500 HULET DR BLOOMFIELD HILLS, MI 48302		\$ <u>10,000.00</u>	\$ <u>20,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **17,666.66**

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 97280

2. Committee Name FRIENDS OF DAVE COULTER

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? ☒ YES 4. Date of Receipt <u>10/18/2024</u> Name & Address: ROCK HOLDINGS STATE PAC 101 S WASHINGTON SQ STE 300 LANSING, MI 48933		\$ <u>3,500.00</u>	\$ <u>15,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/19/2024</u> Name & Address: PHILLIP REID 6050 SHAPPIE RD CLARKSTON, MI 48348		\$ <u>35.00</u>	\$ <u>85.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>6050 SHAPPIE RD, CLARKSTON, MI 48348</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/2024</u> Name & Address: JOHN LAWSON 4076 CRANBROOK CT BLOOMFIELD HILLS, MI 48301		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal	3,585.00
---------------	----------

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

108,220.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1**

CANDIDATE COMMITTEE

1. Committee I.D. Number **97280**

2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: CITIZENS BANK 23011 WOODWARD AVE FERNDAL, MI 48220	Date of Receipt 08/30/2024	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ 1,004.06
	☐ Fund Raiser		
Receipt #2 Name & Address: CITIZENS BANK 23011 WOODWARD AVE FERNDAL, MI 48220	Date of Receipt 09/30/2024	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ 780.60
	☐ Fund Raiser		
Receipt #3 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
	☐ Fund Raiser		
Receipt #4 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
	☐ Fund Raiser		
Receipt #5 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
	☐ Fund Raiser		
Receipt #6 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
	☐ Fund Raiser		
Receipt #7 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
	☐ Fund Raiser		

Page Subtotal **1,784.66**

Grand Total of All Schedules 1A -1
(Complete on last page of Schedule) **1,784.66**

Enter this total on
line 4 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 97280
2. Committee Name FRIENDS OF DAVE COULTER

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? ☐ Yes Name & Address: SHERRIE PIERCE 17 OXFORD RD GROSSE POINTE SHORES, MI 48236 If over \$100.00 cumulative, please provide: Occupation: <u>N/A</u> Employer Name & Business Address: <u>N/A</u> 17 OXFORD RD, GROSSE POINTE SHORES, MI 48236 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description <u>EVENT FOOD & BEVERAGE</u> 5. Date Of Receipt: <u>10/15/2024</u> 6. Vendor Name & Address: <u>DETROIT ATHLETIC CLUB</u> <u>241 MADISON ST,</u> <u>DETROIT, MI 48226</u>	\$ <u>450.00</u>	\$ <u>450.00</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$

Page Subtotal 450.00 450.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 450.00

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name INTERNAL REVENUE SERVICE Address INTERNAL REVENUE SERVICE OGDEN, UT 84401 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/2024 Date	\$ 326.83
Expenditure #2 Name MELANIE HARTMAN Address 191 ERIN CASTLE DR ROCHESTER HILLS, MI 48306 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/2024 Date	\$ 1,234.09
Expenditure #3 Name MICHIGAN DEPARTMENT OF TREASURY Address P.O. BOX 30774 LANSING, MI 48929 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/2024 Date	\$ 53.83
Expenditure #4 Name NGP VAN Address 1445 NEW YORK AVE NW WASHINGTON, DC 20005 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/03/2024 Date	\$ 350.00
Expenditure #5 Name PARAGON SOLUTIONS Address 2141 E BROADWAY RD #202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: CONTRIBUTION PROCESS FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/03/2024 Date	\$ 404.03

Subtotal this page **2,368.78**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GUSTO Address 525 20TH ST SAN FRANCISCO, CA 94107 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/04/2024 Date	\$ 58.00
Expenditure #2 Name COMPLYBLUE LLC Address 120 GRAFTON ST CHEVY CHASE, MD 20815 ☐ Fund Raiser	Purpose: COMPLIANCE CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/13/2024 Date	\$ 2,000.00
Expenditure #3 Name ERIC SPRAGINS Address 17177 ADRIAN RD SOUTHFIELD, MI 48075 ☐ Fund Raiser	Purpose: FIELD CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/2024 Date	\$ 100.00
Expenditure #4 Name KENNEDYS IRISH PUB Address 1055 W HURON ST WATERFORD TWP, MI 48328 ☐ Fund Raiser	Purpose: EVENT FOOD & BEVERAGE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/2024 Date	\$ 810.52
Expenditure #5 Name MOORE CAMPAIGNS Address 111 QUINCY PL NE WASHINGTON, DC 20002 ☐ Fund Raiser	Purpose: LITERATURE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/2024 Date	\$ 6,578.55

Subtotal this page **9,547.07**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SAWICKI & SON Address 1521 W LAFAYETTE BLVD DETROIT, MI 48216 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/2024 Date	\$ 4,208.20
Expenditure #2 Name INTERNAL REVENUE SERVICE Address INTERNAL REVENUE SERVICE OGDEN, UT 84401 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/21/2024 Date	\$ 326.83
Expenditure #3 Name MELANIE HARTMAN Address 191 ERIN CASTLE DR ROCHESTER HILLS, MI 48306 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/21/2024 Date	\$ 1,234.09
Expenditure #4 Name MICHIGAN DEPARTMENT OF TREASURY Address P.O. BOX 30774 LANSING, MI 48929 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/21/2024 Date	\$ 53.83
Expenditure #5 Name CHARLOTTE KRAUSE Address 1640 PARK CREEK CT, ROCHESTER HILLS, MI, USA ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ 607.53

Subtotal this page **6,430.48**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name HAMBURGER MEDIA GROUP Address 5614 CONNECTICUT AVE NW WASHINGTON, DC 20015 ☐ Fund Raiser	Purpose: <u>MEDIA CONSULTING & ADVERTISING</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2024</u> Date	\$ <u>450,000.00</u>
Expenditure #2 Name MEGAN MORRISON Address 306 NW H ST BENTONVILLE, AR 72712 ☐ Fund Raiser	Purpose: <u>MEDIA PRODUCTION</u> (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2024</u> Date	\$ <u>(1,000.00)</u>
Expenditure #3 Name EXTREME REACH Address 66 HUDSON BLVD E NEW YORK, NY 10001 ☐ Fund Raiser	Purpose: <u>MEDIA PRODUCTION</u> (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2024</u> Date	\$ <u>(500.00)</u>
Expenditure #4 Name NIKKI LU LOWE Address 4018 NE STANTON ST PORTLAND, OR 97212 ☐ Fund Raiser	Purpose: <u>MEDIA PRODUCTION</u> (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2024</u> Date	\$ <u>(2,300.00)</u>
Expenditure #5 Name ATOMICA Address ROYAL OAKS DR FRISCO, TX 75036 ☐ Fund Raiser	Purpose: <u>MEDIA PRODUCTION</u> (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2024</u> Date	\$ <u>(700.00)</u>

Subtotal this page **450,000.00**
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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GETTY IMAGES Address 605 5TH AVE S SEATTLE, WA 98104 ☐ Fund Raiser	Purpose: MEDIA PRODUCTION (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ (1,600.00)
Expenditure #2 Name FISHTOWN FILMS Address 2647 E THOMPSON ST PHILADELPHIA, PA 19125 ☐ Fund Raiser	Purpose: MEDIA PRODUCTION (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ (5,700.00)
Expenditure #3 Name GREEN & WOOD MEDIA SERVICES Address 2645 BEAVER AVE DES MOINES, IA 50310 ☐ Fund Raiser	Purpose: MEDIA BUY (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ (187,981.00)
Expenditure #4 Name SAGE MEDIA PLANNING & PLACEMENT Address 1322 G ST SE WASHINGTON, DC 20003 ☐ Fund Raiser	Purpose: MEDIA BUY (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2024 Date	\$ (250,219.00)
Expenditure #5 Name INTERNAL REVENUE SERVICE Address INTERNAL REVENUE SERVICE OGDEN, UT 84401 ☐ Fund Raiser	Purpose: TAXES (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ 447.30

Subtotal this page

447.30

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MELANIE HARTMAN Address 191 ERIN CASTLE DR ROCHESTER HILLS, MI 48306 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ 1,234.09
Expenditure #2 Name MICHIGAN DEPARTMENT OF TREASURY Address P.O. BOX 30774 LANSING, MI 48929 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2024 Date	\$ 83.58
Expenditure #3 Name PARAGON SOLUTIONS Address 2141 E BROADWAY RD #202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: CONTRIBUTION PROCESS FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/02/2024 Date	\$ 414.71
Expenditure #4 Name GUSTO Address 525 20TH ST SAN FRANCISCO, CA 94107 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2024 Date	\$ 264.00
Expenditure #5 Name NGP VAN Address 1445 NEW YORK AVE NW WASHINGTON, DC 20005 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2024 Date	\$ 350.00

Subtotal this page **2,346.38**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name USPS Address 2632 S ROCHESTER RD ROCHESTER HILLS, MI 48307 ☐ Fund Raiser	Purpose: POSTAGE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2024 Date	\$ 182.00
Expenditure #2 Name CHARLOTTE KRAUSE Address 1640 PARK CREEK COURT ROCHESTER, MI 48309 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 154.17
Expenditure #3 Name COMPLYBLUE LLC Address 120 GRAFTON ST CHEVY CHASE, MD 20815 ☐ Fund Raiser	Purpose: COMPLIANCE CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 2,000.00
Expenditure #4 Name INTERNAL REVENUE SERVICE Address INTERNAL REVENUE SERVICE OGDEN, UT 84401 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 354.66
Expenditure #5 Name MELANIE HARTMAN Address 191 ERIN CASTLE DR ROCHESTER HILLS, MI 48306 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 1,234.09

Subtotal this page **3,924.92**

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MICHIGAN DEPARTMENT OF TREASURY Address P.O. BOX 30774 LANSING, MI 48929 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 61.27
Expenditure #2 Name MICHIGAN UNEMPLOYMENT INSURANCE AGENCY Address PO BOX 169 GRAND RAPIDS, MI 49501 ☐ Fund Raiser	Purpose: TAXES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 0.88
Expenditure #3 Name THE MELLMAN GROUP Address 1010 WISCONSIN AVE NW #540 WASHINGTON, DC 20007 ☐ Fund Raiser	Purpose: RESEARCH ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/2024 Date	\$ 40,100.00
Expenditure #4 Name THE ORIGINAL PRINTE SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/2024 Date	\$ 14,978.00
Expenditure #5 Name CITIZENS BANK Address 23011 WOODWARD AVE FERNDAL, MI 48220 ☐ Fund Raiser	Purpose: BANKING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/2024 Date	\$ 60.00

Subtotal this page **55,200.15**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name HAMBURGER MEDIA GROUP Address 5614 CONNECTICUT AVE NW WASHINGTON, DC 20015 ☐ Fund Raiser	Purpose: MEDIA CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/2024 Date	\$ 24,886.25 Memo Itemization Below
Expenditure #2 Name GREEN & WOOD MEDIA SERVICES Address 2645 BEAVER AVE DES MOINES, IA 50310 ☐ Fund Raiser	Purpose: MEDIA BUY ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/2024 Date	\$ (19,444.00) (Memo Itemization)
Expenditure #3 Name JOSEPH PERSONS Address 25270 WAYCROSS SOUTHFIELD, MI 48033 ☐ Fund Raiser	Purpose: FIELD CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/2024 Date	\$ 300.00
Expenditure #4 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: PROCESSING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2024 Date	\$ 186.02
Expenditure #5 Name HAMBURGER MEDIA GROUP Address 5614 CONNECTICUT AVE NW WASHINGTON, DC 20015 ☐ Fund Raiser	Purpose: MEDIA CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2024 Date	\$ 17,575.00 Memo Itemization Below

Subtotal this page **42,947.27**

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 **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GREEN & WOOD MEDIA SERVICES Address 2645 BEAVER AVE DES MOINES, IA 50310 ☐ Fund Raiser	Purpose: MEDIA BUY (Memo Itemization) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2024 Date	\$ (17,575.00)
Expenditure #2 Name THE ORIGINAL PRINTE SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2024 Date	\$ 755.00
Expenditure #3 Name HERITAGE VISION PLANS Address 30980 WENDBROOK LN BEVERLY HILLS, MI 48025 ☐ Fund Raiser	Purpose: REFUND ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/20/2024 Date	\$ 3,000.00
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page	3,755.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	576,967.35

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 97280
2. Committee Name FRIENDS OF DAVE COULTER

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/13/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 9,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>9,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
Debt #2 Corp? ☐ Yes Owed to or by: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>12/23/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 16,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>16,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/23/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 21,720.00</u>	10/18/20 \$20,000.00 \$ \$ \$ \$	\$ <u>20,000.00</u>	\$ <u>1,720.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				

Page Subtotal (Outstanding debt)

26,720.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 97280
2. Committee Name FRIENDS OF DAVE COULTER

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/26/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 16,700.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>16,700.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/27/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>10,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

26,700.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

53,420.00

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **97280**
2. Committee Name **FRIENDS OF DAVE COULTER**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 10/15/2024	4. Number of Individuals Attending or Participating (whichever is greater) 15	5. Type of Fund Raising Activity RECEPTION	6. Address and Name (If any) of the place where the activity was held. BIRMINGHAM ATHLETIC CLUB 4033 W MAPLE RD BLOOMFIELD HILLS, MI 48301 ☐ Private Residence
---	---	--	--

7. Total Contributions **19,825.00**
8. Other Receipts **0.00**
9. Gross Receipts (Add lines 7 and 8) **19,825.00**
10. Total Cost of Event **450.00**
(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.