MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
24 JUL 2026 PM 04:02
OAKLAND COUNTY CLERK
PONTIAC, MICHIGAN

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE COVER PAGE

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

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

1. Committee I.D. Number
97181

2. Committee Name
KAREN MCDONALD FOR PROSECUTOR

4. Candidate Last Name: MCDONALD First Name: KAREN M.I.: D

4a. Office Sought Including District # or Community Served (If applicable)
COUNTY PROSECUTOR, OAKLAND COUNTY

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

5. Committee's Mailing Address
PO BOX 1750
STE. 100
BIRMINGHAM, MI 48009

Area Code and Phone (248) 229-5339
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
SUSAN LICHTERMAN
26080 YORK
HUNTINGTON WOODS, MI 48070

Area Code & Phone (248) 351-3000

7. Treasurer's Business Address
26080 YORK
HUNTINGTON WOODS, MI 48070

Area Code and Phone (248) 351-3000

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone () -

9. **TYPE OF STATEMENT**

9a. ☐ Pre-Election **OR** 9b. ☒ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☐ Primary
- ☒ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus
11/05/2024

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (.) Coverage Year

9d. ☒ Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding 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 _____ / _____ Submitted electronically, signature on file Date 07/24/2026
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date 07/24/2026
Type or Print Name Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 97181

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	62,859.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	62,859.00	(18.) $ 966,450.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	62,859.00	(20.) $ 966,450.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	3,380.00	(21.) $ 40,098.78
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0.00	(22.) $ 0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	182,740.16	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	182,740.16	(23.) $ 867,018.67
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0.00	(24.) $ 0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	0.00	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	266,259.34
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	62,859.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	329,118.34
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	182,740.16
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	146,378.18 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
WENDY APPLETON
12935 VICTORIA AVE
HUNTINGTON WOODS, MI 48070

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 12935 VICTORIA AVE, HUNTINGTON WOODS, MI 48070

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
MICHAEL BAUER
28932 LAKE PARK DR
FARMINGTON HILLS, MI 48331

$50.00 $350.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 28932 LAKE PARK DR, FARMINGTON HILLS, MI 48331

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
JUDY BELL
8558 HUNTINGTON RD
HUNTINGTON WOODS, MI 48070

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 8558 HUNTINGTON RD, HUNTINGTON WOODS, MI 48070

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
RONALD BELLISARIO
591 FLORA VALLEY CT
ROCHESTER HILLS, MI 48307

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation PHYSICIAN Employer SELF EMPLOYED

Business Address 2940 CROOKS RD, ROCHESTER HILLS, MI 48309

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 200.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
TERRY BELTRAN
7064 OAK MEADOWS DR
CLARKSTON VLG, MI 48348

$5.00 | $5.00

5. If over $100.00 cumulative, please provide:

Occupation MULTICULTURAL ENTERPRISE SPECIALIST Employer BELTRAN MEDIA

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
BARRY BRICKNER
35021 OLD HOMESTEAD DR
FARMINGTON HILLS, MI 48335

$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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
SUSAN BROWN
26141 STEELE RD
FARMINGTON HILLS, MI 48331

$1.00 | $1.00

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 10/21/2024

Name & Address
JOHN COLINA
27081 E RIVER RD
GROSSE ILE, MI 48138

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 27081 E RIVER RD, MI 48138

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 116.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
EMILY CORD-DUTHINH
7020 PENINSULA CT
CLARKSTON VLG, MI 48346

$100.00 $180.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 7020 PENINSULA CT, CLARKSTON, MI 48346

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
DANIELLE DEWITT
100 MICHIGAN ST NE
GRAND RAPIDS, MI 49503

$50.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation FOUNDATION SPECIALIST Employer COREWELL HEALTH

Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
PAMELA ESSER
5215 WAYFIND LN
BLOOMFIELD HILLS, MI 48302

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 5215 WAYFIND LN, BLOOMFIELD HILLS, MI 48302

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
CONNOR FERRICK
1926 CRAGIN DR
BLOOMFIELD HILLS, MI 48302

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer CONNOR & CONNOR LAW PLLC

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 750.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
BARBARA FOSTER
6740 RIDGEFIELD CIR
WEST BLOOMFIELD, MI 48322

$ 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 10/21/2024

Name & Address
SHERYL GALLIGAN
1584 SODON LAKE DR
BLOOMFIELD HILLS, MI 48302

$ 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
KATHLEEN GIANCARLO
760 GRAND MARAIS ST
GROSSE POINTE PARK, MI 48230

$ 100.00 $ 330.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 760 GRAND MARAIS ST, GROSSE POINTE PARK, MI 48230

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
AMY GIERHART
118 OAK RIDGE DR
CARO, MI 48723

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation TUSCOLA COUNTY GOVERNMENT Employer CIRCUIT COURT JUDGE

Business Address 444 N STATE ST #1, CARO, MI 48723

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 220.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
PHYLLIS GOOGASIAN
3750 ORION RD
OAKLAND, MI 48363

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 3750 ORION RD, OAKLAND, MI 48363

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
MILT GREENMAN
6489 ALDEN DR
WEST BLOOMFIELD, MI 48324

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer SAM BERNSTEIN LAW FIRM

Business Address 31731 NORTHWESTERN HWY, FARMINGTON HILLS, MI 48334

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
ROBERT JOHNCOX
21401 CONCORD ST
SOUTHFIELD, MI 48076

$ 40.00 $ 320.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 21401 CONCORD ST, SOUTHFIELD, MI 48076

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
MARILYN JONES-WILSON
22185 SUSSEX ST
OAK PARK, MI 48237

$ 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

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Page Subtotal 815.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
DANIEL LEMISCH
8616 NADINE AVE
HUNTINGTON WOODS, MI 48070

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation GENERAL COUNSEL Employer LAKEVIEW CAPITAL, INC.

Business Address 151 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
MARGO LESSER
1044 N GLENHURST DR
BIRMINGHAM, MI 48009

$25.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1044 N GLENHURST DR, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
AMANDA MASON
216 N KENWOOD AVE
ROYAL OAK, MI 48067

$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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
BOB MCDONALD
12176 MADONNA DR
LANSING, MI 48917

$250.00 | $250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 12176 MADONNA DR, LANSING, MI 48917

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 425.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
DONNA MEDINA
6720 BLUE SPRUCE CT
WEST BLOOMFIELD, MI 48324

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WILLIAMS, WILLIAMS, RATTNER & PLUNKETT, P. C.

Business Address 380 N OLD WOODWARD AVE, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
ROBERT MIELKE
1743 SNOWDEN CIR
ROCHESTER HILLS, MI 48306

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOLOGIST Employer MIELKE & WEEKS

Business Address 1880 STAR-BATT DR, ROCHESTER HILLS, MI 48309

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address:
RAMACHANDRAN NAIR
36846 TANGLEWOOD LN
FARMINGTON HILLS, MI 48331

$ 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 10/21/2024

Name & Address
ROBERT NOVY
630 POINTE DR
WALLED LAKE, MI 48390

$ 50.00 $ 650.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer OAKLAND COUNTY

Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341

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)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
BRENDA OHRYN
3340 GRANT RD
ROCHESTER HILLS, MI 48309

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation ASSISTANT PROSECUTING ATTORNEY Employer OAKLAND COUNTY

Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
JESSICA PARUCH
22 OAKDALE BLVD
PLEASANT RIDGE, MI 48069

$ 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 10/21/2024

Name & Address:
DIANE ROULSTON
2120 NEEDHAM RD
ANN ARBOR, MI 48104

$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/21/2024

Name & Address
ROGER SAYLOR
300 E LONG LAKE RD
BLOOMFIELD HILLS, MI 48304

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ACCOUNT EXECUTIVE Employer FIRST AMERICAN TITLE

Business Address 300 E LONG LAKE RD, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 385.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/21/2024

Name & Address:
CRAIG TROMBLEY
2355 DELAWARE DR
ANN ARBOR, MI 48103

$ 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 10/22/2024

Name & Address
DAVID GORCYCA
6608 TREE KNOLL DR
TROY, MI 48098

$ 100.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer GMH PC

Business Address 101 W BIG BEAVER RD, TROY, MI 48084

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/22/2024

Name & Address:
DEBORAH LOBRING
410 OAK RUN CT
ROYAL OAK, MI 48073

$ 25.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 410 OAK RUN CT, ROYAL OAK, MI 48073

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/22/2024

Name & Address
RYAN MCKINDLES
279 WING CT
NORTHVILLE, MI 48167

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation ENTREPRENEUR Employer HEALTHRISE

Business Address 31700 MIDDLEBELT RD, FARMINGTON HILLS, MI 48334

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/22/2024

Name & Address:
CLIFTON ROESLER
31080 STAFFORD ST
BEVERLY HILLS, MI 48025

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation PRINCIPAL Employer ANGLE ADVISORS

Business Address 101 SOUTHFIELD RD, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/22/2024

Name & Address
SALVATORE VITALE
716 E FARNUM AVE
ROYAL OAK, MI 48067

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 716 E FARNUM AVE, ROYAL OAK, MI 48067

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/23/2024

Name & Address:
EDWIN LUKAS
64 WOODLAND SHORE DR
GROSSE POINTE SHORES, MI 48236

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer VISTULA PLC

Business Address 100 MAPLE PARK BLVD #110, ST CLAIR SHORES, MI 48081

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/23/2024

Name & Address
KRISTINA MARITCZAK
3621 N 26TH ST
TACOMA, WA 98407

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation SHAREHOLDER Employer BUCHALTER

Business Address 1420 5TH AVE STE. 3100, SEATTLE, WA 98101

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 500.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 10/25/2024

Name & Address:
DAVID DEMUTH
1475 EPPING LN
BLOOMFIELD HILLS, MI 48304

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1475 EPPING LN, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/25/2024

Name & Address
ROBERT JOHNCOX
21401 CONCORD ST
SOUTHFIELD, MI 48076

$ 40.00 $ 360.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 21401 CONCORD ST, SOUTHFIELD, MI 48076

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/26/2024

Name & Address:
JOHN ANGOTT
1902 N CONNECTICUT AVE
ROYAL OAK, MI 48073

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer THE LEGAL PUGILISTS

Business Address 1902 N CONNECTICUT AVE, ROYAL OAK, MI 48073

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/26/2024

Name & Address
MOTHER BADALUCCO
1440 OTTER DR
ROCHESTER HILLS, MI 48306

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer FOSTER SWIFT

Business Address 28411 NORTHWESTERN HWY, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 440.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/26/2024

Name & Address:
ROBIN FENBERG
350 N OLD WOODWARD AVE
STE 100
BIRMINGHAM, MI 48009

$ 100.00 $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation CFO Employer STRENGTH CAPITAL PARTNERS

Business Address 350 N OLD WOODWARD AVE, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/26/2024

Name & Address
LIZA GORDON
759 WOODDALE RD
BLOOMFIELD HILLS, MI 48301

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer SELF

Business Address 759 WOODDALE RD, BLOOMFIELD HILLS, MI 48301

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/26/2024

Name & Address:
LAWRENCE GUELDUM
530 W SARATOGA ST
FERNDALE, MI 48220

$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/26/2024

Name & Address
MADELENE KEPES
6982 PEBBLE CREEK WOODS DR
WEST BLOOMFIELD, MI 48322

$ 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 370.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/29/2024

Name & Address:
MICHAEL SENESKI
608 OAK AVE
BIRMINGHAM, MI 48009

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation CFO Employer CREDIBLY

Business Address 25200 TELEGRAPH RD, SOUTHFIELD, MI 48033

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/30/2024

Name & Address
FARMINGTON DEMOCRATIC CLUB
28825 SALEM
FARMINGTON HILLS, MI 48334

$ 400.00 | $ 400.00

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 10/30/2024

Name & Address:
JACK KRAMER
32400 ROCKRIDGE LANE
FARMINGTON HILLS, MI 48334

$ 250.00 | $ 2,850.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer SELF

Business Address 1900 W BIG BEAVER RD, TROY, MI 48084

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/30/2024

Name & Address
JASON RAZNICK
1 CAMPUS MARTIUS
DETROIT, MI 48226

$ 250.00 | $ 1,750.00

5. If over $100.00 cumulative, please provide:

Occupation MEDIA Employer BENZINGA

Business Address 1 CAMPUS MARTIUS, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,000.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/31/2024

Name & Address:
MARGO LESSER
1044 N GLENHURST DR
BIRMINGHAM, MI 48009

$ 25.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1044 N GLENHURST DR, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/31/2024

Name & Address
MICHAEL SOLNER
595 ARGYLE ST
BIRMINGHAM, MI 48009

$ 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 10/31/2024

Name & Address:
ANDREW STARR
79 BROOKFIELD DR
OXFORD, MI 48371

$ 100.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer OAKLAND COUNTY

Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/31/2024

Name & Address
DAVID STEINBERG
6759 COURCELLES
WEST BLOOMFIELD, MI 48322

$ 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 200.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/31/2024

Name & Address:
CLAY THOMAS
4427 BARCHESTER DR
BLOOMFIELD HILLS, MI 48302

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation CFO Employer J.B. DONALDSON COMPANY

Business Address 37610 HILLS TECH DR, FARMINGTON HILLS, MI 48331

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/31/2024

Name & Address
ROBERT VANWERT
17344 LOCHERBIE AVE
BEVERLY HILLS, MI 48025

$ 25.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 17344 LOCHERBIE AVE, FRANKLIN, MI 48025

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/31/2024

Name & Address:
SETH GOLDEN
5185 LONGMEADOW RD
BLOOMFIELD HILLS, MI 48304

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer SEE EYEWEAR

Business Address 160 S OLD WOODWARD AVE, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/01/2024

Name & Address
JUILE CAPP
27446 CRANBROOK DR
FARMINGTON HILLS, MI 48336

$ 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

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Page Subtotal 635.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/01/2024

Name & Address:
MARGARET CARMEN
6949 N FAIRWAYS DR
CLARKSTON VLG, MI 48348

$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 11/01/2024

Name & Address
JUDITH DITTMAN
5660 PAGLIA CT
STERLING HEIGHTS, MI 48310

$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 11/01/2024

Name & Address:
SARA LEVITSKY
2673 BRADWAY BLVD
BLOOMFIELD VILLAGE, MI 48301

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation LMSW Employer BIRMINGHAM COUNSELING FOR WOMEN AND GIRLS

Business Address 199 W BROWN ST, SUITE 200, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/01/2024

Name & Address
LOUISE LIEBERMAN
29869 SOUTHBROOK ST
FARMINGTON HILLS, MI 48334

$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 145.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/01/2024

Name & Address:
LAURA MONTAGUE
928 SCHOOL ST
CLAWSON, MI 48017

$15.00 | $15.00

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 11/01/2024

Name & Address
SHANNON O'BRIEN
1309 NORTHWOOD BLVD
ROYAL OAK, MI 48073

$50.00 | $350.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer OAKLAND COUNTY

Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/01/2024

Name & Address:
ROBIN PRESLEY
19298 W ELEVEN MILE RD
LATHRUP VILLAGE, MI 48076

$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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/01/2024

Name & Address
CHUCK SEIGERMAN
5925 PINECROFT DR
WEST BLOOMFIELD TOWNSHIP, MI 48322

$100.00 | $300.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOLOGIST Employer SELF

Business Address 5925 PINECROFT DR, WEST BLOOMFIELD TOWNSHIP, MI 48322

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 175.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 11/01/2024

Name & Address:
ROSANNE THOMAS
1501 DEERHURST LN
ROCHESTER HILLS, MI 48307

$ 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 11/02/2024

Name & Address
CHRIS BROCHERT
38500 WOODWARD AVE
BLOOMFIELD HILLS, MI 48304

$ 100.00 | $ 2,100.00

5. If over $100.00 cumulative, please provide:

Occupation PARTNER Employer LORMAX STERN

Business Address 38500 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/02/2024

Name & Address:
SUSAN BROWN
26141 STEELE RD
FARMINGTON HILLS, MI 48331

$ 3.00 | $ 4.00

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 11/02/2024

Name & Address
ROBERT BRUTTELL
26896 YORK RD
HUNTINGTON WOODS, MI 48070

$ 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 163.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/02/2024

Name & Address:
JIM BUSH
2757 WARWICK DR
BLOOMFIELD HILLS, MI 48304

$ 25.00 $ 120.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2757 WARWICK DR, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/02/2024

Name & Address
BETH GREENBERG MORROW
18672 OAK DR
DETROIT, MI 48221

$ 250.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer SELF EMPLOYED

Business Address 18672 OAK DR, DETROIT, MI 48221

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/02/2024

Name & Address:
JEFFREY HILL
285 HIGHLAND AVE
BLOOMFIELD HILLS, MI 48302

$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/02/2024

Name & Address
MARILYN JONES-WILSON
22185 SUSSEX ST
OAK PARK, MI 48237

$ 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

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Page Subtotal 295.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/02/2024

Name & Address:
KELLY RANKIN
866 GRANDVIEW AVE
KALAMAZOO, MI 49001

$ 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 11/02/2024

Name & Address
CLAUDIA SILLS
120 HAWTHORNE ST
BIRMINGHAM, MI 48009

$ 250.00 $ 900.00

5. If over $100.00 cumulative, please provide:

Occupation INVESTOR Employer FIRST HOLDING

Business Address 6960 ORCHARD LAKE RD, 300, WEST BLOOMFIELD TOWNSHIP, MI 48322

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/02/2024

Name & Address:
BRIAN SHANNON
20165 N GREENWAY DR
SOUTHFIELD, MI 48076

$ 50.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer TAFT LAW

Business Address 27777 FRANKLIN RD, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
ROGER BASMAJIAN
280 W DRAYTON
FERNDALE, MI 48220

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation REAL ESTATE DEVELOPER Employer BASCO

Business Address 607 SHELBY ST, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 810.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/04/2024

Name & Address:
KRISTIANA BOUTELL
2003 N VERMONT AVE
ROYAL OAK, MI 48073

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer TAFT LAW

Business Address 27777 FRANKLIN RD, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
MARCUS CONNOR
2964 MASEFIELD ST
BLOOMFIELD HILLS, MI 48304

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer LAW FIRM OF JOHN F SCHAEFER

Business Address 380 N WOODWARD AVE, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address:
ANTONIO CUTRARO
972 RANKIN ST
TROY, MI 48083

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer SELF EMPLOYED

Business Address 972 RANKIN ST, TROY, MI 48083

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
JUSTIN ELIAS
4330 S LAKE LN
SHELBY TWP, MI 48316

$500.00 $1,500.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer PUFF CANABIS

Business Address 2 AJAX DR, MADISON HEIGHTS, MI 48071

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

Page Subtotal 2,000.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/04/2024

Name & Address:
DAVID FARBMAN
5648 LANE LAKE RD
BLOOMFIELD HILLS, MI 48302

$ 6,000.00 $ 8,500.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer FARBMAN GROUP

Business Address 28400 NORTHWESTERN HWY, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
DAVID FARIDA
322 GLENHURST BLVD
ROCHESTER HILLS, MI 48307

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer WINE BARON

Business Address 322 GLENHURST BLVD, ROCHESTER HILLS, MI 48307

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address:
MARC GARDNER
250 STEPHENSON HWY
TROY, MI 48083

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ADVISOR Employer LIGHTHOUSE WEALTH ADVISORS

Business Address 39533 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
ANDREW GUTMAN
28400 NORTHWESTERN HWY
STE. 400
SOUTHFIELD, MI 48034

$ 1,000.00 $ 3,500.00

5. If over $100.00 cumulative, please provide:

Occupation REAL ESTATE Employer FARBMAN GROUP

Business Address 28400 NORTHWESTERN HWY, STE. 400, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 8,500.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/04/2024

Name & Address:
NICKOLAS HANNAWA
2909 E BIG BEAVER RD
TROY, MI 48083

$ 500.00 $ 3,200.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer HANNAWA HIRMIZ LAW PLLC

Business Address 2909 E BIG BEAVER RD, TROY, MI 48083

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
FAWWAZ JARBOU
812 S MAIN ST
200
ROYAL OAK, MI 48067

$ 500.00 $ 750.00

5. If over $100.00 cumulative, please provide:

Occupation REAL ESTATE Employer SYMMETRY PROPERTY

Business Address 4198 ORCHARD LAKE RD, 250, WEST BLOOMFIELD TOWNSHIP, MI 48323

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address:
JOHN MCLAREN
10023 APPLEGATE LN
BRIGHTON, MI 48114

$ 1,000.00 $ 2,000.00

5. If over $100.00 cumulative, please provide:

Occupation EXECUTIVE Employer SUN COMMUNITIES

Business Address 27777 FRANKLIN RD, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
DINO ROTONDO
6824 HALYARD RD
BLOOMFIELD HILLS, MI 48301

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING Employer SELF

Business Address 6824 HALYARD RD, BLOOMFIELD HILLS, MI 48301

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 2,500.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/04/2024

Name & Address:
RAE RUDDY
2035 EAGLE POINTE
BLOOMFIELD HILLS, MI 48304

$ 25.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2035 EAGLE POINTE, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address
GARY SHIFFMAN
6212 BROMLEY CT
WEST BLOOMFIELD, MI 48322

$ 5,000.00 $ 5,000.00

5. If over $100.00 cumulative, please provide:

Occupation CEO Employer SUN COMMUNITIES

Business Address 27777 FRANKLIN RD, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address:
LYDIA SITTO
4989 STONELEIGH RD
BLOOMFIELD HILLS, MI 48302

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation COO Employer ATM OF AMERICA

Business Address 4989 STONELEIGH RD, BLOOMFIELD HILLS, MI 48302

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 11/04/2024

Name & Address
UAW MICHIGAN V-PAC
8000 E JEFFERSON AVE
DETROIT, MI 48214

$ 10,000.00 $ 10,000.00

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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Page Subtotal 15,525.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/04/2024

Name & Address:
UWM PAC
585 S BLVD E
PONTIAC, MI 48341

$ 1,500.00 $ 1,500.00

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 11/04/2024

Name & Address
SARAH WINKLER
1000 SHIRLEY RD
BIRMINGHAM, MI 48009

$ 750.00 $ 775.00

5. If over $100.00 cumulative, please provide:

Occupation ARTISTIC DIRECTOR Employer DETROIT PUBLIC THEATRE

Business Address 684 W BALTIMORE ST, DETROIT, MI 48202

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/04/2024

Name & Address:
LAITH YALDOO
1000 CONTINENTAL DR
KING OF PRUSSIA, PA 19406

$ 5,000.00 $ 6,612.40

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL TRANSACTION SERVICES Employer CARDCONNECT

Business Address 1000 CONTINENTAL DR, KING OF PRUSSIA, PA 19406

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address
DENISE JACOB
26800 IRVING RD
FRANKLIN, MI 48025

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 26800 IRVING RD, FRANKLIN, MI 48025

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 7,750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number: 97181

2. Committee Name: KAREN MCDONALD FOR PROSECUTOR

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 11/05/2024

Name & Address:
MICHAEL JACOBSON
260 JOYCE CT
BLOOMFIELD HILLS, MI 48304

$ 1,000.00 $ 1,500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer TAFT LAW

Business Address 27777 FRANKLIN RD, SOUTHFIELD, MI 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address
RAY JIHAD
30482 WOODWARD AVE
ROYAL OAK, MI 48073

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer TARGET SPORTS

Business Address 30482 WOODWARD AVE, ROYAL OAK, MI 48073

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address:
GARY LEWIS
41000 WOODWARD AVE
BLOOMFIELD HILLS, MI 48304

$ 1,000.00 $ 3,000.00

5. If over $100.00 cumulative, please provide:

Occupation INVESTMENT BANKER Employer CASCADE PARTNERS LLC

Business Address 41000 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address
ELIZABETH LUCKENBACH
320 HAMILTON RD
BLOOMFIELD HILLS, MI 48301

$ 1,000.00 $ 2,750.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer DICKINSON WRIGHT

Business Address 2600 W BIG BEAVER RD, TROY, MI 48084

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 3,500.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/05/2024

Name & Address:
ADAM MITCHELL
55 W MAPLE RD
BIRMINGHAM, MI 48009

$ 7,000.00 $ 7,000.00

5. If over $100.00 cumulative, please provide:

Occupation ENTREPRENEUR Employer MITCHELL FAMILY OFFICE

Business Address 55 W MAPLE RD, BIRMINGHAM, MI 48009

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address
RENEE ROTH
2047 LONG LAKE SHORE DR
WEST BLOOMFIELD, MI 48323

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation COMMERCIAL REAL ESTATE Employer HILLSIDE INVESTMENTS

Business Address 2047 LONG LAKE SHORE DR, WEST BLOOMFIELD, MI 48323

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/06/2024

Name & Address:
NEISHA CHUDLER
2410 AVONDALE ST W
SYLVAN LAKE, MI 48320

$ 15.00 $ 680.00

5. If over $100.00 cumulative, please provide:

Occupation PARALEGAL Employer OAKLAND COUNTY PROSECUTOR'S OFFICE

Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/06/2024

Name & Address
CHRISTINE FARRUG
INFORMATION REQUESTED
ROCHESTER, MI 48307

$ 10.00 $ 17.00

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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Page Subtotal 8,025.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 11/06/2024

Name & Address:
RANDY WERTHEIMER
27130 WELLINGTON RD
FRANKLIN, MI 48025

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation PARTNER Employer HUNTER PASTEUR

Business Address 27130 WELLINGTON RD, FRANKLIN, MI 48025

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/13/2024

Name & Address
SABAH AMMOURI
265 LOWELL CT
BLOOMFIELD HILLS, MI 48304

$ 3,000.00 $ 6,880.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer ATM OF AMERICA

Business Address 24911 JOHN R RD, HAZEL PARK, MI 48030

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 11/23/2024

Name & Address:
DEBORAH LOBRING
410 OAK RUN CT
ROYAL OAK, MI 48073

$ 25.00 $ 325.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 410 OAK RUN CT, ROYAL OAK, MI 48073

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 11/24/2024

Name & Address
ARTHUR WEISS
30120 WESTGATE RD
FARMINGTON HILLS, MI 48334

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer TAFT LAW

Business Address 1 WOODWARD AVE, STE. 2400, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 4,525.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

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 10/31/2024

Name & Address:
PERRY KARDASIS
3701 PIEDMONTE DR
ROCHESTER, MI 48306

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation HR VP Employer TENNECO

Business Address 3701 PIEDMONTE DR, ROCHESTER, MI 48306

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/05/2024

Name & Address
MICHAEL HERMIZ
3663 PICCADILLY DR
ROCHESTER, MI 48309

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation BUSINESS OWNER Employer TERRA CAPITAL INDUSTRIES, LLC

Business Address 47331 CAYLEE CT, SHELBY TOWNSHIP, MI 48315

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address:

$ $

Click Here for Memo Itemization

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

$ $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal	550.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	62,859.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CYCLE STRATEGIES Address 2222 W GRAND RIVER AVE STE. A MERIDIAN TWP, MI 48864 ☐ Fund Raiser	Purpose: CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/11/2024 Date	$ 16,396.94
Expenditure #2 Name GO DADDY Address 2155 E GODADDY WAY TEMPE, AZ 85284 ☐ Fund Raiser	Purpose: DOMAIN RENEWAL ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/12/2024 Date	$ 400.77
Expenditure #3 Name OAKLAND COUNTY TIMES Address PO BOX 20293 FERNDALE, MI 48220 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/15/2024 Date	$ 200.00
Expenditure #4 Name CLARK HILL Address 500 WOODWARD AVE 3500 DETROIT, MI 48226 ☐ Fund Raiser	Purpose: LEGAL SERVICES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/22/2024 Date	$ 3,201.50
Expenditure #5 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: MERCHANT FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/31/2024 Date	$ 2,609.44

Subtotal this page	22,808.65
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 97181

2. Committee Name KAREN MCDONALD FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name COMERICA Address 188 N OLD WOODWARD AVE BIRMINGHAM, MI 48009 ☐ Fund Raiser	Purpose: BANK FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/14/2024 Date	$ 56.05
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: MERCHANT FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/25/2024 Date	$ 102.10
Expenditure #3 Name ACTBLUE Address PO BOX 441146 SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: MERCHANT FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/25/2024 Date	$ 65.26
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	$
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	$

Subtotal this page	223.41
Grand Total of all Schedules 1B (Complete on last page of Schedule)	182,740.16

Enter this total on line 8a of Summary Page