



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number 98765		3. This Statement covers From: <u>7/20/2025</u> to <u>10/19/2025</u>	
2. Committee Name Committee to elect Scott Tinlin		4. Candidate Last Name <u>Tinlin</u> First Name <u>Scott</u> M.I. <u>A</u> 4a. Office Sought Including District # or Community Served (If applicable) Clawson City Council Person, Oakland County 4b. County of Residence OAKLAND	
5. Committee's Mailing Address 1095 Key West Drive Clawson, MI 48017 Area Code and Phone <u>248-585-6469</u> 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 Scott Tinlin 1095 Key West Clawson, MI Area Code & Phone <u>716-307-3153</u>	
7. Treasurer's Business Address 1095 Key West Drive Clawson, MI 48017 Area Code and Phone <u>716-307-3153</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) No record keeper defined in Committee. Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. ☒ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☐ Primary ☒ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus <u>11/04/2025</u>		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☒ October Quarterly 9c. ☐ Annual Statement (_____) Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. Dissolution of Candidate Committee ☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper <u>Scott A Tinlin</u> Type or Print Name		<u>[Signature]</u> Date <u>11/26/2025</u> Signature	
Candidate <u>Scott A Tinlin</u> Type or Print Name		<u>[Signature]</u> Date <u>11/26/2025</u> Signature	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 98765

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to elect Scott Tinlin

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>5767.98</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>5767.98</u>	(18.) \$ <u>5767.98</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>5767.98</u>	(20.) \$ <u>5767.98</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u></u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u></u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>5645.48</u>	(23.) \$ <u>5645.48</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>5767.98</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>5767.98</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>5645.48</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>122.50</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____
2. Committee Name Committee to elect Scott Tinlin

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>10/19/2025</u> Name & Address: <u>Scott Tinlin</u> <u>1095 Key West Drive</u> <u>Clawson, MI 48017</u>		\$ <u>5767.98</u>	\$ <u>5767.98</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>Syensqo-Cytec</u> Business Address <u>2564 US Highway 1, Lawrence NJ, 08648</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
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		Click Here for Memo Itemization	
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		Click Here for Memo Itemization	
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		Click Here for Memo Itemization	

Page Subtotal 5767.98

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 5767.98



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 98765
2. Committee Name Committee to elect Scott Tinlin

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>C&G Publishing</u> Address <u>13650 E Eleven Mile Road</u> <u>Warren, MI 48089</u> ☐ Fund Raiser	Purpose: <u>Newspaper ad sticker</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/2025</u> Date	\$ <u>892.82</u>
Expenditure #2 Name <u>C&G Publishing</u> Address <u>13650 E Eleven Mile Road</u> <u>Warren, MI 48089</u> ☐ Fund Raiser	Purpose: <u>Newspaper ad & mailings</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2025</u> Date	\$ <u>2125.66</u>
Expenditure #3 Name <u>Vista Print</u> Address <u>275 Wyman Street, Waltham, Massachusetts</u> <u>02451</u> ☐ Fund Raiser	Purpose: <u>Door Hangers & Handouts</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/2025</u> Date	\$ <u>627.96</u>
Expenditure #4 Name <u>Crazy Cheap Political Signs</u> Address <u>11525A Stonehollow Dr., Suite 120, Austin,</u> <u>TX 78758</u> ☐ Fund Raiser	Purpose: <u>Lawn Signs</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/2025</u> Date	\$ <u>450.29</u>
Expenditure #5 Name <u>Consult One</u> Address <u>1886 Cass Blvd</u> <u>Berkley, MI 48072</u> ☐ Fund Raiser	Purpose: <u>Marketing & Website</u> Memo Itemization Below ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/2025</u> Date	\$ <u>1548.75</u>

Subtotal this page 5645.48

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 5645.48

Enter this total
on line 8a of
Summary Page