

CANDIDATE COMMITTEE COVER PAGE

FILED 24 OCT 2025 PM 07:13

OAKLAND COUNTY CLERK PONTIAC, MICHIGAN

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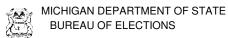
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. 3. This Statement covers From: 04/21/2025 to 10/19/2025 1. Committee I.D. Number 4. Candidate Last Name First Name M.I. **WYNETT** GUY Α 98731 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name CITY CLERK, SOUTHFIELD PEOPLE FOR WYNETT GUY 4b. County of Residence OAKLAND COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 15900 W 10 MILE RD WYNETT A GUY STE 211 #1199 25690 CODE RD SOUTHFIELD, MI 48075 SOUTHFIELD, MI 48033 Area Code and Phone (313) 355-4446

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (313) 355-4446 be sent to this address by the filing official. 7. Treasurer's Business Address 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) 25690 CODE RD WYNETT GUY SOUTHFIELD, MI 48033 25690 CODE RD SOUTHFIELD, MI 48033 Area Code and Phone (313) 355-4446 (313) 355-4446 Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. X Pre-Election OR 9b. Post-Election By checking this item I/We certify any outstanding debt is not on the ballot for the current year: by the committee to the candidate or his or her spouse is here Pre-Election or Post-Election Statement relates to: by discharged and forgiven, and no longer collectible from July Quarterly the committee. The committee has no oustanding assets, Primary owes no lates fees or has any oustanding debt. October Quarterly X General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement (Effective date of dissolution Coverage Year School Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to Caucus Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 11/04/2025 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. Submitted electronically. Current Treasurer or signature on file 10/24/2025 Designated Record keeper Date Type or Print Name Signature Submitted electronically, 10/24/2025 signature on file Candidate Date Signature Type or Print Name

1. Committee I.D. Number 98731

SUMMARY PAGE CANDIDATE COMMITTEE

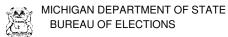
Column I This Period	Column II Cumulative this election cycle
	Odmalative this election cycle
_{(3a.) \$} 7,037.36	
(3b.) \$ NOT APPLICABLE	
(3c.) \$ 7,037.36	(18.) \$ _7,037.36
(4.) \$ 0.00	(19.) \$ 0.00
(5.) \$ _7,037.36	(20.) \$ 7,037.36
() :	(21.) \$ 2,000.00
(7.) \$ 0.00	(22.) \$ 0.00
(8a.) \$ 5,219.92	
(8b.) \$ 0.00	
(8c.) \$ 0.00	
(9.) \$ 5,219.92	(23.) \$ 5,219.92
(10a.) \$ 0.00	
(10h.) ¢ 0.00	
	(24.) \$ 0.00
(11.) \$	(24.) \$
(120.) \$ 4.000.00	
BALANCE STATEMENT (13.) \$ 0.00 (14.) + \$ $7,037.36$ (15.) = \$ $7,037.36$ (16.) - \$ $5,219.92$ (17.) \$ $1,817.44$	*
	This Period (3a.) \$ $7,037.36$ (3b.) \$ NOT APPLICABLE (3c.) \$ $7,037.36$ (4.) \$ 0.00 (5.) \$ $7,037.36$ (6.) \$ $2,000.00$ (7.) \$ 0.00 (8a.) \$ $5,219.92$ (8b.) \$ 0.00 (8c.) \$ 0.00 (9.) \$ $5,219.92$ (10a.) \$ 0.00 (11.) \$ 0.00 (12a.) \$ 0.00 (12a.) \$ 0.00 (12b.) \$ 0.00 (12b.) \$ 0.00 BALANCE STATEMENT (13.) \$ 0.00 (14.) + \$ $7,037.36$ (15.) = \$ $7,037.36$ (16.) - \$ $5,219.92$



1. Committee I.D. Number 98731

2. Committee Name

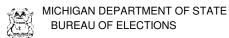
3. Contribution # 1 PAC Receipt?	
Cocupation Employer	<u> </u>
Business Address Type of Contribution: Direct Loan from a person D5/13/2025 Name & Address PATRICK OLIVER 7731 LANSING DR LEMON GROVE, CA 91945 5. If over \$100.00 cumulative, please provide: Occupation UNKNOWN Employer UNKNOWN Business Address UNKNOWN, SAN DIEGO, CA 92115 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/15/2025 WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	<u> </u>
Type of Contribution: Pict Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/13/2025 Name & Address PATRICK OLIVER 7731 LANSING DR LEMON GROVE, CA 91945 5. If over \$100.00 cumulative, please provide: Occupation UNKNOWN Employer UNKNOWN Business Address UNKNOWN, SAN DIEGO, CA 92115 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/15/2025 WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	<u> </u>
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Business Address UNKNOWN, SAN DIEGO, CA 92115 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/15/2025 WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	
Business Address UNKNOWN, SAN DIEGO, CA 92115 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/15/2025 WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/15/2025 WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	
Name & Address: WILLIAM D RANDOLPH 16258 CAMDEN CIR SAN DIEGO, CA 92127 5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	
5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105)
Occupation ACCOUNT MANAGER Employer SALES FORCE Business Address 415 MISSION ST, SF, CA 94105	
Business Address 415 MISSION ST, SF, CA 94105	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/26/2025	
Name & Address GWENDOLYN D TAYLOR 14042 BRINGARD DR DETROIT, MI 48205 \$25.00	
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address	
Type of Contribution: Loan from a person Fund Raiser	
Page Subtotal 525.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number 98731

2. Committee Name

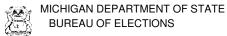
Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution is Committee (PAC) Report <u>all</u> contributions regardless	from a Political Comm		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES Name & Address: GERISE L GUY 1864 DENISON ST MEMPHIS, TN 38111	4. Date of Rece	opt 07/14/2025	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Emplo Business Address COUNSELING CENTER, 214		TY OF MEMPHIS , MEMPHIS, TN 38152		
Type of Contribution: Direct Loan	from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES Name & Address DONAL PETERSON	4. Date of Rece	ipt 07/19/2025		
20776 CURIE AVE WARREN, MI 48091			\$ 1,225.00	_{\$} 1,225.00
5. If over \$100.00 cumulative, please provide:				
Occupation GRAPHIC DESIGNER Employe				
Business Address 20776 CURIE AVE, V	WARREN, MI	48091		
Type of Contribution: Direct Loan	from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES Name & Address: GERISE L GUY 1864 DENISON ST	4. Date of Reco	eipt 07/20/2025	_{\$} 100.00	_{\$} 160.00
MEMPHIS, TN 38111				
5. If over \$100.00 cumulative, please provide:	LINII\/EDQI	TV OF MEMBUIS		
		TY OF MEMPHIS		
Business Address COUNSELING CENTER, 214 Type of Contribution: Direct Loan	from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES	4. Date of Rec	ceipt 07/20/2025		
Name & Address DEBORAH WEBB JUSTUS 2462 JUDITH COVE MEMPHIS, TN 38114		0172072020	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:				
Occupation Em	ployer			
Business Address	, <u> </u>	T Fund Deleas		
Type of Contribution: Direct Loan	from a person	Fund Raiser Page Subtotal	1.005.00	
		rand Total of All Schedules 1A plete on last page of Schedule)	1,395.00 Enter this total on	
Page 2 of 31			line 3a of Summary Page.	



1. Committee I.D. Number ____98731

CANDIDATE COMMITTEE

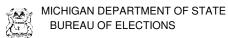
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/21/2025 Name & Address: TIA JACKSON 27157 WINCHESTER TRENTON, MI 48183	_s 100.00	_s 100.00
5. If over \$100.00 cumulative, please provide:	Ψ	
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/21/2025		
Name & Address HOUSTON SANDERFIELD		
24325 BOLAM AVE	_{\$} 100.00	_{\$} 100.00
WARREN, MI 48089	\$ 100.00	\$ 100.00
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 07/22/2025 Name & Address: BETTY J RUSH 24183 GRAND TRAVERSE AVE FLAT ROCK, MI 48134	_{\$} 60.00	_{\$} 60.00
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 07/22/2025		
Name & Address GWENDOLYN D TAYLOR 14042 BRINGARD DR DETROIT, MI 48205	_{\$} 10.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	270.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of 31	Enter this total on	



1. Committee I.D. Number 98731

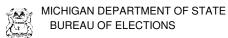
2. Committee Name

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 07/23/2025 Name & Address: ADAM WALKER 21610 PARKLAWN ST OAK PARK, MI 48237	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/23/2025		
Name & Address PATRICIA SAMPLE 6013S 14TH ST BROKEN ARROW, OK 74011	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer SCHOOL DISTRICT		
Business Address UNKNOWN, NY		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/23/2025 Name & Address: METASHA JACKSON 18651 BROHL ST ROSEVILLE, MI 48066	§ 60.00	_{\$} 60.00
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 07/24/2025 Name & Address TAMRA REEVES 701 TUPELO CIR COCOA, FL 32926	_{\$} 60.00	_{\$} _60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 4 of 31	Enter this total on line 3a of Summary Page.	



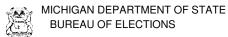
1. Committee I.D. Number ___98731

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 all 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 07/24/2025 Name & Address: ANNETTE L DAY 16262 HARDEN CIR SOUTHFIELD, MI 48075	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/24/2025		
Name & Address MONICA WILLIAMSON 2005 MIDDAY DR ZION, IL 60099	_{\$} 25.00	§ 25.00
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 07/25/2025 Name & Address: GENEVA LOVELADY 4394 KENSINGTON AVE DETROIT, MI 48224	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation UNEMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/26/2025 Name & Address CHANISE LACKLEY 25700 CODE RD SOUTHFIELD, MI 48033	_{\$} 60.00	_{\$_} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	195.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 5 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ___98731

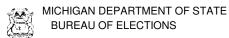
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/27/2025 Name & Address: MONICA LOCKETT 23010 FOX CREEK FARMINGTON HILLS, MI 48335	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/28/2025		
Name & Address DONALD JONES 864 ANGELUS AVE SAN DIEGO, CA 92114	_{\$} 50.00	_{\$} 50.00
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 07/28/2025 Name & Address: GERISE L GUY 1864 DENISON ST MEMPHIS, TN 38111	_{\$} 20.00	_{\$} 180.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer UNIVERSITY OF MEMPHIS		
Business Address COUNSELING CENTER, 214 WILDER TOWER, MEMPHIS, TN 38152		
Type of Contribution: Direct Loan from a person Fund Raiser	,	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/30/2025 APRIL JOHNSON 1321 HICKORY WOODS WAY WYLIE, TX 75098	_{\$} 60.00	_{\$_} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	190.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 6 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ____98731

2. Committee Name

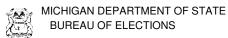
Enter contributor's name and address. If contribution is from an individual, enter last name, first n middle initial. Check box to indicate if contribution is from a Political Committee or an Independen Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/01/2025 VENETIA DAUGHERTY 2618 SADDLEBACK ST CHULA VISTA, CA 91914 5. If over \$100.00 cumulative, please provide: Occupation Employer		_{\$} 60.00	_{\$} 60.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/01/2025 Name & Address GERISE L GUY 1864 DENISON ST MEMPHIS, TN 38111 5. If over \$100.00 cumulative, please provide:		_{\$} 15.00	_{\$} 195.00
Occupation RETIRED Employer UNIVERSITY OF MEMPHI	<u>I</u> S		
Business Address COUNSELING CENTER, 214 WILDER TOWER, MEMPHIS, TN 3815			
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/03/2025 MARY GUY 25690 CODE RD SOUTHFIELD, MI 48033 5. If over \$100.00 cumulative, please provide:		_{\$} 60.00	_{\$} 60.00
Occupation UNEMPLOYED Employer			
Business Address Type of Contribution:			
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/04/2025 Name & Address TIMOTHY JACKSON 180 INVERNESS PLAZA BIRMINGHAM, AL 35242		_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Page 9	Subtotal	195.00	
Grand Total of All Schedi (Complete on last page of Sci Page 7 of 31		Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ___98731

CANDIDATE COMMITTEE

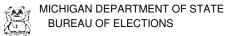
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/04/2025 Name & Address: DENISE COPELAND 12297 RIAD ST DETROIT, MI 48224	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/05/2025 Name & Address		
ASHLEY GUY		
173 N COTTAGE RD	_{\$} 120.00	_s 120.00
STERLING, VA 20164	Ψ	Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation UNEMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/09/2025 Name & Address: STEVEN MCREYNOLDS 21145 DUNS SCOTUS ST SOUTHFIELD, MI 48075	_{\$} 25.00	_{\$} 25.00
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 08/11/2025 Name & Address		
STEVEN MCREYNOLDS 21145 DUNS SCOTUS ST SOUTHFIELD, MI 48075	_{\$} 25.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	270.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 6 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ___98731

CANDIDATE COMMITTEE

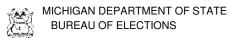
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 PAC Receipt? YES Name & Address: DIANE SMITH 23400 WHITEHALL DR NOVI, MI 48374	6 4. Date of Rece	08/17/2025	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:				
Occupation Empl	oyer			
Business Address	<u>-</u> -			
Type of Contribution:	n from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES Name & Address EMILY DUTHINH 7020 PENINSULA CT CLARKSTON VLG, MI 48346	4. Date of Rece	ipt <u>08/17/2025</u>	_{\$} _100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:				
Occupation Employ	er			
Business Address				
Type of Contribution: Direct Loan	from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/17/2025 Name & Address: THERESA FOUGNIE 3836 BRISTOL CT CLARKSTON VLG, MI 48348		§ 50.00	_{\$} 50.00	
5. If over \$100.00 cumulative, please provide:				
Occupation Emplo	oyer			
Business Address Direct Loan	n from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YE Name & Address MARIAN MAHONEY 24108 WESTMONT DR NOVI, MI 48374	S 4. Date of Rec		_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:				
Occupation En	nployer			
Business Address	n from a person	Fund Raiser		
		Page Subtotal	225.00	
Page 9 of 31		rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ___98731

CANDIDATE COMMITTEE

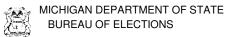
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/17/2025 Name & Address: DAVID KNIAZ 42648 FAULKNER DR NOVI, MI 48377	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/18/2025		
Name & Address ELIZABETH MORRIS 46962 SUNNYBROOK LN NOVI, MI 48374	<u>\$ 100.00</u>	_{\$} 100.00
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 08/19/2025 Name & Address: ASHLEY FISHER 856 WOOD RUN SOUTH LYON, MI 48178	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/19/2025		
Name & Address LISA PURVIS 58545 PONTIAC TRAIL NEW HUDSON, MI 48165	_{\$} 50.00	_{\$_} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	225.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number 98731

2. Committee Name

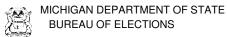
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Address: KAREN SCHMITZ 25946 CARRIAGE LN SOUTH LYON, MI 48178	9ipt 08/19/2025	_{\$} 40.00	_{\$} 40.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt?	eipt 08/20/2025		
DEBORAH WEBB JUSTUS 2462 JUDITH COVE MEMPHIS, TN 38114		_{\$} 10.00	_{\$} 20.00
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 Rec Name & Address: GWENDOLYN D TAYLOR 14042 BRINGARD DR DETROIT, MI 48205	eipt 08/22/2025	\$ 10.00	_{\$} 45.00
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 Address MARTIN BROOK 1332 LAKE CRESCENT DR BLOOMFIELD HILLS, MI 48302	peipt 08/22/2025	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address	Fund Raiser		
	Page Subtotal	160.00	
	irand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number _____98731

CANDIDATE COMMITTEE

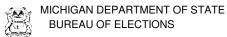
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/22/2025 Name & Address: JAIMIE HORROWITZ 26419 YORK RD HUNTINGTON WOODS, MI 48070 5. If over \$100.00 cumulative, please provide: Occupation	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/23/2025 Name & Address PATRICIA SAMPLE 6013S 14TH ST BROKEN ARROW, OK 74011	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer SCHOOL DISTRICT Business Address UNKNOWN, NY Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/25/2025 Name & Address: GENEVA LOVELADY 4394 KENSINGTON AVE DETROIT, MI 48224	_{\$} 50.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation UNEMPLOYED Employer Business Address Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/04/2025 Name & Address FELECIA MAUPIN 6013 S 14TH ST BROKEN ARROW, OK 74011	_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer DFAS US MILITARY Business Address 8899 E 56TH ST, INDIANAPOLIS, IN 46249		
Type of Contribution: Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 12 of 31	Enter this total on line 3a of Summary Page.	-



1. Committee I.D. Number _____98731

CANDIDATE COMMITTEE

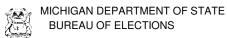
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/06/2025 Name & Address: SHADIA MARTINI 1717 HERON RIDGE DR BLOOMFIELD HILLS, MI 48302 5. If over \$100.00 cumulative, please provide: Occupation REAL ESTATE BROKER Employer SELF Business Address 1717 HERON RIDGE DR, BLOOMFIELD HILLS, MI 48302	_{\$} 100.00	_{\$} 100.00
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/10/2025 Name & Address JASON BAUER 106 TREGENT ST PONTIAC, MI 48342 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/12/2025 Name & Address: VERDELL ISLAND 2358 S CHATEAU ST WICHITA, KS 67207 5. If over \$100.00 cumulative, please provide:	\$50.00	_{\$} 50.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/15/2025 Name & Address SYLVIA SIMMONS 25147 STONYCROFT DR SOUTHFIELD, MI 48033	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:		
Occupation UNEMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	350.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 13 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ____98731

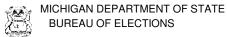
CANDIDATE COMMITTEE

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 09/18/2025 Name & Address: DEVIN STEELE 10535 9 MILE RD WHITMORE LAKE, MI 48189	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:	*	
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/18/2025		
Name & Address KENNETH O'HARA		
2493 TIFFANY LANE	_{\$} 10.00	_{\$} 10.00
DELHI CHARTER TOWNSHIP, MI 48842	\$ <u></u>	\$ 10100
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 09/20/2025 Name & Address: DEBORAH WEBB JUSTUS 2462 JUDITH COVE MEMPHIS, TN 38114	_{\$} 10.00	§ 30.00
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 09/20/2025 Name & Address		
MARGARET WIGLEY 21421 BROADSTONE ST HARPER WOODS, MI 48225	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:		
Occupation NURSE Employer HFHS		
Business Address One Ford Place, Detroit, MI, USA, SUITE 4-E, DETROIT, MI 48202 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	95.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 14 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ___98731

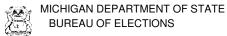
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/20/2025 Name & Address: DELORES GOODSON 18575 WOODLAND ST HARPER WOODS, MI 48225	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/21/2025		
Mame & Address GERISE L GUY 1864 DENISON ST MEMPHIS, TN 38111	_{\$} 10.00	_{\$} 205.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer UNIVERSITY OF MEMPHIS		
Business Address COUNSELING CENTER, 214 WILDER TOWER, MEMPHIS, TN 38152		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/21/2025 Name & Address: MARY GUY 25690 CODE RD SOUTHFIELD, MI 48033	\$ 60.00	_{\$} _120.00
5. If over \$100.00 cumulative, please provide:		
Occupation UNEMPLOYED Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/21/2025 Name & Address RACHEL CRAFT 18454 GILCHRIST ST DETROIT, MI 48235	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	140.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 15 of 31	Enter this total on line 3a of Summary Page.	-



1. Committee I.D. Number _____98731

2. Committee Name PEOPLE FOR WYNETT GUY

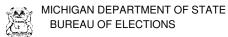
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/21/2025 Name & Address: SHARON WASHINGTON 15205 COUZENS AVE EASTPOINTE, MI 48021 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 80.00	_{\$} 80.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/21/2025 Name & Address ERICA L WASHINGTON 16659 WASHBURN ST DETROIT, MI 48221 5. If over \$100.00 cumulative, please provide:	_{\$} 10.00	_{\$} 10.00
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/21/2025 MARGARET WIGLEY 21421 BROADSTONE ST HARPER WOODS, MI 48225	_{\$} 25.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation NURSE Employer HFHS Business Address One Ford Place, Detroit, MI, USA, SUITE 4-E, DETROIT, MI 48202		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/21/2025 Name & Address JANET JACKSON 9351 PICKWICK CIR E TAYLOR, MI 48180	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
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)	Enter this total on	
Page 16 of 31	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ____98731

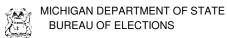
Enter contributor's name and address. If commiddle initial. Check box to indicate if contributions recommittee (PAC) Report all contributions recommittee (PAC)	ribution is from a Political Commi		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: TREENA L GUY 3500 HARVARD RD DETROIT, MI 48224 5. If over \$100.00 cumulative, please pro		ot <u>09/21/2025</u>	_{\$} 60.00	_{\$} 60.00
Occupation	_ Employer			
Business Address		<u> </u>		
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receip	ot 09/21/2025		
JANET JACKSON 9351 PICKWICK CIR E TAYLOR, MI 48180			<u>\$60.00</u>	_{\$} 70.00
5. If over \$100.00 cumulative, please pro	vide:			
Occupation	_ Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: GWENDOLYN D TAYLOR 14042 BRINGARD DR DETROIT, MI 48205	YES 4. Date of Recei	pt 09/22/2025	<u>\$ 10.00</u>	_{\$} 55.00
5. If over \$100.00 cumulative, please pro-	vide:			
Occupation	Employer			
Business Address				
	Loan from a person			
3. Contribution # 4 PAC Receipt? Name & Address VICKIE WAGNER 6707 S MARTIN RD THREE OAKS, MI 49128	YES 4. Date of Rece	ipt <u>09/22/2025</u>	_{\$} 12.50	_{\$} 12.50
5. If over \$100.00 cumulative, please pro	vide:			
Occupation	_ Employer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
17 21		Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	142.50 Enter this total on line 3a of Summary	
Page 17 of 31			Page.	



1. Committee I.D. Number ___98731

CANDIDATE COMMITTEE

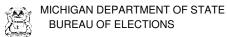
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/22/2025 Name & Address: SAMUEL CARSON 4016 BEARD AVE S MINNEAPOLIS, MN 55410	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/22/2025		
Name & Address BRENNAN MARTIN		
14621 BARCLAY ST	_{\$} 12.50	_{\$} 12.50
DEARBORN, MI 48126	Ψ	Ψ
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 09/22/2025 Name & Address: JODI LUSTIG 130 W 79TH ST. APT 6F NEW YORK, NY 10024 5. If over \$100.00 cumulative, please provide:	_{\$} 12.50	_{\$} 12.50
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/22/2025 Name & Address RICHARD STRAUSZ 30155 WOODGATE DR SOUTHFIELD, MI 48076	_{\$} 12.50	_{\$_} 12.50
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	47.50	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 18 of 31	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number 98731

2. Committee Name

Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Common Committee (PAC) Report all 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 Address: LESLIE NOVACK 28 SELLERS AVE LEXINGTON, VA 24450	eipt 09/22/2025	_{\$} 1.50	_{\$} 1.50
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt?	eipt 09/22/2025		_
Name & Address CHRIS MCMILLAN 5815 SWEDE AVE MIDLAND, MI 48642		_{\$} 5.00	_{\$} 5.00
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 Rec Name & Address: ROGER MOLLON 6818 HEATHERWOOD DR WEST BLOOMFIELD, MI 48324	eipt 09/22/2025	_{\$} 12.50	_{\$} 12.50
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 PETERSON 3921 OLD COLONY RD KALAMAZOO, MI 49008	ceipt 09/22/2025	_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address	Fund Raiser		
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	Grand Total of All Schedules 1A applete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number ____98731

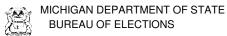
CANDIDATE COMMITTEE

PEOPLE FOR WYNETT GUY

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 09/22/2025 Name & Address: LINDA J CARTER 1030 HIGHGATE RD KALAMAZOO, MI 49006 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 5.00	_{\$} 5.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/22/2025 Name & Address BOB COURNEYA 1588 KINGS CARRIAGE RD GRAND BLANC, MI 48439	_{\$} 12.50	_{\$} 12.50
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 09/22/2025 Name & Address: JEAN MATHER 1009 FAIRWAY LN APT 4 LANSING, MI 48912 5. If over \$100.00 cumulative, please provide:	§ 5.00	_{\$} 5.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/22/2025 Name & Address YVONNE BRIDGES 17275 GOLDWIN DR SOUTHFIELD, MI 48075	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	82.50 Enter this total on line 3a of Summary	

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Page.

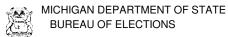


1. Committee I.D. Number 98731

CANDIDATE COMMITTEE

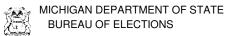
2. Committee Name

Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regard	n is from a Political Comm		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YNAME & Address: DEBORAH WAHL 1475 LONE PINE RD BLOOMFIELD, MI 48302	ES 4. Date of Rece	ipt 09/22/2025	_{\$} 12.50	_{\$} 12.50
5. If over \$100.00 cumulative, please provide:				
Occupation En	nployer			
Business Address	<u></u> -			
Type of Contribution: Direct	oan from a person	Fund Raiser		
	ES 4. Date of Recei	ipt 09/22/2025		
JOYCE ULRICH 20640 AUDETTE ST DEARBORN, MI 48124			_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:				
Occupation Emp	loyer			
Business Address				
Type of Contribution: Direct	oan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: SUSAN SWAN 9340 MILLER RD SWARTZ CREEK, MI 48473	YES 4. Date of Rece	o9/22/2025	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:				
Occupation Em	nployer			
Business Address				
Type of Contribution: Direct L	oan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address MILO TILTON 24687 GLENEYRIE DR SOUTHFIELD, MI 48033	YES 4. Date of Rec	eipt <u>09/22/2025</u>	_{\$} 50.00	_{\$_} 50.00
5. If over \$100.00 cumulative, please provide:				
Occupation UNKNOWN	Employer			
Business Address				
Type of Contribution:	oan from a person	Fund Raiser		
		Page Subtotal	92.50	
04 04		rand Total of All Schedules 1A olete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 21 of 31			Page.	



1. Committee I.D. Number ___98731

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 Name & Address: MARGARET SMITH 1313 MACKIE RD ALMONT, MI 48003	?	YES 4. Date of Re	ceipt	09/22/2025	_{\$} 2.50	ٍ 2.50
5. If over \$100.00 cumulative, please p	rovid	e:			\$ 2.00	<u>\$ 2100</u>
Occupation		Employer				
Business Address						
Type of Contribution: Direct		Loan from a person		Fund Raiser		
3. Contribution #2 PAC Receipt?		YES 4. Date of Rec	ceipt	09/22/2025		
Name & Address ALEXIS CROSS 18528 PINE EAST BLDG. 4 BROWNSTOWN CHARTER TO 5. If over \$100.00 cumulative, please process.		•			_{\$} 40.00	_{\$} 40.00
Occupation	E	mployer				
Business Address						
Type of Contribution: Direct		Loan from a person		Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: PATRICIA SAMPLE 6013S 14TH ST BROKEN ARROW, OK 740 5. If over \$100.00 cumulative, please pi	11		eceip	t <u>09/23/2025</u>	_{\$} 100.00	_{\$} 300.00
Occupation RETIRED		Employer_SCHOOL	DIS	STRICT		
Business Address UNKNOWN, N		Employer				
Type of Contribution: Direct		Loan from a person		Fund Raiser		
3. Contribution # 4 PAC Receipt	<u> </u>	YES 4. Date of R	eceip	ot 09/23/2025		
Name & Address BARBARA WOLK 28056 BRANDYWINE RD FARMINGTON, MI 48334					_{\$} 12.50	_{\$_} 12.50
5. If over \$100.00 cumulative, please p	rovid	e:				
Occupation		Employer				
Business Address						
Type of Contribution: Direct		Loan from a person		Fund Raiser		
				Page Subtotal	155.00	
22 21		(Co		nd Total of All Schedules 1A te on last page of Schedule)	Enter this total on line 3a of Summary	
Page 22 of 31					Page.	



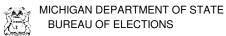
1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name	PEOPLE FOR	WYNETT GUY
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 all 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 09/23/2025 Name & Address: JOHN DEVRIES 1525 VICTOR AVE LANSING, MI 48910	_ _{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	_	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/23/2025 Name & Address DEBORAH KINDEL 11169 W CLARK RD EAGLE, MI 48822	_{\$} 5.00	_{\$} 5.00
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 09/23/2025 Name & Address: SUSANNA MIELE 415 RUSSELL AVENUE APT 1105 GAITHERSBURG, MD 20877 5. If over \$100.00 cumulative, please provide:	 _{\$} 25.00	_{\$} 25.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/23/2025 NARIO MARALDO 25999 BALLARD ST HARRISON TOWNSHIP, MI 48045	_{\$} 5.00	_{\$_} 5.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	_	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	otal 45.00	
Crand Total of All Schodules	1.0	

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(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



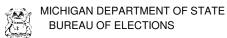
1. Committee I.D. Number _____98731

PEOPLE FOR WYNETT GUY

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 09/23/2025 Name & Address: SHEET METAL WORKERS UNION 80 17100 W 12 MILE RD SOUTHFIELD, MI 48076 5. If over \$100.00 cumulative, please provide: Occupation	_{\$} 280.00	_{\$} 280.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/25/2025 Name & Address MELISSA PENDOLINO 1701 STERLING DR FLORHAM PARK, NJ 07932	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/26/2025 Name & Address: DONALD RAFAL 26902 W 12 MILE RD SOUTHFIELD, MI 48034	_{\$} 18.00	_{\$} 18.00
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 09/27/2025 Name & Address J.BRUCE HILLENBERG 32215 SHREWSBURY ST FARMINGTON HILLS, MI 48334	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		<u> </u>
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page <u>24</u> of <u>31</u>

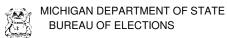
Page.



1. Committee I.D. Number _____98731

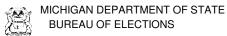
CANDIDATE COMMITTEE

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 09/28/2025 Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326 5. If over \$100.00 cumulative, please provide: Occupation UNEMPLOYED Employer	_{\$} 200.00	_{\$} 200.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/28/2025 Name & Address DINA S STUBER 5784 LIMESTONE DR TROY, MI 48085 5. If over \$100.00 cumulative, please provide:	_{\$} 10.00	_{\$} 10.00
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/29/2025 Name & Address: CAMERON COLLIERSMITH 19821 SILVER-SPRING ST SOUTHFIELD, MI 48076	\$ 100.00	_{\$} 100.00
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 09/29/2025 Name & Address MARIA MARCOTTE 547 BLOOMFIELD CT BIRMINGHAM, MI 48009	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 25 of 31	Enter this total on line 3a of Summary Page.	



2. Committee Name

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 all 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 10/01/2025 Name & Address: MONA DEQUIS 25950 PRINZ RD RICHMOND, MI 48062	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:	*	
Occupation POLITICS Employer MICHIGAN DEMOCRATIC PARTY		
Business Address 606 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/2025		
Name & Address		
JAMIE GULIN		
5503 NORTHGREEN RD	_{\$} 1.13	_{\$} 1.13
WINDSOR MILL, MD 21244		·
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 10/03/2025 Name & Address: ADELE SOMMERS 32 BLANCO PL UKIAH, CA 95482	_{\$} 1.36	_{\$} 1.36
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 10/04/2025 Name & Address		
DEBORAH ANDERSON		
7341 SW KINGS FOREST RD TOPEKA, KS 66610	_{\$} 10.00	ູ 10.00
5. If over \$100.00 cumulative, please provide:	*	Ψ
•		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	72.49	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	_1
Page 26 of 31	line 3a of Summary Page.	



1. Committee I.D. Number ____98731

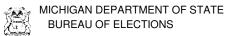
CANDIDATE COMMITTEE

PEOPLE FOR WYNETT GUY

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 all 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 10/04/2025 Name & Address: DENISE BOUBENIDER 21643 BAY PALMS DR KATY, TX 77449 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 10.00	_{\$} 10.00
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/04/2025 Name & Address CHERYL GAMBRELL 29485 WOODHAVEN LN SOUTHFIELD, MI 48076	_{\$} 250.00	§ 250.00
5. If over \$100.00 cumulative, please provide: Occupation UNEMPLOYED Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/05/2025 Name & Address: MARY LEVERNIER 4433 BRISBANE CIR EL DORADO HILLS, CA 95762	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/05/2025 Name & Address WINIFRED COVINTREE 29835 ROCK CREEK DR SOUTHFIELD, MI 48076	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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Page.



1. Committee I.D. Number ____98731

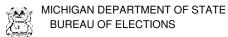
2. Committee Name PEOF

PEOPLE FOR WYNETT GUY

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 10/06/2025 Name & Address: CAROLYN COLE 379 FARMSTEAD LN STATE COLLEGE, PA 16803	_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/06/2025 Name & Address PAUL KIMBALL 706 S PLAIN ST ITHACA, NY 14850	_{\$} 4.54	_{\$} 4.54
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 10/07/2025 Name & Address: ALLEN PETERS 345 VALLEY EL SEGUNDO, CA 90245 5. If over \$100.00 cumulative, please provide:	_{\$} 1.13	_{\$} 1.13
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/07/2025 Name & Address JULIE GIBSON 20208 BOARDWALK BLVD SOUTHFIELD, MI 48075	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1	1
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 28 of 31

Enter this total on line 3a of Summary Page.



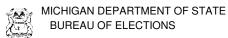
1. Committee I.D. Number ____98731

PEOPLE FOR WYNETT GUY

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 all 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 10/07/2025 Name & Address: STEPH SCHMIDT 25750 DUNBAR ST SOUTHFIELD, MI 48033 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/08/2025 Name & Address MILO TILTON 24687 GLENEYRIE DR SOUTHFIELD, MI 48033	_{\$} 25.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation UNKNOWN Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/09/2025 Name & Address: LYNN RUSSO 65 S BAY DR MASSAPEQUA, NY 11758	_{\$} 4.34	_{\$} 4.34
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/10/2025 Name & Address PATRICIA DINTAMAN 6448 VALE ST ALEXANDRIA, VA 22312	_{\$} 6.52	_{\$} 6.52
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	135.86 Enter this total on line 3a of Summary	

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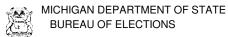
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1. Committee I.D. Number 98731

Committee Name

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 10/11/2025 Name & Address: REBECCA WEISSMAN 30238 SPRING-RIVER DR SOUTHFIELD, MI 48076		_{\$} 18.00	_{\$} 18.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	of Receipt 10/11/2025		
Name & Address JAMES GOESER 929 W FOSTER AVE APT. 1002 CHICAGO, IL 60640 5. If over \$100.00 cumulative, please provide:		_{\$} 4.34	_{\$} 4.34
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a perso	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Da Name & Address: SHADIA MARTINI 1717 HERON RIDGE DR BLOOMFIELD HILLS, MI 48302	of Receipt 10/13/2025	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:			
Occupation REAL ESTATE BROKER Employer SELF			
Business Address 1717 HERON RIDGE DR, BLOOM	FIELD HILLS, MI 48302		
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Da Name & Address DAVID PAVELCHEK 1958 ORCHARD DR NW OLYMPIA, WA 98502	e of Receipt 10/14/2025	_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	127.34	
	Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 30 of 31		line 3a of Summary Page.	



1. Committee I.D. Number 967

98731

CANDIDATE COMMITTEE

2. Committee Name

PEOPLE FOR WYNETT GUY

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 all 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 10/14/2025 Name & Address: BARRY ROGERS 15002 HEATHGATE CT HOUSTON, TX 77062	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/2025 Name & Address CLINT RICHMOND 3 GREENOUGH CIR BROOKLINE, MA 02445	_{\$} 10.00	<u>\$ 10.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/17/2025 Name & Address: MADELYN TUCKER 27165 SHIAWASSEE ST SOUTHFIELD, MI 48033	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/17/2025 Name & Address ELAYNE DEMBY 77 HAVEMEYER LN UNIT 105 STAMFORD, CT 06902 5. If over \$100.00 cumulative, please provide:	_{\$} 4.00	_{\$_} 4.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	34.00 7,037.36 Enter this total on	-

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Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 98731

CANDIDATE COMMITTEE

2. Committee Name PEOPLE FOR WYNETT GUY

OANDIDATE OOMIN			
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 all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. 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: WYNETT GUY 25690 CODE RD SOUTHFIELD, MI 48033 If over \$100.00 cumulative, please provide: Occupation: GOVERNMENT Employer Name & Business Address: CITY OF SOUTHFIELD 26000 EVERGREEN RD, SOUTHFIELD, MI 48076	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description USED TO ORGANIZE, BRAND, AND PUBLICIZE. 5. Date Of Receipt: 04/25/2025 6. Vendor Name & Address: AMAZON 410 TERRY AVE N,	2,000.00	
Fund Raiser Contribution	SEATTLE, WA 98109		
Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide:	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		3
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	C. Bato of Hossipt.		
• •	6. Vendor Name & Address:		
Fund Raiser Contribution	Cl	ick Here for Memo It	temization
	↓□ - · · · · · · · · · · · · · · · · · ·		
Contribution #3 PAC Receipt? Yes Name & Address:	4.	\$	
If over \$100.00 cumulative, please provide:	Description		
Occupation:	Description		
Employer Name & Address:	5. Date Of Receipt:		
Employer Name & Address.	6. Vendor Name & Address:		
Fund Raiser Contribution	Cl	ick Here for Memo II	temization
	Page Subtota	2,000.00	2,000.00
	Grand Total of all Schedules 1-I (Complete on last page of Schedule		
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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 98731

2. Committee Name PEOPLE FOR WYNETT GUY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name HUNTINGTON BANK		05/20/2025	\$ 25.00
Address	Purpose: DEBIT CARD REPLACEMENT RUSH	Date	
24805 W 12 MILE RD			
SOUTHFIELD, MI 48034			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name ACTBLUE		05/20/2025	\$ 30.00
Address	Purpose: ACTBLUE DONATION	Date	
Address LLC P.O. BOX 441146	rurpose		
SOMERVILLE, MA 02144			
COMERTINEE, MATORITIES	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name IPOSTAL1, LLC		05/23/2025	\$ 52.00
Address	Purpose:	Date	· <u>02100</u>
400 RELLA BLVD			
STE 207			
MONTEBELLO, NY 10901	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name BRANDGENESIS		05/30/2025	
DI U II VD GENESIO		Date	\$ 250.00
Address	Purpose: CAMPAIGN WEBSITE	Dale	
16659 WASHBURN ST			
DETROIT, MI 48221			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name MICHIGAN ASSOCIATION OF MUNICIPAL CLERKS		07/00/0005	
	AEEII IATION DEGISTRATION	07/22/2025	\$ 100.00
Address 120 N WASHINGTON SQUARE	Purpose: AFFILIATION REGISTRATION	Date	
LANSING, MI 48933			
2, 113/114, Wil 13300	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
<u> </u>		tal this page	457.00
	Subio	ıaı ıi iiə paye	457.00
	Grand Total of all S		
	(Complete on last page	or scriedule)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 98731

2. Committee Name PEOPLE FOR WYNETT GUY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name LEAGUE OF WOMEN VOTERS		08/01/2025	\$ 150.00
	CANDIDATE REGISTER AND PROFILE	Date	\$ <u>130.00</u>
Address 300 W ST JOSEPH ST	Purpose:		
SUITE 3G	Memo	Itemization Bel	ow
LANSING, MI 48933	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name C&G NEWSPAPERS		08/04/2025	
ORGINEWSI AI LIIG	NEWORADED AD	Date	\$ <u>525.00</u>
Address	Purpose: NEWSPAPER AD	Dale	
13650 E 11 MILE RD			
WARREN, MI 48089			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name THE ORIGINAL PRINT SHOP		08/20/2025	. 001 50
Address	Purpose: PRINTED MATERIAL	Date	\$ <u>291.50</u>
Address 270 S TELEGRAPH RD	Purpose: Tritte With the Title		
PONTIAC, MI 48341			
·	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name ROBOCENT		08/21/2025	
1100000111		Date	\$ <u>150.00</u>
Address	Purpose: DIGITAL TEXTING FEES	Buic	
2129 GENERAL BOOTH BLVD VIRGINIA BEACH, VA 23454			
VINGINIA BEAGN, VA 23434			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name ROBOCENT		08/26/2025	
Address	DIGITAL MEDIA TEXTING SERVICES Purpose:	Date	\$ <u>600.00</u>
2129 GENERAL BOOTH BLVD	Turpose.		
VIRGINIA BEACH, VA 23454			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtot	al this page	1,716.50
	Grand Total of all S	Schedules 1B	•
	(Complete on last page		

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number ____98731

2. Committee Name PEOPLE FOR WYNETT GUY

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name REIMOLD PRINTING Address 5171 BLACKBEAK DR SAGINAW, MI 48604	Purpose: HANDOUTS AND YARD SIGNS Memo	08/28/2025 Date Itemization Be	\$ 1,471.43
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name THE ORIGINAL PRINT SHOP	VADD GIONG & BUGINESOS GADDO	09/15/2025 Date	\$ <u>817.26</u>
Address 270 S TELEGRAPH RD PONTIAC, MI 48341	Purpose: YARD SIGNS & BUSINESS CARDS	24.0	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name THE ORIGINAL PRINT SHOP	VADD SIGNS	09/29/2025 Date	\$ <u>710.20</u>
270 S TELEGRAPH RD PONTIAC, MI 48341	Purpose: YARD SIGNS	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name STRIPE		10/19/2025	\$ 34.49
Address 354 OYSTER POINT BLVD	Purpose: MERCHANT SERVICES PROCESSOR	Date	
SOUTH SAN FRANCISCO, CA 94080	Memo Check box if this expenditure is payment of	Itemization Bel	OW
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5 Name ACTBLUE	MEDOLIANT FEE	10/19/2025	\$ 13 .04
Address LLC P.O. BOX 441146 SOMERVILLE, MA 02144		Date Itemization Bel	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	3,046.42

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

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number ____98731

2. Committee Name PEOPLE FOR WYNETT GUY **CANDIDATE COMMITTEE**

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Check	mittee OR b. Debt	s and obligations owed <u>to</u> ourpose checked.)	or forgiven <u>by</u> the cor	mmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: JOHNATHAN D GUY	4. Type: IOU TO MAKE NECESSARY CAMPA 5. Date Debt Was Incurred:	\$		
25690 CODE RD				
SOUTHFIELD, MI 48033	04/25/2025	\$	\$ 0.00	\$ 4,000.00
	6. Original Amount of Debt	\$	\$ 0.00	Φ
	s 4,000.00	Ψ		FORGIVEN
	,	\$	1	🖵
If bank loan, name of endorser or guarantor:		Am	nount Endorsed: \$ $\frac{4}{}$	-000
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Debt #3 Corp? Yes				
Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	<u> </u>		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtota	al (Outstanding debt)	4,000.00
(C	omplete on last page of Schedule s	Grand Tota showing amounts owed by	I of all Schedules 1E or to the committee)	4,000.00
(-		<u> </u>	/.	Enter this total

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

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

Page 1 of 1



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

	- USE A SEPARATE SHI	EET FOR EACH EVENT -		
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. PEBBLE CREEK PARK	
09/21/2025	20	MEET THE CANDIDATE PICNIC	26300 AMERICAN DR SOUTHFIELD, MI 480 Private Residence	
Total Contributions	325.00			
Other Receipts	275.00			
Gross Receipts (Add lines 7 a	and 8) 600.00			
 Total Cost of Event Total Cost includes In-Kind Cor 	333.77 and All Expenditures	Made For the Event)		
1. Check if event was a joi	int fund raiser and complete the	following:		
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)	
	<u> </u>			

- 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.

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Page		of I	