



FILED

24 OCT 2024 AM 09:24

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: 05/24/2018 to 10/20/2024

1. Committee I.D. Number

96991

2. Committee Name

COMMITTEE TO ELECT BARBARA ANNESS

4. Candidate Last Name First Name M.I.

ANNESS BARBARA A

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

BOARD MEMBER, ROCHESTER SD

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

5. Committee's Mailing Address

**3128 WALTON BLVD., #233
ROCHESTER HILLS, MI 48309**

Area Code and Phone (248) 892-2416
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 DILAURA
6350 CHERRY TREE CT
ROCHESTER HILLS, MI 48306**

Area Code & Phone (313) 952-0084

7. Treasurer's Business Address

**6350 CHERRY TREE CT
ROCHESTER HILLS, MI 48306**

Area Code and Phone (313) 952-0084

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

10/24/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/24/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 96991

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>20,103.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>20,103.00</u>	(18.) \$ <u>20,103.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>20,103.00</u>	(20.) \$ <u>20,103.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,177.80</u>	(21.) \$ <u>1,177.80</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>9,525.60</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>9,525.60</u>	(23.) \$ <u>9,525.60</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>0.00</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>0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>20,103.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>20,103.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>9,525.60</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>10,577.40</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>03/01/2024</u>	
Name & Address: BARBARA ANNESS 2769 BRAEBURN DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2769 BRAEBURN DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/19/2024</u>	
Name & Address: DANIEL LAWSON 1631 STONEY BROOK DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>OAKLAND COMMUNITY COLLEGE</u> Business Address <u>2900 FEATHERSTONE RD, 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>03/20/2024</u>	
Name & Address: PATRICIA A BERRES 786 LAKE FOREST RD ROCHESTER HILLS, MI 48309		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>786 LAKE FOREST RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/20/2024</u>	
Name & Address: JANE KELLEY 1918 LONE PINE RD BLOOMFIELD TWP, MI 48302		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1918 LONE PINE RD, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 210.00

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 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>03/20/2024</u>	
Name & Address: JANE KELLEY 1918 LONE PINE RD BLOOMFIELD TWP, MI 48302		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1918 LONE PINE RD, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/20/2024</u>	
Name & Address: KARYN KOZO 2750 BRAEBURN DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADVERTISING</u> Employer <u>REGROUP</u> Business Address <u>213 W LIBERTY ST, ANN ARBOR, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/20/2024</u>	
Name & Address: MICHAEL DAVISSON 2004 HYLAND ST FERNDAL, MI 48220		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL WORKER</u> Employer <u>NEIGHBORHOOD DEFENDER SERVICE OF DETROIT</u> Business Address <u>1333 BREWERY PARK BLVD, #350, DETROIT, MI 48207</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/20/2024</u>	
Name & Address: DAVID HARTMAN 1227 GREEN RIDGE RD ROCHESTER HILLS, MI 48309		\$ <u>500.00</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>1227 GREEN RIDGE RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **675.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>03/20/2024</u> Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/20/2024</u> Name & Address: NEIL OZA 259 GROSSE PINES DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>259 GROSSE PINES DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/20/2024</u> Name & Address: SHADIA MARTINI 1717 HERON RIDGE DR BLOOMFIELD TWP, MI 48302		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE BROKER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1717 HERON RIDGE DR, 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>03/21/2024</u> Name & Address: CASANDRA ULBRICH 217 FORT DEARBORN ST DEARBORN, MI 48124		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE CHANCELLOR</u> Employer <u>UNIVERSITY OF MICHIGAN</u> Business Address <u>500 S STATE ST, ANN ARBOR, MI 48109</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **150.00**

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/21/2024</u>	
Name & Address: HEATHER STARKS 10309 BLAISDELL AVE S BLOOMINGTON, MN 55420		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPMENT SPECIALIST</u> Employer <u>HIGH TECH KIDS</u> Business Address <u>3370 COACHMAN RD, SUITE D, EAGAN, MN 55121</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/24/2024</u>	
Name & Address: LORI JANDES 1199 BUGLE BLUFF CT LEBANON, OH 45036		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>HCESC</u> Business Address <u>11083 HAMILTON AVE, CINCINNATI, OH 45231</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/24/2024</u>	
Name & Address: LAURA MURPHY 323 GRIGGS ST ROCHESTER, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>323 GRIGGS ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>03/26/2024</u>	
Name & Address: LISA RUSSELL 3327 CONNORS DR ROCHESTER HILLS, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHILD CARE</u> Employer <u>SELF EMPLOYED</u> Business Address <u>3327 CONNORS DR, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 250.00

Grand Total of All Schedules 1A
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/30/2024</u> Name & Address: BARBARA BARNES 1845 N LIVERNOIS RD ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1845 N LIVERNOIS RD, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/30/2024</u> Name & Address: MICHAEL A DECLERCQ 2828 PLYMOUTH DR SHELBY TWP, MI 48316		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR OF STRATEGIC INITIATIVES</u> Employer <u>SECOND NATURE BRANDS</u> Business Address <u>1200 E 14 MILE RD, MADISON HEIGHTS, MI 48071</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/01/2024</u> Name & Address: JOSEPH C BERNERT 5125 SHADY CREEK DR TROY, MI 48085		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRADUATE RESEARCH ASSISTANT</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK RD, ROCHESTER, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/12/2024</u> Name & Address: NINA ABRAMS 12959 TALBOT LN HUNTINGTON WOODS, MI 48070		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>12959 TALBOT LN, HUNTINGTON WOODS, MI 48070</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 770.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/13/2024</u> Name & Address: BARBARA ROLLER 3566 CHARLWOOD DR ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3566 CHARLWOOD DR, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/19/2024</u> Name & Address: LUKE BEACH 688 WOODFIELD WAY ROCHESTER HILLS, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>ROCHESTER CHRISTIAN UNIVERSITY</u> Business Address <u>800 W AVON RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: ELISE FAUROTE 898 NORTHGATE RD ROCHESTER HILLS, MI 48306		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ARTIST</u> Employer <u>SELF EMPLOYED</u> Business Address <u>898 NORTHGATE RD, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: JUDY ROSE 3070 LIMESTONE CIR CINCINNATI, OH 45239		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3070 LIMESTONE CIR, CINCINNATI, OH 45239</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 350.00

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

1. Committee I.D. Number 96991
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: BRUCE FEALK 1474 OAKSTONE DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1474 OAKSTONE DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: SAMANTHA PHILLIPS 3545 STRATHCONA DR ROCHESTER HILLS, MI 48309		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REALTOR</u> Employer <u>SELF EMPLOYED</u> Business Address <u>3545 STRATHCONA DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: CARRIE LAWLER 885 E GUNN RD ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>885 E GUNN RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/27/2024</u> Name & Address: DAVID COULTER 555 LEROY ST FERNDAL, MI 48220		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OAKLAND COUNTY EXECUTIVE</u> Employer <u>OAKLAND COUNTY MICHIGAN</u> Business Address <u>2100 PONTIAC LAKE RD, WATERFORD TWP, MI 48328</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 450.00

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

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Page.



**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>04/28/2024</u> Name & Address: LORI BRAUER 19011 NORWICH RD LIVONIA, MI 48152		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF EMPLOYED</u> Business Address <u>19001 NORWICH RD, LIVONIA, MI 48152</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/28/2024</u> Name & Address: ANGELLA REGER 1008 E 3RD ST ROYAL OAK, MI 48067		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1008 E 3RD ST, ROYAL OAK, MI 48067</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/28/2024</u> Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/28/2024</u> Name & Address: KEVIN BULL 720 SUNLIGHT DR ROCHESTER HILLS, MI 48309		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESATE</u> Employer <u>SELF EMPLOYED</u> Business Address <u>720 SUNLIGHT DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **450.00**

Grand Total of All Schedules 1A
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Enter this total on
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>04/29/2024</u> Name & Address: JENNIFER BERWICK 856 BAYLOR RD ROCHESTER HILLS, MI 48309		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VP OPERATIONS</u> Employer <u>BXB MEDIA</u> Business Address <u>6841 N ROCHESTER RD, SUITE 2A, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/01/2024</u> Name & Address: JENNIFER THOR 274 BELLE VERNON CT ROCHESTER HILLS, MI 48309		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACADEMIC</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK RD, ROCHESTER, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/01/2024</u> Name & Address: PATRICIA ALONZO 10203 EVERGREEN HILL DR TAMPA, FL 33647		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STUDENT</u> Employer <u>NSU</u> Business Address <u>10203 EVERGREEN HILL DR, TAMPA, FL 33647</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/12/2024</u> Name & Address: WENDY BEITEL 5235 WILBY ST SHELBY TWP, MI 48317		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>5235 WILBY ST, SHELBY TWP, MI 48317</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **475.00**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>05/12/2024</u>	
Name & Address: KAREN REVENBAUGH 3159 CASTLETON CT ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARAEDCATOR</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/14/2024</u>	
Name & Address: TERESA CRIPSEY 668 E BUELL RD ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer _____ Business Address <u>668 E BUELL RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/15/2024</u>	
Name & Address: SONIA MILTON 779 DARTMOUTH DR ROCHESTER HILLS, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>779 DARTMOUTH DR, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/18/2024</u>	
Name & Address: LAURIE ARGEROS 1269 LARK ST ORION TWP, MI 48360		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REALTOR</u> Employer <u>BHK</u> Business Address <u>1269 LARK ST, ORION TWP, MI 48360</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 225.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/18/2024</u>	
Name & Address: CAROLYN CLAERHOUT 54 STONETREE CIR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>54 STONETREE CIR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/20/2024</u>	
Name & Address: VIRGINIA ANNESS 895 MC KELVEY RD CINCINNATI, OH 45231		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>895 MC KELVEY RD, CINCINNATI, OH 45231</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/24/2024</u>	
Name & Address: NICHOLAS SAHU 835 RAVINE TERRACE DR ROCHESTER HILLS, MI 48307		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTACTS SPECIALIST</u> Employer <u>CARAHSOFT TECHNOLOGY CORP.</u> Business Address <u>11493 SUNSET HILLS RD, SUITE 100, RESTON, VA 20190</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/30/2024</u>	
Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **360.00**

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

1. Committee I.D. Number 96991
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/01/2024</u> Name & Address: GINGER KETELSEN 1361 AXFORD PL ROCHESTER HILLS, MI 48307		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1361 AXFORD PL, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/01/2024</u> Name & Address: CHRISTOPHER HENNESSEY 1237 HATHAWAY RISING ROCHESTER HILLS, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CIVIL ENGINEER</u> Employer <u>F&V ENGINEERING</u> Business Address <u>27725 STANSBURY ST, FARMINGTON HILLS, MI 48334</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/12/2024</u> Name & Address: TIMOTHY GREIMEL 151 LAFAYETTE ST #102 PONTIAC, MI 48342		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MAYOR</u> Employer <u>CITY OF PONTIAC</u> Business Address <u>47450 WOODWARD AVE, PONTIAC, MI 48342</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/13/2024</u> Name & Address: JOANNA RAAPHORST 5900 SOUTHGATE RD ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>5900 SOUTHGATE RD, ROCHESTER, MI 48306</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)

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>06/19/2024</u> Name & Address: JOHN STAMEY 1206 CLOPTON BRIDGE DR ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1206 CLOPTON BRIDGE DR, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/20/2024</u> Name & Address: NICK SZYMBORSKI 1198 GREENLEAF DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1198 GREENLEAF DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/21/2024</u> Name & Address: MARY BRANSTNER 3474 WOODS DRIVE TRAVERSE CITY, MI 49686		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3474 WOODS DRIVE, TRAVERSE CITY, MI 49686</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/24/2024</u> Name & Address: VALORI NICOLAI 3456 YORK RD ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3456 YORK RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 250.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>06/24/2024</u> Name & Address: KELLY BERARD 1698 WESTRIDGE DR ROCHESTER HILLS, MI 48306		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DRSN ASSOCIATES</u> Business Address <u>31000 TELEGRAPH RD, SUITE 230, FRANKLIN, MI 48025</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/24/2024</u> Name & Address: LISA WATTAI 3413 ROCKY CREST DR ROCHESTER HILLS, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUBSTITUTE TEACHER</u> Employer <u>EDUSTAFF</u> Business Address <u>4120 BROCKTON DR SE, SUITE 200, GRAND RAPIDS, MI 49512</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/24/2024</u> Name & Address: MELANIE HARTMAN 191 ERIN CASTLE DR ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CAMPAIGN COORDINATOR</u> Employer <u>FRIENDS OF DAVE COULTER</u> Business Address <u>P.O. BOX 201703, 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>06/24/2024</u> Name & Address: WILLIAM PERRY 2843 DEARBORN AVE ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2843 DEARBORN AVE, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 500.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>06/25/2024</u>	
Name & Address: SUSAN PERKINS 3500 OAKMONTE BLVD ROCHESTER, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3500 OAKMONTE BLVD, 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>06/28/2024</u>	
Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/29/2024</u>	
Name & Address: IRINA ZAVATSKI 517 SUNLIGHT DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DESIGN</u> Employer <u>STELLANTIS</u> Business Address <u>1000 CHRYSLER DR, 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>06/29/2024</u>	
Name & Address: ASHLEY TJHUNG 3729 BRIARBROOKE LN OAKLAND TWP, MI 48306		\$ <u>57.00</u>	\$ <u>57.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR POLICY ANALYST</u> Employer <u>DEMOS</u> Business Address <u>309 BALTIC ST, CARROLL GARDENS, NY 11201</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **117.00**

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

1. Committee I.D. Number 96991
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/29/2024</u> Name & Address: BRET HOAG 2165 AVONCREST DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK RD, 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>07/02/2024</u> Name & Address: SHARON PIZZUTI 1995 RAINBOW DR ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>COURTLAND CONSULTING</u> Business Address <u>1500 WATERTOWER PL, STE. 200, EAST LANSING, MI 48823</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/02/2024</u> Name & Address: JENNIFER LAGERBOHM 603 TIMBERLINE DR ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENVIRONMENTAL</u> Employer <u>MCDOWELL & ASSOCIATES</u> Business Address <u>21355 HATCHER AVE, FERNDALE, MI 48220</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/02/2024</u> Name & Address: HOWARD BARON 1365 JUNIPER LN BLOOMFIELD TWP, MI 48302		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1355 JUNIPER LN, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **310.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/02/2024</u> Name & Address: MATTHEW BARKLEY 2403 CULBERTSON AVE ROCHESTER HILLS, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2403 CULBERTSON AVE, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/04/2024</u> Name & Address: RAVI YALAMANCHI 2042 HICKORY TRAIL DR ROCHESTER HILLS, MI 48309		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>INFIN, INC.</u> Business Address <u>2042 HICKORY TRAIL DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/09/2024</u> Name & Address: STEVE REINA 162 STRATFORD LN ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>REINA LAW OFFICE</u> Business Address <u>6696 DIXIE HWY, VILLAGE OF CLARKSTON, MI 48346</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/09/2024</u> Name & Address: SKYE THIETTEN 2248 CHIPPENHAM CHASE ROCHESTER HILLS, MI 48306		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>SKYE THIETTEN</u> Business Address <u>2248 CHIPPENHAM CHASE, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **660.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/11/2024</u> Name & Address: BARBARA CENKO 4100 CALUMET DR OAKLAND TWP, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>4100 CALUMET DR, OAKLAND TWP, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/12/2024</u> Name & Address: JAMES PARKER 2750 BRAEBURN DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHOTOGRAPHER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2750 BRAEBURN DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/13/2024</u> Name & Address: ELIZABETH M FIDLER 932 DRIFTWOOD AVE ROCHESTER HILLS, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>932 DRIFTWOOD AVE, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/16/2024</u> Name & Address: PATRICIA A BERRES 786 LAKE FOREST RD ROCHESTER HILLS, MI 48309		\$ <u>40.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>786 LAKE FOREST RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 265.00

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/18/2024</u> Name & Address: HOLLY HARAN 1002 CEDAR HILL DR ROYAL OAK, MI 48067		\$ <u>65.00</u>	\$ <u>65.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1002 CEDAR HILL DR, ROYAL OAK, MI 48067</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/18/2024</u> Name & Address: TERESA CRIPSEY 668 E BUELL RD ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>668 E BUELL RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/18/2024</u> Name & Address: JEANNETTE HOWES 445 ROCHDALE DR N ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARALEGAL</u> Employer <u>BOWMAN AND BROOKE LLP</u> Business Address <u>101 W BIG BEAVER RD, SUITE 1100, TROY, MI 48084</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/18/2024</u> Name & Address: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1981 ANSAL DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 275.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/18/2024</u>	
Name & Address: ELIZABETH LORIA 3039 ROLLING GREEN CIR S ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3039 ROLLING GREEN CIR S, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/19/2024</u>	
Name & Address: REBECCA NIRGROVE 600 SPARTAN DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>SGD AMERICA LLC</u> Business Address <u>600 SPARTAN DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/19/2024</u>	
Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3398 ROSEGLADE, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/21/2024</u>	
Name & Address: CHRISTINE GILL 232 CLAIR HILL DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SCHOOL COUNSELOR</u> Employer <u>OXFORD MIDDLE SCHOOL</u> Business Address <u>1420 LAKEVILLE RD, OXFORD, MI 48371</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **175.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/26/2024</u> Name & Address: DEVON STEABAN 39 AVONWOOD BLVD ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BOOK KEEPER</u> Employer <u>KIDDIE KLUB</u> Business Address <u>1812 S ROCHESTER RD, # 102, OAKLAND TWP, MI 48363</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/27/2024</u> Name & Address: NICOLE BREADON 9881 MARMORA CLARKSTON VLG, MI 48348		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ORGANIZER</u> Employer <u>RED WINE & BLUE</u> Business Address <u>9881 MARMORA, CLARKSTON VLG, MI 48348</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/28/2024</u> Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>130.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/28/2024</u> Name & Address: GABRIELLE LEININGER 301 S CASTELL AVE ROCHESTER, MI 48307		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>301 S CASTELL AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **145.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/29/2024</u> Name & Address: KATIE WOOLSEY 290 CROSS CREEK BLVD ROCHESTER HILLS, MI 48306		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/29/2024</u> Name & Address: ANDREA WRIGHT 4480 SHELDON RD ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>4480 SHELDON RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/29/2024</u> Name & Address: CAROLYN HOULE 3681 DEER SPRINGS DR ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3681 DEER SPRINGS DR, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/2024</u> Name & Address: CYNDI PELTONEN 318 BROADACRE AVE CLAWSON, MI 48017		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>318 BROADACRE AVE, CLAWSON, MI 48017</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 120.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/30/2024</u> Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>200.00</u>	\$ <u>200.00</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>07/31/2024</u> Name & Address: BARBARA PACELLA 2997 RHINEBERRY RD ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>ST. ANDREW CATHOLIC CHURCH</u> Business Address <u>1400 INGLEWOOD AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/31/2024</u> Name & Address: NIGHAT TAQBEEM 2340 BELLA MAGNOLIA CT ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2340 BELLA MAGNOLIA CT, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/31/2024</u> Name & Address: MARIA MICELLI 92 BREWSTER RD ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>92 BREWSTER RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 500.00

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>07/31/2024</u> Name & Address: BARBRA RILL 1733 APPLE RIDGE CT ROCHESTER HILLS, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1733 APPLE RIDGE CT, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/31/2024</u> Name & Address: JANE TAYLOR 3908 HILLSDALE DR AUBURN HILLS, MI 48326		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3908 HILLSDALE DR, 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>07/31/2024</u> Name & Address: GREG FOX 6336 BELLEVILLE PIKE COLUMBUS, IN 47201		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>6336 BELLEVILLE PIKE, COLUMBUS, IN 47201</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/01/2024</u> Name & Address: ELYSE HATHAWAY 1610 E GUNN RD ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DATABASE ADMINISTRATOR</u> Employer <u>DP WORLD</u> Business Address <u>2851 HIGH MEADOW CIR, AUBURN HILLS, MI 48326</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **450.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/01/2024</u> Name & Address: ELIZABETH SOBCZAK 1993 CEDAREGE RD ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATION</u> Employer <u>ST. ANDREW CATHOLIC CHURCH</u> Business Address <u>1400 INGLEWOOD AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/02/2024</u> Name & Address: JULIE FRONTERA 3607 CEDAR SHAKE DR #103 ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ARTIST</u> Employer <u>SELF EMPLOYED</u> Business Address <u>3607 CEDAR SHAKE DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/02/2024</u> Name & Address: KIERSTEN OLSEN-YESH 485 GRACE AVE ROCHESTER HILLS, MI 48307		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/02/2024</u> Name & Address: MARY PRICE 111 E MARYKNOLL RD ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>111 E MARYKNOLL RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **170.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/02/2024</u>	
Name & Address: MARILYN TRENT 624 W UNIVERSITY DR ROCHESTER, MI 48307		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGNER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>114 E 2ND ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/02/2024</u>	
Name & Address: DEANNA PROST 336 E HURST ST TROY, MI 48085		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETAIL</u> Employer <u>GIVE THANKS BAKERY</u> Business Address <u>225 S MAIN ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/04/2024</u>	
Name & Address: HARPER WEST 155 ARIZONA AVE ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PSYCHOLOGIST</u> Employer <u>HARPER WEST, PC</u> Business Address <u>155 ARIZONA AVE, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/06/2024</u>	
Name & Address: CRAIG RIZZI 172 AMYS WALK AUBURN HILLS, MI 48326		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **475.00**

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/06/2024</u>	
Name & Address: JILL GREIMEL 5719 LOST LN ROCHESTER, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>5719 LOST LN, 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>08/07/2024</u>	
Name & Address: LEIGH R FOX BAYARD DR CINCINNATI, OH 45208		\$ <u>2,450.00</u>	\$ <u>2,450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>ALTAFIBER</u> Business Address <u>221 E 4TH ST, CINCINNATI, OH 45202</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2024</u>	
Name & Address: JULIA K FOX 3580 BAYARD DR CINCINNATI, OH 45208		\$ <u>2,450.00</u>	\$ <u>2,450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3580 BAYARD DR, CINCINNATI, OH 45208</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/08/2024</u>	
Name & Address: COURTNEY LEEMON 1069 SPRINGWOOD LN ROCHESTER HILLS, MI 48309		\$ <u>15.00</u>	\$ <u>15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRANT PROGRAM SPECIALIST</u> Employer <u>LEARNING CARE GROUP</u> Business Address <u>21333 HAGGERTY RD, STE 300, NOVI, MI 48375</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **5,015.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/08/2024</u> Name & Address: BARBARA ROLLER 3566 CHARLWOOD DR ROCHESTER HILLS, MI 48306		\$ <u>15.00</u>	\$ <u>65.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3566 CHARLWOOD DR, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/09/2024</u> Name & Address: KRISTINE RIDGWAY 769 MILLER AVE ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>769 MILLER AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/11/2024</u> Name & Address: JENNIFER NOWACZOK-MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MEA</u> Business Address <u>1350 KENDALE BLVD, EAST LANSING, MI 48823</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/13/2024</u> Name & Address: JENI HESTER 602 WELLINGTON CIR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AI AUDIO PRODUCER</u> Employer <u>JENI HESTER</u> Business Address <u>602 WELLINGTON CIR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 240.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/17/2024</u> Name & Address: KRISTINE RIDGWAY 769 MILLER AVE ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>769 MILLER AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/18/2024</u> Name & Address: EMILY STOW 3954 CATALPA CT OAKLAND TWP, MI 48363		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>82585 DEQUINDRE RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/18/2024</u> Name & Address: DEBBORAH CONNERY 2930 HARRINGTON RD ROCHESTER HILLS, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2930 HARRINGTON RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/18/2024</u> Name & Address: ELLEN STAPERFENNE 1081 BLOOMVIEW CIR ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1081 BLOOMVIEW CIR, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 125.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/20/2024</u> Name & Address: JULI OWCZAREK 3547 HOGAN CIR ROCHESTER, MI 48307		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>EXELIXIS INC</u> Business Address <u>1851 HARBOR BAY PKWY, ALAMEDA, CA 94502</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/20/2024</u> Name & Address: JAIME LINDSTROM 3702 HOGAN CIR ROCHESTER, MI 48307		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>TROY SCHOOLS</u> Business Address <u>4400 LIVERNOIS RD, TROY, MI 48098</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/20/2024</u> Name & Address: EMILY SOMMER 751 ALLSTON DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER EDUCATOR</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>201 MEADOW BROOK 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>08/21/2024</u> Name & Address: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>86.88</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1981 ANSAL DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **185.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/21/2024</u>	
Name & Address: TIM O HARA 1466 CHEVY CIRCUIT ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1466 CHEVY CIRCUIT, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: STEPHANIE DROZDALSKI 329 HIEL ST ROCHESTER, MI 48307		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANUFACTURING TECHNICIAN</u> Employer <u>FORD MOTOR COMPANY</u> Business Address <u>41111 VAN DYKE AVE, STERLING HEIGHTS, MI 48314</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/24/2024</u>	
Name & Address: RHONDA HESCHEL 5010 OVERBROOK PL COLORADO SPRINGS, CO 80919		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PEDIATRIC NP</u> Employer <u>OPTUM PRIMARY CARE AND SPECIALTY CARE</u> Business Address <u>2405 RESEARCH PKWY, COLORADO SPRINGS, CO 80920</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/27/2024</u>	
Name & Address: CANDY HARRIS 3457 INNSBROOK DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REALTOR</u> Employer <u>REAL ESTATE ONE</u> Business Address <u>1102 N MAIN ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 250.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>140.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> 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: JILL HARTWIG 483 BEDLINGTON DR ROCHESTER HILLS, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>483 BEDLINGTON DR, ROCHESTER HILLS, MI 48307</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: ROCHESTER AREA DEMOCRATIC CLUB PAC P.O. BOX 80277 ROCHESTER, MI 48308		\$ <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			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/30/2024</u>	
Name & Address: JARROD D???VALENTINE 88 E MARYKNOLL RD ROCHESTER HILLS, MI 48309		\$ <u>5.00</u>	\$ <u>5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EPIDEMIOLOGIST</u> Employer <u>OAKLAND COUNTY HEALTH</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **565.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>08/30/2024</u> Name & Address: JOHN MCCOY 17008 NE 35TH ST BELLEVUE, WA 98008		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>17008 NE 35TH ST, BELLEVUE, WA 98008</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/31/2024</u> Name & Address: JENNIFER THOR 274 BELLE VERNON CT ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACADEMIC</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK RD, ROCHESTER, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/02/2024</u> Name & Address: MARILYN TRENT 624 W UNIVERSITY DR ROCHESTER, MI 48307		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGNER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>114 E 2ND ST, ROCHESTER, MI 48307</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: ANDREA KATICH 3795 ELK DR ROCHESTER, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3795 ELK DR, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 350.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: CATHERINE BRENNAN 3687 CEDAR SHAKE DR ROCHESTER HILLS, MI 48309		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK RD, 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>09/04/2024</u> Name & Address: SCOTT RADABAUGH 2664 TOWER HILL LN ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2664 TOWER HILL LN, ROCHESTER HILLS, MI 48306</u> 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: JOSEPH WERNER 326 HUNTLEY AVE CHARLOTTESVILLE, VA 22903		\$ <u>5.00</u>	\$ <u>5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>PAI CONSULTING</u> Business Address <u>1005 1ST ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/05/2024</u> Name & Address: LEADERSHIP FOR DEMOCRACY FUND 2042 HICKORY TRAIL DR ROCHESTER HILLS, MI 48309		\$ <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			

Page Subtotal 430.00

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

1. Committee I.D. Number 96991
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/05/2024</u> Name & Address: DAVID DILAURA 6350 CHERRY TREE CT ROCHESTER HILLS, MI 48306		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>6350 CHERRY TREE CT, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/07/2024</u> Name & Address: MELISSA GRAY 708 SPARTAN DR ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>OXFORD COMMUNITY SCHOOLS</u> Business Address <u>10 N WASHINGTON ST, OXFORD, MI 48371</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/2024</u> Name & Address: JAMIE SERRA 341 W MARYKNOLL RD ROCHESTER HILLS, MI 48309		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AUTOWORKER/TRIM SHOP TEAM LEADER</u> Employer <u>GENERAL MOTORS FLINT ASSEMBLY</u> Business Address <u>3100 VAN SLYKE RD, FLINT, MI 48507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/2024</u> Name & Address: JENNIFER SICORRA 799 COBBLESTONE DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>799 COBBLESTONE DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 255.00

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/08/2024</u> Name & Address: MONICA GROGAN 535 MISTY BROOK LN ROCHESTER HILLS, MI 48307		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>535 MISTY BROOK LN, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/09/2024</u> Name & Address: JOE DICRESCE 2712 MURFIELD CT ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INSRUANCE</u> Employer <u>MARSH MCLENNAN</u> Business Address <u>755 W BIG BEAVER RD, TROY, MI 48084</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/2024</u> Name & Address: CHERI MCENEANEY 923 FAIRVIEW AVE ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>923 FAIRVIEW AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/11/2024</u> Name & Address: JOHN BRABBS 523 ELIZABETH ST ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMPUTER ENGINEER</u> Employer <u>US ARMY GVSC</u> Business Address <u>6501 E ELEVEN MILE RD, WARREN, MI 48091</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: KRISTIN CHRIST 1692 MAPLE CREEK CT ROCHESTER, MI 48306		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BANK TRUST OFFICER</u> Employer <u>J.P. MORGAN PRIVATE BANK</u> Business Address <u>80 PIERCE ST, SUITE 250, BIRMINGHAM, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/12/2024</u>	
Name & Address: JAMES VARTY 1688 MAPLE CREEK CT ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1688 MAPLE CREEK CT, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/14/2024</u>	
Name & Address: CYNTHIA CARVER 2942 HILLENDALE DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>OAKLAND UNIVERSITY</u> Business Address <u>318 MEADOW BROOK 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>09/15/2024</u>	
Name & Address: CHRIS RZEPPA 2475 RANCROFT BEAT ROCHESTER HILLS, MI 48306		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>PROGRESSIVE INSURANCE</u> Business Address <u>340 E BIG BEAVER RD, TROY, MI 48083</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 230.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/15/2024</u> Name & Address: LINDSAY WOODBERG 3027 BURLINGTON CT ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/15/2024</u> Name & Address: CARRIE BROWN 1620 DEVONWOOD DR ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SAFETY MANAGERR</u> Employer <u>GENERAL MOTORS</u> Business Address <u>100 RENAISSANCE CENTER, DETROIT, MI 48243</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2024</u> Name & Address: KATHERINE NITZ 1336 TRANQUILITY CT ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WRITER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1336 TRANQUILITY CT, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2024</u> Name & Address: ERIC GRIMMINGER 1936 CLEAR POINT CT ROCHESTER HILLS, MI 48306		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>GENERAL MOTORS</u> Business Address <u>100 RENAISSANCE CENTER, DETROIT, MI 48243</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **85.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/19/2024</u> Name & Address: CONNIE DOWE 1065 POINTE PL BLVD ROCHESTER, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1065 POINTE PL BLVD, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/19/2024</u> Name & Address: JOHN DOWE 1065 POINTE PL BLVD ROCHESTER, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1065 POINTE PL BLVD, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/19/2024</u> Name & Address: FRIENDS OF BRENDAN JOHNSON P.O. BOX 81662 ROCHESTER, MI 48308		\$ <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>09/20/2024</u> Name & Address: CAROL BROWN 1815 CLOVERDALE DR ROCHESTER, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>GENERAL MOTORS</u> Business Address <u>6350 HARLEY EARL BLVD, WARREN, MI 48092</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 250.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/24/2024</u>	
Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>100.00</u>	\$ <u>300.00</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>09/24/2024</u>	
Name & Address: MONICA DUPONT 1710 RAPIDS WAY ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FINANCE MANAGER</u> Employer <u>TRINITY HEALTH</u> Business Address <u>VICTOR PKWY, LIVONIA, MI 48152</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/24/2024</u>	
Name & Address: JEFF HUGHES 3495 LONGVIEW AVE ROCHESTER HILLS, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>BRANDON SCHOOL DISTRICT</u> Business Address <u>1025 S ORTONVILLE RD, BRANDON TWP, MI 48462</u> 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: NANCY DREYER 6495 APPLE ORCHARD LN ROCHESTER HILLS, MI 48306		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED TEACHER</u> Employer <u>NOT EMPLOYED</u> Business Address <u>6495 APPLE ORCHARD LN, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **195.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/24/2024</u>	
Name & Address: NANCY CRAFT 2120 ST ANDREWS DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2120 ST ANDREWS DR, ROCHESTER HILLS, MI 48309</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: CARLY YOUNGS 855 ASPEN DR ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>855 ASPEN DR, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/26/2024</u>	
Name & Address: GEORGE HAMPTON 963 HEMLOCK DR ROCHESTER, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>MCNAUGHTON-MCKAY</u> Business Address <u>1357 E LINCOLN AVE, MADISON HEIGHTS, MI 48071</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/28/2024</u>	
Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>10.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3640 WORTHINGTON CT, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **110.00**

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/28/2024</u> Name & Address: KELLY HOUGHTELING 182 BEDLINGTON DR ROCHESTER HILLS, MI 48307		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HUMAN RESOURCES</u> Employer <u>NORTHAB</u> Business Address <u>182 BEDLINGTON DR, ROCHESTER HILLS, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/28/2024</u> Name & Address: DOUG HAYNE 701 RENSRAW ST ROCHESTER, MI 48307		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>701 RENSRAW ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/29/2024</u> Name & Address: CORI KING 3425 DURSLEY CT OAKLAND TWP, MI 48363		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>LEARNING CARE GROUP</u> Business Address <u>21333 HAGGERTY RD, NOVI, MI 48375</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2024</u> Name & Address: KENDRA MANCINI 3583 HOGAN CIR ROCHESTER HILLS, MI 48307		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NURSE PRACTITIONER</u> Employer <u>HENRY FORD HEALTH</u> Business Address <u>2799 W GRAND BLVD, DETROIT, MI 48202</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **110.00**

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>09/30/2024</u> Name & Address: HEIDI MILLER 417 WYNSTONE CIR S OAKLAND TWP, MI 48363		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>417 WYNSTONE CIR S, OAKLAND TWP, MI 48363</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: CATHERINE NATHAN 2427 CHURCHILL LN NE ROCHESTER, MN 55906		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>ROCHESTER PUBLIC SCHOOLS</u> Business Address <u>615 7TH ST SW, ROCHESTER, MN 55902</u> 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: MARILYN TRENT 624 W UNIVERSITY DR ROCHESTER, MI 48307		\$ <u>200.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGNER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>114 E 2ND ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2024</u> Name & Address: KRISTINE DEVAUX 425 TAYLOR AVE ROCHESTER, MI 48307		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>425 TAYLOR AVE, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 475.00

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

1. Committee I.D. Number 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>10/03/2024</u> Name & Address: AMY LUNDQUIST 1980 TALL OAKS BLVD ROCHESTER HILLS, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1980 TALL OAKS BLVD, ROCHESTER HILLS, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/04/2024</u> Name & Address: JULIE GILLIKIN 568 PINEHURST DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>568 PINEHURST DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/04/2024</u> Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307		\$ <u>300.00</u>	\$ <u>497.98</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL WORKER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>632 7TH ST, ROCHESTER, MI 48307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2024</u> Name & Address: CAROLYN YOUNG 260 E GUNN RD ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>260 E GUNN RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 450.00

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 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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>10/07/2024</u>	
Name & Address: ELIZABETH SCHROECK 6089 GILBERT LAKE RD BLOOMFIELD HILLS, MI 48301		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>ROCHESTER COMMUNITY SCHOOLS</u> Business Address <u>52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307</u> 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: SHANNON COLLINS 2745 STEAMBOAT SPRINGS DR ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2745 STEAMBOAT SPRINGS DR, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/09/2024</u>	
Name & Address: MARY STERLING 1700 BUELL CT ROCHESTER, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1700 BUELL CT, ROCHESTER, MI 48306</u> 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: EDUCATED WE STAND P.O. BOX 372384 SATELLITE BEACH, FL 32937		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

1,075.00

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 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: LEIGH MCFARLAND 675 W BLUFF CT ROCHESTER HILLS, MI 48306		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>TOTAL EDUCATION SOLUTIONS</u> Business Address <u>1742 CROOKS RD, TROY, MI 48084</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: LESLIE SCHNEIDER 348 W MARYKNOLL RD ROCHESTER HILLS, MI 48309		\$ <u>56.00</u>	\$ <u>56.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WRITER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>348 W MARYKNOLL RD, ROCHESTER HILLS, MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/16/2024</u> Name & Address: CARRIE LAWLER 885 E GUNN RD ROCHESTER, MI 48306		\$ <u>50.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>885 E GUNN RD, ROCHESTER, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/16/2024</u> Name & Address: MARY BRANSTNER 3474 WOODS DRIVE TRAVERSE CITY, MI 49686		\$ <u>50.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3474 WOODS DRIVE, TRAVERSE CITY, MI 49686</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **181.00**

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 96991
2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: EMILY BUSCH 97 DENNISON ST OXFORD, MI 48371		\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation <u>SEASONAL ORGANIZER</u> Employer <u>RED, WINE AND BLUE</u> Business Address <u>97 DENNISON ST, OXFORD, MI 48371</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	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			
3. Contribution # 3	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			
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

50.00

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

20,103.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Business Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 PRIDE IN THE PARK SPONSORSHIP 5. Date Of Receipt: 04/17/2024 6. Vendor Name & Address: FOREVER PRIDE ACTION P.O. BOX 82417, ROCHESTER, MI 48308	\$ 50.00	\$ 50.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 GIVE AWAY TOTES AND IRON ON TRANSFER PAPERS 5. Date Of Receipt: 06/18/2024 6. Vendor Name & Address: AMAZON.COM 410 TERRY AVE N, SEATTLE, WA 98109	\$ 42.80	\$ 92.80
Contribution #3 PAC Receipt? ☐ Yes Name & Address: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 1981 ANSAL DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 07/22/2024 6. Vendor Name & Address: UNITED STATES POSTAL SERVICE 2632 S ROCHESTER RD, ROCHESTER HILLS, MI 48307	\$ 22.40	\$ 32.40

Page Subtotal **115.20** **0.00**

Grand Total of all Schedules 1-IK
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Enter this total
on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JILL WEST 234 E MARYKNOLL RD ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: TEACHER Employer Name & Business Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/02/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA SRP 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☐ 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 POSTAGE 5. Date Of Receipt: 08/02/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 13.60	\$ 13.60
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MONICA KLOC 1140 CHRISTIAN HILLS DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1140 CHRISTIAN HILLS DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72

Page Subtotal

27.04

6.72

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Business Address: 1981 ANSAL DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 36.88
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JORDAN HICKSON 3389 SUMMIT RIDGE DR ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: COUNSELOR Employer Name & Address: EVOLVE COUNSELING 3389 SUMMIT RIDGE DR, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 11.20	\$ 11.20
Contribution #3 PAC Receipt? ☐ Yes Name & Address: KAREN REVENBAUGH 3159 CASTLETON CT ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: PARAEDCATOR Employer Name & Address: ROCHESTER COMMUNITYSCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 56.72

Page Subtotal

22.40

11.20

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

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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: DEDE GUESSOUS 425 BALDWIN AVE APT. 89 ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SELF EMPLOYED Employer Name & Business Address: SELF EMPLOYED 425 BALDWIN AVE, APT. 89, ROCHESTER, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 26.88	\$ 26.88
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: SHERYL HEYNIGER 476 WIMPOLE DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 476 WIMPOLE DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 08/03/2024 6. Vendor Name & Address: KROGER STAMPS 655 S ROCHESTER RD, ROCHESTER HILLS, MI 48307	\$ 5.84	\$ 5.84
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MATTHEW BARKLEY 2403 CULBERTSON AVE ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: ENGINEER Employer Name & Address: JAYSON SAFETY SYSTEMS 2500 INNOVATION DR, AUBURN HILLS, MI 48326 ☐ 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 POSTAGE 5. Date Of Receipt: 08/05/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 56.72

Page Subtotal **39.44** **83.60**

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

Enter this total
on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JAMI KLIENERT 511 YORKSHIRE DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: TEACHER Employer Name & Business Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/05/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 4.48
Contribution #3 PAC Receipt? ☐ Yes Name & Address: KAREN REVENBAUGH 3159 CASTLETON CT ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: PARAEDCATOR Employer Name & Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 61.20

Page Subtotal

15.68

6.72

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Business Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 29.48
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: SUE HAYDEN 1511 W SOUTH BLVD TROY, MI 48098 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: NOT EMPLOYED 1511 W SOUTH BLVD, TROY, MI 48098 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ANNIE HEGEDUS 686 MCGILL DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Address: OAKLAND UNIVERSITY 318 MEADOW BROOK RD, ROCHESTER, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 4.48

Page Subtotal

15.68

4.48

Grand Total of all Schedules 1-IK
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Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: ANGIE TTHUNG 3729 BRIARBROOKE LN OAKLAND TWP, MI 48306 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Business Address: NOT EMPLOYED 3729 BRIARBROOKE LN, OAKLAND TWP, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 7.95	\$ 7.95
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: BARBARA MACGREGOR 552 PINEHURST DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: NOT EMPLOYED 552 PINEHURST DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 22.40	\$ 22.40
Contribution #3 PAC Receipt? ☐ Yes Name & Address: REBECCA HOWEY 1685 RIVERSIDE DR APT 8 ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: NOT EMPLOYED 1685 RIVERSIDE DR, APT 8, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 4.48

Page Subtotal

34.83

34.83

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96991

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Business Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 POSTAGE 5. Date Of Receipt: 08/20/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 67.20	\$ 160.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA SRP 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ 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 MAILER FOR 9/19 JOINT FUNDRAISER 5. Date Of Receipt: 08/27/2024 6. Vendor Name & Address:	\$ 10.00	\$ 23.60
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JAMIE HILLIARD 2953 LEYTON CT ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Address: WARREN CONSOLIDATED SCHOOLS 31300 ANITA DR, WARREN, MI 48093 ☐ 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 POSTAGE 5. Date Of Receipt: 08/29/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72

Page Subtotal

83.92

0.00

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Business Address: NOT EMPLOYED 1981 ANSAL DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 08/29/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 2.24	\$ 89.12
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: SUE HAYDEN 1511 W SOUTH BLVD TROY, MI 48098 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: NOT EMPLOYED 1511 W SOUTH BLVD, TROY, MI 48098 ☐ 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 POSTAGE 5. Date Of Receipt: 08/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 2.24	\$ 8.96
Contribution #3 PAC Receipt? ☐ Yes Name & Address: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 08/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 8.96

Page Subtotal

8.96

0.00

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: WENDY HOLT 3649 S CENTURY OAK CIR OAKLAND TWP, MI 48363 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Business Address: NOT EMPLOYED 3649 S CENTURY OAK CIR, OAKLAND TWP, MI 48363 ☐ 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 POSTAGE 5. Date Of Receipt: 08/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: SHERYL HEYNIGER 476 WIMPOLE DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 476 WIMPOLE DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 09/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 11.20	\$ 17.04
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 09/04/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 36.20

Page Subtotal **24.64** **6.72**

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: SUE HAYDEN 1511 W SOUTH BLVD TROY, MI 48098 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: NOT EMPLOYED 1511 W SOUTH BLVD, TROY, MI 48098 ☐ 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 POSTAGE 5. Date Of Receipt: 09/09/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 2.24	\$ 11.20
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: KIRSTEN OLEN 485 GRACE AVE ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 09/10/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 8.96	\$ 8.96
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JILL WEST 234 E MARYKNOLL RD ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: TEACHER Employer Name & Address: ROCHESTER COMMUNITY 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 09/10/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 13.44

Page Subtotal

17.92

8.96

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Business Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 09/10/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 15.68
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JEN SAWDON 731 BAYLOR RD ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 731 BAYLOR RD, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 09/12/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 6.72
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 DONATION FOR USE OF MEET AND GREET SPACE 5. Date Of Receipt: 09/14/2024 6. Vendor Name & Address: FIRST CONGREGATIONAL CHURCH 1315 N PINE ST, ROCHESTER HILLS, MI 48307	\$ 20.00	\$ 180.00

Page Subtotal

33.44

6.72

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: SHERYL HEYNIGER 476 WIMPOLE DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Business Address: NOT EMPLOYED 476 WIMPOLE DR, ROCHESTER HILLS, MI 48309 ☐ 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>FOOD/BEVERAGES/PAPER PRODUCTS FOR MEET&GREET</u> 5. Date Of Receipt: <u>09/14/2024</u> 6. Vendor Name & Address: SHERYL HEYNIGER 476 WIMPOLE DR, ROCHESTER HILLS, MI 48309	\$ 36.69	\$ 53.73
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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>DOOR HANGER BAGS</u> 5. Date Of Receipt: <u>09/15/2024</u> 6. Vendor Name & Address: AMAZON 410 TERRY AVE N, SEATTLE, WA 98109	\$ 6.35	\$ 186.35
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA SRP 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ 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>FOOD FOR HOME MEET AND GREET EVENT FUNDRAISER</u> 5. Date Of Receipt: <u>09/19/2024</u> 6. Vendor Name & Address: DESSERT FIRST 32830 SARATOGA AVE, WARREN, MI 48093	\$ 40.00	\$ 63.60

Page Subtotal

83.04

63.60

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JAMIE HILLIARD 2953 LEYTON CT ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Business Address: WARREN CONSOLIDATED SCHOOLS 31300 ANITA DR, WARREN, MI 48093 ☐ 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 POSTAGE 5. Date Of Receipt: 09/28/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 22.40	\$ 29.12
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JAMIE HILLIARD 2953 LEYTON CT ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Address: WARREN CONSOLIDATED SCHOOLS 31300 ANITA DR, WARREN, MI 48093 ☐ 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 POSTAGE 5. Date Of Receipt: 09/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 15.68	\$ 44.80
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 09/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 20.16	\$ 56.36

Page Subtotal **58.24** **44.80**

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: SUE HAYDEN 1511 W SOUTH BLVD TROY, MI 48098 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: NOT EMPLOYED 1511 W SOUTH BLVD, TROY, MI 48098 ☐ 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 POSTAGE 5. Date Of Receipt: 09/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 2.24	\$ 13.44
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: SAMANTHA FORAN 1981 ANSAL DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 1981 ANSAL DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE 5. Date Of Receipt: 09/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 93.60
Contribution #3 PAC Receipt? ☐ Yes Name & Address: KATIE WOOLSEY 290 CROSS CREEK BLVD ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: TEACHER Employer Name & Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 09/30/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 24.48

Page Subtotal

11.20

131.52

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96991

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Business Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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>ADDRESS LABELS</u> 5. Date Of Receipt: <u>10/01/2024</u> 6. Vendor Name & Address: AMAZON 410 TERRY AVE N, SEATTLE, WA 98109	\$ <u>11.63</u>	\$ <u>197.98</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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>POSTAGE</u> 5. Date Of Receipt: <u>10/01/2024</u> 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ <u>6.72</u>	\$ <u>63.08</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: KATHY VARTY 1688 MAPLE CREEK CT ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: NOT EMPLOYED 1688 MAPLE CREEK CT, ROCHESTER, MI 48306 ☐ 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>POSTAGE</u> 5. Date Of Receipt: <u>10/01/2024</u> 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ <u>11.20</u>	\$ <u>11.20</u>

Page Subtotal

29.55

11.20

Grand Total of all Schedules 1-IK
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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: MITZIE RUMMEL 3615 SALEM DR ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: NOT EMPLOYED 3615 SALEM DR, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 10/01/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 4.48
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: TRACEY MICHALEK 688 WINDSONG DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: EDUCATOR Employer Name & Address: WEST BLOOMFIELD PUBLIC SCHOOLS 3750 COMMERCE RD, WEST BLOOMFIELD TOWNSHIP, MI 48324 ☐ 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 POSTAGE 5. Date Of Receipt: 10/02/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 4.48	\$ 4.48
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 10/02/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 15.68	\$ 78.76

Page Subtotal

24.64

8.96

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: KAREN REVENBAUGH 3159 CASTLETON CT ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: PARAEDCATOR Employer Name & Business Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 10/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 67.92
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 10/03/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 22.40
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 POSTAGE 5. Date Of Receipt: 10/04/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 44.80	\$ 542.78

Page Subtotal **58.24** **67.92**

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JILL WEST 234 E MARYKNOLL RD ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: TEACHER Employer Name & Business Address: ROCHESTER COMMUNITY SCHOOLS 52585 DEQUINDRE RD, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 10/04/2024 6. Vendor Name & Address: ROCHESTER POST. OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 6.72	\$ 20.16
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: TERESA CRIPSEY 668 E BUELL RD ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 668 E BUELL RD, ROCHESTER, MI 48306 ☐ 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 POSTAGE 5. Date Of Receipt: 10/04/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 29.20	\$ 229.20
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 DOOR HANGER BAGS 5. Date Of Receipt: 10/05/2024 6. Vendor Name & Address: AMAZON 410 TERRY AVE N, SEATTLE, WA 98109	\$ 6.35	\$ 549.13

Page Subtotal

42.27

20.16

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96991

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Business Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 ADDRESS LABELS 5. Date Of Receipt: 10/10/2024 6. Vendor Name & Address: AMAZON 410 TERRY AVE N, SEATTLE, WA 98109	\$ 13.19	\$ 562.32
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE 5. Date Of Receipt: 10/10/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 15.68	\$ 38.08
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 POSTAGE 5. Date Of Receipt: 10/15/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 112.00	\$ 674.32

Page Subtotal **140.87** **0.00**

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **96991**

CANDIDATE COMMITTEE

2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

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: JESSICA GUPTA 632 7TH ST ROCHESTER, MI 48307 If over \$100.00 cumulative, please provide: Occupation: SOCIAL WORKER Employer Name & Business Address: CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE, CLEVELAND, OH 44115 ☐ 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 POSTAGE 5. Date Of Receipt: 10/16/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 134.40	\$ 808.72
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JENNIFER PETROTTA 3398 ROSEGLADE ROCHESTER HILLS, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 3398 ROSEGLADE, ROCHESTER HILLS, MI 48306 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 10/17/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 11.20	\$ 89.96
Contribution #3 PAC Receipt? ☐ Yes Name & Address: TERESA CRIPSEY 668 E BUELL RD ROCHESTER, MI 48306 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 668 E BUELL RD, ROCHESTER, MI 48306 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 10/17/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 44.80	\$ 274.00

Page Subtotal **190.40** **1,172.68**

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96991

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT BARBARA ANNESS

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: GINGER KETELSEN 1361 AXFORD PL ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: NOT EMPLOYED 1361 AXFORD PL, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE FOR POSTCARDS 5. Date Of Receipt: 10/18/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 44.80	\$ 144.80
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: LISA KOWALSKI 1411 TERNBURY DR ROCHESTER HILLS, MI 48307 If over \$100.00 cumulative, please provide: Occupation: N/A Employer Name & Address: NOT EMPLOYED 1411 TERNBURY DR, ROCHESTER HILLS, MI 48307 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 10/20/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 8.40	\$ 46.48
Contribution #3 PAC Receipt? ☐ Yes Name & Address: SHERYL HEYNIGER 476 WIMPOLE DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 476 WIMPOLE DR, ROCHESTER HILLS, MI 48309 ☐ 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 POSTAGE FOR POST CARDS 5. Date Of Receipt: 10/20/2024 6. Vendor Name & Address: ROCHESTER POST OFFICE 511 OLDE TOWNE RD, ROCHESTER, MI 48308	\$ 47.00	\$ 100.73

Page Subtotal **100.20** **292.01**

Grand Total of all Schedules 1-IK
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/31/2024</u> Date	\$ <u>18.92</u>
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/31/2024</u> Date	\$ <u>31.17</u>
Expenditure #3 Name HUNTINGTON BANK Address 70 W TIENKEN RD ROCHESTER HILLS, MI 48306 ☐ Fund Raiser	Purpose: <u>ZELLE PAYMENT RECEIVED FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/15/2024</u> Date	\$ <u>0.50</u>
Expenditure #4 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>BUSINESS CARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/19/2024</u> Date	\$ <u>36.57</u>
Expenditure #5 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/29/2024</u> Date	\$ <u>32.23</u>

Subtotal this page

119.39

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/29/2024</u> Date	\$ <u>20.25</u>
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/30/2024</u> Date	\$ <u>5.96</u>
Expenditure #3 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD POSSESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/30/2024</u> Date	\$ <u>3.75</u>
Expenditure #4 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2024</u> Date	\$ <u>16.14</u>
Expenditure #5 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2024</u> Date	\$ <u>9.76</u>

Subtotal this page **55.86**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name INTUIT MAILCHIMP Address 405 N ANGIER AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: MAIL CHIMP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/28/2024 Date	\$ 13.00
Expenditure #2 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: SIGNS WITH WIRES AND BUSINESS CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/20/2024 Date	\$ 365.70
Expenditure #3 Name INTUIT MAILCHIMP Address 405 N ANGIER AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: EMAIL MARKETING PLATFORM ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/27/2024 Date	\$ 13.00
Expenditure #4 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: CREDIT CARD PROCESSING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/30/2024 Date	\$ 14.78
Expenditure #5 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: CREDIT CARD PROCESSING FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/30/2024 Date	\$ 23.97

Subtotal this page **430.45**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>FOAMCORE POSTER, FLYERS, POSTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/08/2024</u> Date	\$ <u>115.22</u>
Expenditure #2 Name INTUIT MAILCHIMP Address 405 N ANGIER AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: <u>EMAIL MARKETING PLATFORM</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/27/2024</u> Date	\$ <u>13.00</u>
Expenditure #3 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>4X6 PORTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/28/2024</u> Date	\$ <u>71.23</u>
Expenditure #4 Name GOOGLE ADS Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: <u>GOOGLE ADS CAMPAIGN</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/02/2024</u> Date	\$ <u>3.00</u>
Expenditure #5 Name UNION MADE STICKERS Address 505 ELLICOTT ST BUFFALO, NY 14203 ☐ Fund Raiser	Purpose: <u>50 VINYL CAR STICKERS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/09/2024</u> Date	\$ <u>107.50</u>

Subtotal this page

309.95

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: 70 24X24 SIGNS WITH WIRES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/13/2024 Date	\$ 482.30
Expenditure #2 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: BUSINESS CARDS AND 8.5X5.5 POSTCARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/14/2024 Date	\$ 237.97
Expenditure #3 Name PARTY CITY Address 1316 S ROCHESTER RD ROCHESTER, MI 48307 ☐ Fund Raiser	Purpose: BALLOONS FOR AN 8/25/24 MEET AND GREET AT INOVATIO ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/25/2024 Date	\$ 52.24
Expenditure #4 Name INTUIT MAILCHIMP Address 405 N ANGIER AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: EMAIL MARKETING PLATFORM ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/27/2024 Date	\$ 19.50
Expenditure #5 Name UNITED STATES POSTAL SERVICE Address 2632 S ROCHESTER RD ROCHESTER HILLS, MI 48307 ☐ Fund Raiser	Purpose: PURCHASE STAMPS FOR CAMPAIGN POSTCARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/2024 Date	\$ 22.40

Subtotal this page **814.41**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/2024</u> Date	\$ <u>56.41</u>
Expenditure #2 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/2024</u> Date	\$ <u>37.24</u>
Expenditure #3 Name OAKLAND COUNTY TIMES Address P.O. BOX 115 KEEGO HARBOR, MI 48320 ☐ Fund Raiser	Purpose: <u>CANDIDATE INTERVIEW FILMING FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/02/2024</u> Date	\$ <u>200.00</u>
Expenditure #4 Name COMMUNITY LIFESTYLES, INC. Address P.O. BOX 82512 ROCHESTER, MI 48308 ☐ Fund Raiser	Purpose: <u>DISPLAY AD, ROCHESTER/ROCHESTER HILLS/OAKLAND TWP</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/02/2024</u> Date	\$ <u>198.60</u>
Expenditure #5 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>BUSINESS CARDS AND POSTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/2024</u> Date	\$ <u>471.70</u>

Subtotal this page **963.95**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>ADJUSTMENT TO STRIPE CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/16/2024</u> Date	\$ <u>6.76</u>
Expenditure #2 Name MINUTEMAN PRESS OF ROCHESTER HILLS Address 2040 W AUBURN RD ROCHESTER HILLS, MI 48309 ☐ Fund Raiser	Purpose: <u>PRINT FLYERS FOR DISTRIBUTION</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/2024</u> Date	\$ <u>86.70</u>
Expenditure #3 Name GOOGLE ADS Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: <u>PURCHASE GOOGLE ADS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/2024</u> Date	\$ <u>10.00</u>
Expenditure #4 Name META PLATFORMS, INC. Address 1 META WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: <u>FACEBOOK ADS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/2024</u> Date	\$ <u>2.00</u>
Expenditure #5 Name C&G NEWSPAPERS Address 13650 E ELEVEN MILE RD WARREN, MI 48089 ☐ Fund Raiser	Purpose: <u>AD IN THREE EDITIONS OF THE ROCHESTER POST</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/2024</u> Date	\$ <u>693.60</u>

Subtotal this page **799.06**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GOOGLE ADS Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: GOOGLE CAMPAIGN ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/27/2024 Date	\$ 50.00
Expenditure #2 Name INTUIT MAILCHIMP Address 405 N ANGIER AVE NE ATLANTA, GA 30308 ☐ Fund Raiser	Purpose: EMAIL MARKETING PLATFORM ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/27/2024 Date	\$ 19.50
Expenditure #3 Name META PLATFORMS, INC. Address 1 META WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: CAMPAIGN ADS ON FACEBOOK ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/30/2024 Date	\$ 55.00
Expenditure #4 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: CREDIT CARD PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/30/2024 Date	\$ 36.57
Expenditure #5 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: CREDIT CARD PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/30/2024 Date	\$ 20.32

Subtotal this page

181.39

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>SIGNS, POSTCARDS, PRINTING, POSTAGE AND HANDLING</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/2024</u> Date	\$ <u>1,888.35</u>
Expenditure #2 Name GOOGLE ADS Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: <u>GOOGLE ADS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/2024</u> Date	\$ <u>41.56</u>
Expenditure #3 Name RELA2VE INC Address 909 S 7TH ST ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: <u>MMS TEXTING FOR THE CAMPAIGN</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/04/2024</u> Date	\$ <u>1,000.00</u>
Expenditure #4 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>CAMPAIGN POSTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/09/2024</u> Date	\$ <u>148.40</u>
Expenditure #5 Name UNITED STATES POSTAL SERVICE Address 511 OLDE TOWNE RD ROCHESTER, MI 48308 ☐ Fund Raiser	Purpose: <u>PURCHASE STAMPS FOR CAMPAIGN POSTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/09/2024</u> Date	\$ <u>124.41</u>

Subtotal this page **3,202.72**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED UNION SERVICES Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: <u>4X2 YARD SIGN WITH CORNER GROMMETS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/2024</u> Date	\$ <u>48.71</u>
Expenditure #2 Name GOOGLE ADS Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: <u>GOOGLE ADS FOR THE CANDIDATE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/2024</u> Date	\$ <u>200.00</u>
Expenditure #3 Name STAPLES COPY & PRINT Address 1950 S ROCHESTER RD ROCHESTER HILLS, MI 48307 ☐ Fund Raiser	Purpose: <u>A MINI POSTER FOR THE CAMPAIGN</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/2024</u> Date	\$ <u>12.83</u>
Expenditure #4 Name ULINE Address 12575 ULINE DR PLEASANT PRAIRIE, WI 53158 ☐ Fund Raiser	Purpose: <u>6X12??? CLEAR DOORKNOB BAGS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/2024</u> Date	\$ <u>48.30</u>
Expenditure #5 Name C&G NEWSPAPERS Address 13650 E ELEVEN MILE RD WARREN, MI 48089 ☐ Fund Raiser	Purpose: <u>CAMPAIGN AD IN THE ROCHESTER POST</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/2024</u> Date	\$ <u>421.60</u>

Subtotal this page **731.44**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOPPE Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: <u>PRINTING 8.5X5.5 CARDS, POSTAGE AND MAIL HANDLING</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/2024</u> Date	\$ <u>1,624.46</u>
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/2024</u> Date	\$ <u>27.72</u>
Expenditure #3 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: <u>CREDIT CARD PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/2024</u> Date	\$ <u>15.80</u>
Expenditure #4 Name META PLATFORMS, INC. Address 1 META WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: <u>FACEBOOK ADS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/2024</u> Date	\$ <u>249.00</u>
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u> </u> Date	\$ <u> </u>

Subtotal this page **1,916.98**
Grand Total of all Schedules 1B
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**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **96991**
2. Committee Name **COMMITTEE TO ELECT BARBARA ANNESS**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 09/19/2024	4. Number of Individuals Attending or Participating (whichever is greater) 15	5. Type of Fund Raising Activity MEET THE CANDIDATES	6. Address and Name (If any) of the place where the activity was held. JENNIE MILLER???S HOME 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 ☒ Private Residence
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7. Total Contributions **500.00**
8. Other Receipts **0.00**
9. Gross Receipts (Add lines 7 and 8) **500.00**
10. Total Cost of Event **250.00**
(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 (%)
CAMPAIGN TO ELECT JAYSON BLAKE	20	20
RICHARD KACZANOWSKI 4 RCS BOE	20	20
COMMITTEE TO ELECT BARB ANNESS	20	20
COMMITTEE TO ELECT JULIE ALSPACH	20	20
COMMITTEE TO ELECT MICHELLE BUELTEL	20	20

- 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.