



FILED

05 DEC 2024 PM 01:18

OAKLAND COUNTY CLERK
PONTIAC, MICHIGAN

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**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 10/21/2024 to 11/25/2024

1. Committee I.D. Number

97280

2. Committee Name

FRIENDS OF DAVE COULTER

4. Candidate Last Name First Name M.I.

COULTER DAVID

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

COUNTY EXECUTIVE, OAKLAND COUNTY

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

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.

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

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.)

Date of Election, Convention or Caucus

11/05/2024

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

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

Effective date of dissolution

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

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

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

12/05/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

12/05/2024



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>38,305.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>38,305.00</u>	(18.) \$ <u>920,324.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>105.15</u>	(19.) \$ <u>2,375.06</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>38,410.15</u>	(20.) \$ <u>922,699.06</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</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>62,325.84</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>62,325.84</u>	(23.) \$ <u>1,025,987.72</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>0.00</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>83,770.92</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>38,410.15</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>122,181.07</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>62,325.84</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>59,855.23</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>10/21/2024</u>	
Name & Address: WILLIAM ASHER 1003 IRVING AVE ROYAL OAK, MI 48067		\$ <u>100.00</u>	\$ <u>300.00</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 #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/21/2024</u>	
Name & Address: EDWIN BAKER 250 HENLEY ST BIRMINGHAM, MI 48009		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>N/A</u> Employer <u>RETIRED</u> Business Address <u>250 HENLEY ST, BIRMINGHAM, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/21/2024</u>	
Name & Address: TESSA BRITTENHAM 10095 NADINE AVE HUNTINGTON WOODS, MI 48070		\$ <u>5.00</u>	\$ <u>5.00</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>10/21/2024</u>	
Name & Address: MICHAEL DEAN 3544 KENMORE RD BERKLEY, MI 48072		\$ <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 **455.00**

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>10/21/2024</u>	
Name & Address: RAYMOND JOHNSON 5219 BEN FRANKLIN DR LEXINGTON, MI 48450		\$ <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>10/21/2024</u>	
Name & Address: KATHY SKUBIK 2548 SILVERSIDE RD WILMINGTON, DE 19810		\$ <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>10/23/2024</u>	
Name & Address: UAW MICHIGAN VPAC 8000 E JEFFERSON AVE DETROIT, MI 48214		\$ <u>20,000.00</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			
3. Contribution # 4	PAC Receipt? ☒ YES	4. Date of Receipt <u>10/24/2024</u>	
Name & Address: MICHIGAN LCV PAC 340 BEAKES ST ANN ARBOR, MI 48104		\$ <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 20,635.00

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>10/24/2024</u>	
Name & Address: TEAMSTERS LOCAL 299 PAC 2741 TRUMBULL DETROIT, MI 48216		\$ <u>1,000.00</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			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/24/2024</u>	
Name & Address: GARY TORGOW 14661 LUDLOW ST OAK PARK, MI 48237		\$ <u>6,000.00</u>	\$ <u>8,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHAIRMAN</u> Employer <u>TCF BANK</u> Business Address <u>2138 E BIG BEAVER RD, TROY, MI 48083</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/24/2024</u>	
Name & Address: MALKA TORGOW 14661 LUDLOW ST OAK PARK, MI 48237		\$ <u>4,000.00</u>	\$ <u>8,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer <u>N/A</u> Business Address <u>14661 LUDLOW ST, OAK PARK, MI 48237</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/25/2024</u>	
Name & Address: BRIAN CASTERLINE 32366 VALLEY VIEW CIR FARMINGTON HILLS, MI 48336		\$ <u>5.00</u>	\$ <u>265.00</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			

Page Subtotal **11,005.00**

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

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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>10/26/2024</u> Name & Address: RYLEY AUSTYN 135 N OLD WOODWARD AVE BIRMINGHAM, MI 48009 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>RAUSTYN HOLDINGS</u> Business Address <u>135 N OLD WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/26/2024</u> Name & Address: KENNETH ELENICH 23191 FARMINGTON RD FARMINGTON, MI 48336 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/26/2024</u> Name & Address: JENNIFER LLEWELLYN HILLSBORO DR KEMP MILL, MD 20902 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/28/2024</u> Name & Address: NIKIL HEMADY 55044 WOODS LN SHELBY TWP, MI 48316 5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>MCLAREN</u> Business Address <u>461 W HURON ST, PONTIAC, MI 48341</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>

Page Subtotal **1,860.00**

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

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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>10/29/2024</u>	
Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>50.00</u>	\$ <u>500.00</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 #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/31/2024</u>	
Name & Address: JEREMY CRANE 4260 SOUTHMOOR LN WEST BLOOMFIELD, MI 48323		\$ <u>20.00</u>	\$ <u>20.00</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>11/01/2024</u>	
Name & Address: JOHN ALMSTADT 3553 TREMONTE CIR OAKLAND, MI 48306		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>2100 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>11/01/2024</u>	
Name & Address: SHAUNA VERCHER-MORROW 19165 STRATHCONA DR DETROIT, MI 48203		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SPECIAL EVENTS</u> Employer <u>AUTOMOTIVE NEWS</u> Business Address <u>1155 GRATIOT AVE, DETROIT, MI 48207</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 2,070.00

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>11/01/2024</u> Name & Address: CARLITO YOUNG 391 N GLENHURST DR BLOOMFIELD VILLAGE, MI 48301		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ROSATI SCHULTZ</u> Business Address <u>27555 EXECUTIVE DR, FARMINGTON HILLS, MI 48331</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>11/02/2024</u> Name & Address: NAT PERNICK 30150 TELEGRAPH RD SUITE 119 BINGHAM FARMS, MI 48025		\$ <u>100.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>PATHOLOGY OUTLINES</u> Business Address <u>30150 TELEGRAPH RD, SUITE 119, BINGHAM FARMS, MI 48025</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>11/02/2024</u> Name & Address: SHELLEY ROSE 4749 PARKRIDGE DR WATERFORD, MI 48329		\$ <u>25.00</u>	\$ <u>60.00</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>11/02/2024</u> Name & Address: MIKE WILSON 319 W 18TH ST NEW YORK, NY 10011		\$ <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 **1,175.00**

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>11/04/2024</u> Name & Address: MATTHEW WOODFORD 24866 RENSSELAER ST OAK PARK, MI 48237		\$ <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>11/11/2024</u> Name & Address: KENT SHARKEY 945 N LAKE ANGELUS RD LAKE ANGELUS, MI 48326		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MENTAL HEALTH</u> Employer <u>ULLIANCE</u> Business Address <u>945 N LAKE ANGELUS RD, LAKE ANGELUS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>11/25/2024</u> Name & Address: BRIAN CASTERLINE 32366 VALLEY VIEW CIR FARMINGTON HILLS, MI 48336		\$ <u>5.00</u>	\$ <u>270.00</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 # 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 **1,105.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **38,305.00**

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 WOODWARD AVE MT VERNON, VA 22309	Date of Receipt 10/30/2024	☐ Loan from a Lending Institution ☒ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ 94.43
	☐ Fund Raiser		
Receipt #2 Name & Address: CITIZENS BANK WOODWARD AVE MT VERNON, VA 22309	Date of Receipt 11/25/2024	☐ Loan from a Lending Institution ☒ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ 10.72
	☐ 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			105.15
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			105.15

Enter this total on
line 4 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 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	10/22/2024 Date	\$ 2,502.00
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: CONTRIBUTION PROCESSING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/31/2024 Date	\$ 2.92
Expenditure #3 Name MI 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	10/31/2024 Date	\$ 0.38
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	10/31/2024 Date	\$ 69.98
Expenditure #5 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	10/31/2024 Date	\$ 387.25

Subtotal this page **2,962.53**

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 CHARLOTTE KRAUSE Address 1640 PARK CREEK CT ROCHESTER HILLS, MI 48309 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/31/2024 Date	\$ 334.78
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	10/31/2024 Date	\$ 1,341.04
Expenditure #3 Name NICK SAHU Address 835 RAVINE TERRACE DR ROCHESTER HILLS, MI 48307 ☐ Fund Raiser	Purpose: TECH CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/01/2024 Date	\$ 120.00
Expenditure #4 Name OAKLAND COUNTY DEMOCRATIC PARTY Address 555 HORACE BROWN DR MADISON HEIGHTS, MI 48071 ☐ Fund Raiser	Purpose: CONTRIBUTION ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/01/2024 Date	\$ 1,500.00
Expenditure #5 Name PARAGON SOLUTIONS Address 2141 E BROADWAY RD #202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: CONTRIBUTION PROCESSING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/04/2024 Date	\$ 1,009.03

Subtotal this page

4,304.85

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 **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 NGPVAN 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	11/04/2024 Date	\$ 350.00
Expenditure #2 Name GUSTO Address 525 20TH ST SF, CA 94107 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/05/2024 Date	\$ 64.00
Expenditure #3 Name DAVID COULTER Address 555 LEROY ST FERNDAL, MI 48220 ☐ Fund Raiser	Purpose: LOAN PAYMENT ☒ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/09/2024 Date	\$ 53,420.00
Expenditure #4 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	11/14/2024 Date	\$ 715.13
Expenditure #5 Name CHARLOTTE KRAUSE Address 1640 PARK CREEK CT ROCHESTER HILLS, MI 48309 ☐ Fund Raiser	Purpose: WAGES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/14/2024 Date	\$ 198.23

Subtotal this page **54,747.36**

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 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	11/14/2024 Date	\$ 183.66
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	11/14/2024 Date	\$ 34.71
Expenditure #3 Name MI 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	11/14/2024 Date	\$ 0.23
Expenditure #4 Name VIVIANO FLOWERS Address 308 S MAIN ST ROCHESTER, MI 48307 ☐ Fund Raiser	Purpose: GIFT ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/15/2024 Date	\$ 92.50
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **311.10**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **62,325.84**

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>	11/09/24 \$ 9,000.00 \$ \$ \$ \$	\$ 9,000.00	\$ 0.00 ☐ 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>	11/09/24 \$ 16,000.00 \$ \$ \$ \$	\$ 16,000.00	\$ 0.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
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 11/09/24 \$ 1,720.00 \$ \$ \$	\$ 21,720.00	\$ 0.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				

Page Subtotal (Outstanding debt)

0.00

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>	11/09/24 \$ 16,700.00 _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ 16,700.00	\$ <u>0.00</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>08/27/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10,000.00</u>	11/09/24 \$ 10,000.00 _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ 10,000.00	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
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)

0.00

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

0.00

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.