

BEFORE THE
FEDERAL ELECTION COMMISSION

RECEIVED
FEC MAIL CENTER
JUN 17 P 3 41

In the matter of:

Switalski for Congress,

Michael Switalski, as treasurer, and

MUR 6198

Committee to Elect
Michael Switalski State Senator.

COMPLAINT

Rec'd Circ
JUN 18 2009
10:03a

There is reason to believe that the Committee to Elect Michael Switalski State Senator, Switalski for Congress, and Michael Switalski, as treasurer, violated Federal election law when State Senator Michael Switalski used his non-federal state senate campaign committee to finance the costs of the event at which Mr. Switalski announced he was a Federal candidate.

1. This complaint is filed with the Federal Election Commission (the "FEC") in accordance with the provisions of 2 U.S.C. §437g(a)(1) in the belief that Switalski for Congress, Michael Switalski, as treasurer, and Michael Switalski for State Senate violated provisions of the Federal Election Campaign Act of 1971, as amended, 2 U.S.C. §431 et seq. (the "Act"), and FEC regulations, 11 C.F.R. §100.1 et seq.
2. A payment of costs to sponsor and finance public appearances by candidates for Federal office that are "campaign related" is considered "made for the purpose of influencing Federal elections" and constitutes a "contribution" or "expenditure" on behalf of such candidates. FEC Advisory Opinions 1986-37, 1986-26 and 1988-22.
3. An event is "campaign related" if the event involves (i) the solicitation, making or acceptance of contributions to the Federal candidate's campaign, or (ii) communications expressly advocating the nomination or election of a Federal candidate. FEC Advisory Opinions 1988-27, 1992-6, 1994-15, and 1996-11.
4. Term-limited State Senator Michael Switalski used his state senate campaign fund, the Committee to Elect Michael Switalski State Senator, to pay for the campaign event at which Mr. Switalski publicly announced he was a Federal candidate.

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5. A non-federal committee is prohibited from making contributions to any Federal candidate in excess of \$2,400 per election. 2 U.S.C. §441a(a)(1)(A).
 6. A non-federal committee is required to register with the Federal Election Commission as a Federal political committee if it makes contributions or expenditures for the purpose of influencing any election for Federal office aggregating in excess of \$1,000 during a calendar year. 2 U.S.C. §431(4)(A).

The Michael O'Switalski Irish Party held on March 21, 2009 was a Federal campaign event.

7. On March 21, 2009, Mr. Switalski publicly announced he was a Federal candidate at his annual Michael O'Switalski Irish Party (the "Switalski Federal Candidate Announcement Event") paid for by a non-federal committee.
8. The Commission has determined an event is Federal campaign related if it involves communications expressly advocating the nomination or election a Federal candidate. FEC Advisory Opinions 1988-27, 1992-6, 1994-15, and 1996-11.
9. The Switalski for Congress website, www.switalskiforcongress.com, includes a press release dated March 21, 2009 at 7:30 p.m. announcing his Federal candidacy:

Switalski Running for Congress

State Senator Mickey Switalski (D-Roseville) announced his candidacy for the U.S. House of Representatives 12th Congressional District seat this evening. Surrounded by a throng of supporters, ethnic dancers, and bagpipers during his annual 'Michael O'Switalski Irish Party' at the Roseville VFW Hall ...

"Tonight, I am announcing my candidacy for the U.S. House of Representatives 12th Congressional District," Switalski told the crowd. "I am running because I believe I can do a better job for the people of this District."

A copy of the March 21, 2009 press release printed from Switalski for Congress on May 17, 2009 is attached as Exhibit 1.

10. Press reports confirm the Michael O'Switalski Irish Party was a Federal campaign event. On March 21, 2009, the Detroit News reported that "State Sen. Michael Switalski of Roseville announced Saturday night he intends" to run for Federal office. State Senator Switalski "made the announcement during an annual party he holds the week of St. Patrick's Day ... Amid supporters, ethnic dancers, and bagpipers at his 'Michael O'Switalski Irish Party' at the Roseville VFW Hall, the lawmaker said he'll bring new energy and a record of bipartisan achievement to the race." He went on to say "I am running because I believe I can do a better job for the people of this District." "Switalski to Challenge U.S. Rep. Levin," The Detroit News, March 21, 2009, attached as Exhibit 2.

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11. The Detroit Free Press also confirmed that State Senator Switalski made his Federal candidate announcement at "Switalski's annual Irish Party fund-raiser." "Switalski looks to challenge Levin for House Seat," Detroit Free Press, March 21, 2009, attached as Exhibit 3.
 12. The Free Press also reported that Michigan political analyst Bill Ballenger said "the most obvious motivation for Switalski is the fact that he's term-limited and cannot run again for the [State] Senate."
 13. Apparently, State Senator Switalski planned to make his Federal campaign announcement for some time before the March 21, 2009 campaign event. "Mr. Switalski said he had a 'gentlemanly discussion' with Mr. Levin [in February]" about running for Federal office. "Given that it is some 18 months before the 2010 primary, Mr. Switalski was asked why start the campaign so early. It is better, he said, to get out and campaign early than try to sneak up on a candidate." "Switalski Announces Run Against U.S. Rep. Levin," Gongwer News Service, Michigan Report, vol. 48, report 55, March 23, 2009 attached as Exhibit 4.
 14. Statements by the candidate in his press release posted on his Federal campaign website and at least three separate press accounts confirm that Mr. Switalski used his annual Michael O'Switalski Irish Party event to publicly announce his candidacy for Federal office.
- The Switalski Federal Candidate Announcement Event was paid for by a non-federal committee.**
15. The Committee to Elect Michael Switalaki State Senator, a non-federal committee, paid the costs for the event at which Michael Switalski announced his campaign for Federal office.
 16. The solicitation letter dated February 23, 2009, signed by Mr. Switalski inviting people to pay \$10 to attend the Michael O'Switalski Irish Party held on March 21, 2009 includes a disclaimer which states: "Paid for by the Committee to Elect Michael Switalski State Senator." Exhibit 5.
 17. In his February 23, 2009 solicitation letter to the March 21, 2009 announcement event, Mr. Switalski wrote, "I intend to announce what my future plans are that evening."
 18. Switalski for Congress could not have paid for the March 21, 2009 announcement event because it was not created until April 6, 2009. See Switalaki for Congress, FEC Statement of Organization, signed by Michael Switalski and dated April 6, 2009, Exhibit 6.

19. The disclaimer on the Switalski Announcement Invitation dated February 23, 2009 clearly states that the Federal campaign event was paid for by a non-federal committee. Mr. Switalski's Federal campaign committee could not have paid for the March 21, 2009 event because it was not formed until April 6, 2009 according to documents signed by Mr. Switalski.

The Switalski Federal Candidate Announcement Event appears to cost more than \$2,400 creating a reason to believe that an illegal excessive contribution was made by a non-federal committee to a Federal candidate.

20. The Switalski Federal Candidate Announcement Event cost more than \$2,400, upon information and belief.
21. The Act provides that the term "contribution" includes any gift of money or anything of value made by any person for the purpose of influencing any election for Federal office. 2 U.S.C. §431(8)(A)(i).
22. The term "expenditure" is defined to include any purchase, payment, distribution, loan, advance, deposit, or gift of money or anything of value, made by any person for the purpose of influencing any election for Federal office. 2 U.S.C. §431(9)(A)(i); 11 C.F.R. §100.111(a)
23. The phrase "anything of value" includes goods and services provided without charge, or at less than the usual and normal charge for them. 11 C.F.R. §100.111(e)(1).
24. A non-federal committee that finances a Federal campaign event makes a contribution to or expenditure on behalf of the Federal candidate if the event involves communications expressly advocating the nomination or election of a Federal candidate. FEC Advisory Opinions 1988-27, 1992-6, 1994-15, and 1996-11.
25. Contributions to candidates, whether made in monetary form or in-kind, are subject to limitation under 2 U.S.C. § 441a(a).
26. A non-federal committee is prohibited from making contributions to any Federal candidate in excess of \$2,400 per election. 2 U.S.C. §441a(a)(1)(A).
27. The Michael O'Switalski Irish Event solicitation letter advertised that food, drinks, including beer and wine, and entertainment would be provided at the Switalski Federal Candidate Announcement Event. See February 23, 2009 solicitation letter signed by Michael Switalski, Exhibit 5.
28. The Michael O'Switalski Irish Event is an "annual event" according to Mr. Switalski's March 21, 2009 press release announcing his candidacy for Federal office. See Exhibit .

29. The non-federal committee that paid for the Switalski Federal Candidate Announcement Event has not filed public disclosure reports with the State of Michigan itemizing the expenses it paid in connection with this Federal campaign event so we are not able to determine the exact amount of the apparently excessive contribution at this time. However, reports filed by Mr. Switalski's non-federal campaign committee with the Michigan Department of State, Bureau of Elections, show that State Senator Switalski's annual St. Patrick's Day event in 2007 apparently exceeded the Federal contribution limit of \$2,400. Committee to Elect Michael Switalski State Senator, Michigan Campaign Statement, for the period November 28, 2006 to December 31, 2007, Exhibit 7.

30. In 2007, the annual Michael O'Switalski Irish Event was held on March 16, 2007, upon information and belief. According to the Committee to Elect Michael Switalski State Senator's 2007 annual disclosure report filed with the Michigan Department of State, Bureau of Elections 214 donors made contributions to the non-federal committee on March 16, 2007.

31. Itemized expenditures disclosed by the Committee to Elect Michael Switalaki State Senator that appear were made in connection with the March 16, 2007 annual event include:

<u>Person or Vendor Paid</u>	<u>Purpose</u>	<u>Date</u>	<u>Amount</u>
Postmaster	Stamps	2.16.07	\$195.00
Xpedex	Paper for fundraiser	2.23.07	\$205.16
Imperial House	Deposit for hall	3.11.07	\$750.00
Little Brown Jug	<u>Beer keg</u>	3.15.07	\$160.00
<u>Amore's Family Restaurant</u>	Food	3.16.07	\$132.81
Imperial House	Rent	3.16.07	\$750.00
Margaret Schmgitz Band	Band	3.16.07	\$550.00
<u>National Coney Island</u>	Coney Dogs	3.16.07	\$390.00
<u>Passport Pizza</u>	Pizza	3.16.07	\$180.00
Roma Heaney	Party Supplies	3.26.07	<u>\$431.23</u>
TOTAL			\$3,744.20

32. The February 23, 2009 invitation to the Switalski Federal Candidate Announcement Event indicates it was a much more elaborate and expensive event than 2007 event. According to the 2009 event invitation:

"We will have all of your favorites, including National Coney Island chili dogs, Passport Pizza, Hummus and Taouleh from Jalia's Market, Pasta from Villa Penna, Turkey with mashed potato and gravy from Amore's Restaurant ...fresh fruit from Manzella's Market."

In addition, the beverages provided for the 2009 event include wine and imported beer which likely cost more than the \$160 beer keg in 2007: "Thirsty? Have some Beer, wine, pop, and Guinness."

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33. The 2007 Michael O'Switalski Irish Event appears to have cost at least \$3,744. The 2009 invitation to this event indicates that it was more elaborate and, as a result, is likely to have cost far in excess of the Federal contribution limit of \$2,400.
 34. There is reason to believe that the non-federal committee made an excessive contribution to a Federal candidate when it paid more than \$2,400 for costs associated with the Switalski Federal Candidate Announcement Event held on March 21, 2009.

Michael Switalski for State Senate Committee made contributions or expenditures of more than \$1,000 for the purpose of influencing a Federal election but failed to register as a political committee with the Federal Election Commission.

35. If the activities engaged in by Michael Switalski for State Senate involve contributions or expenditure "for the purpose of influencing any election for Federal office" under the Act and are made or received in amounts in excess of \$1,000 in a calendar year, then Michael Switalski for State Senate would be subject to registration and reporting requirements as a "political committee" under the Act. 2 U.S.C. §431(4)(A); 11 C.F.R. §100.5(a).
36. A political committee is defined as any committee, club, association, or other group of persons, which makes expenditures aggregating in excess of \$1,000 in a calendar year. 11 C.F.R. §100.5(a)
37. The Michael Switalski for State Senate Committee paid for the Switalski Federal Candidate Announcement Event according to the disclaimer on the event invitation.
38. A non-federal committee that finances a Federal campaign event makes a contribution to or expenditure on behalf of the Federal candidate if the event involves communications expressly advocating the nomination or election of a Federal candidate. FEC Advisory Opinions 1988-27, 1992-6, 1994-15, and 1996-11.
39. There is reason to believe that the Michael Switalski for State Senate Committee made expenditures of more than \$1,000 for the purpose of influencing a Federal election but failed to comply with the registration and reporting requirements under the Act.

Conclusion

There is reason to believe that the Committee to Elect Michael Switalski State Senator, Switalski for Congress, and Michael Switalaki, as treasurer, violated Federal election law when State Senator Michael Switalski used his non-federal state senate campaign committee to finance the costs of the event at which Mr. Switalksi announced he was a Federal candidate. I respectfully request that the FEC investigate this matter to determine the full nature and extent of the Federal law violations.

Respectfully submitted:

/s/ Marilyn Donlin
By: Marilyn Donlin

Warren, MI 48088

State of Michigan
County of Macomb

Subscribed and sworn to before me this 15th day of JUNE 2009.

Kenneth William Hardy
Notary Public

My Commission Expires:

4-30-2013

KENNETH WILLIAM HARDY
Notary Public, Macomb County, MI
My Commission Expires: 4/30/2013

Switalski For Congress

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Press Release

March 21, 2009 7:30 pm

Contact number (800) 204-6570



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Switscheld Running for Congress

State Senator Mickey Switscheld (D-Roseville) announced his candidacy for the US House of Representatives 12th Congressional District seat this evening. Surrounded by a strong of supporters, ethnic dancers, and legislators during his annual "Mitscheld O'Switscheld Irish Party" at the Roseville VFW Hall, the 11-year state legislator promised to bring new energy and a record of bi-partisan achievement to the economic crisis affecting the nation.

"Tonight, I am announcing my candidacy for the US House of Representatives 12th Congressional District," Switscheld told the crowd. "I am running because I believe I can do a better job for the people of this District."

Switscheld, the ranking Democrat on the powerful Senate Appropriations Committee, was at the center of the compromise that packaged budget cuts, reforms, and tax restoration to end the government shutdown in October of 2007. He sponsored more bills than any other Senate legislator last session, and also passed the most public acts of any Senate Democrat. Switscheld assembled bi-partisan caucuses to reform the state's MEAP law and convert it into the ACT College Entrance Exam, enhanced the state's adoption tax credit, and in December passed a law establishing Financial Literacy for math credit in High Schools. He also sponsored the controversial early tax collection of County Mifflin, which has saved the state hundreds of millions in county Revenue Sharing dollars while providing a mechanism to fully fund their revenue payments.

"I started here in my hometown on the City Council 20 years ago. With your support, I have risen to the Michigan State Senate," Switscheld observed. "People ask me what I'll do next. I have served you faithfully at the City, County, and State level. I see the challenges, I need people who need jobs. We can't continue with the status quo. We need to make changes. I have the energy and fresh ideas to accomplish this. Join me, and we will change politics and get Michigan working again."

END

Fold for by Switscheld for Congress, 31412 Gay, Roseville, MI 48068

Bio

321/03

State Senator Mickey Switscheld (D-Roseville)

Personal

Born January 11, 1955

Married 24 years to Roma Heaney, one child, Liam.

31412 Gay, Roseville, MI 48068

H (800) 204-6570



PRINT THIS

Saturday, March 21, 2008

Switalski to challenge U.S. Rep. Levin

Gary Heitman / Detroit News Lansing Bureau

ROSEVILLE — State Sen. Mike Switalski of Roseville announced Saturday night he intends to challenge U.S. Rep. Sander Levin in 2010, setting up a rare battle within his own party for the 13-term Democratic Congressman from Royal Oak.

Switalski, 44, made the announcement during an annual party he holds the week of St. Patrick's Day. He'll complete his second, and final, Senate term under Michigan's term limits law in 2010.

Amid supporters, ethnic dancers, and bagpipers at his "Michael O'Switalski Irish Party" at the Roseville VFW Hall, the lawmaker said he'll bring new energy and a record of bipartisan achievement to the race.

"I am running because I believe I can do a better job for the people of this District," he said. "I see the foreclosures, I meet people who need jobs. We can't continue with the status quo. We need to make changes. I have the energy and fresh ideas to accomplish this."

Levin, 77, has every intention of running again for the 12th U.S. House District seat, said his chief of staff, Hilary Chambers.

She released a March 20 poll obtained by the Levin camp showing the veteran federal lawmaker has a 74 percent favorability rating and 91 percent name recognition, compared to 23 percent and 31 percent for Switalski, among likely voters in a 2010 Democratic primary election in the district.

"This is an all hands on deck economic crisis, so it is too early to be campaigning and I'm concentrating on helping to save the auto industry and economic recovery for Michigan families," Levin said. "But when it comes to the 2010 election, I look forward to asking voters for their continued support."

Switalski, minority vice chairman of the powerful Senate Appropriations Committee, also is a veteran of two terms in the Michigan House. He served on the Roseville City Council and the Macomb County Commission before joining the State Legislature in 1998.

The launching of his Congressional bid ends speculation that he'd run for the seat. Politicians are eyeing their chances of election to Congress next year versus 2012 when Michigan's U.S. House districts will be reconfigured and the state is expected to lose a seat based on the 2010 Census.

Levin first was elected to Congress in 1982.

The 12th District includes Clinton Township, Eastpointe, Ferndale, Mount Clemens, Roseville, Royal Oak, Southfield, St. Clair Shores, Sterling Heights, and Warren.

You can reach Gary Heitman at (817) 371-3680 or gheitman@detnews.com.

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EXHIBIT 3



March 21, 2009

Switalski looks to challenge Levin for House seat

By **DANSON BELL**
FREE PRESS STAFF WRITER

State Sen. Mickey Switalski, a Roseville Democrat in his first term in the Legislature, said Saturday he plans to seek a new office in 2010 — the congressional seat straddling southern Macomb and Oakland counties that has been held for the last 27 years by fellow Democrat U.S. Rep. Sander Levin.

The announcement came at Switalski's annual Irish Party fund-raiser, and sets the stage for a matchup between two of Michigan's premier political families.

Levin, 77, is the elder brother of U.S. Sen. Carl Levin, D-Mich.

Two of Switalski's brothers sit on the Macomb County Circuit Court, and a cousin was elected last year to the state House.

Switalski, 64, has "a huge name in Macomb County" and is a proven vote-getter, having been elected four times to the Legislature, said Bill Bittenger, editor of the newsletter Inside Michigan Politics.

But the most obvious motivation for Switalski is the fact that he's term-limited and cannot run again for the Senate, Bittenger said.

He nevertheless could be a formidable challenger if he can articulate a reason for voters to replace Sander Levin, he said.

In making his announcement Saturday, Switalski said "We can't continue with the status quo. We need to make changes. I have the energy and fresh ideas to accomplish this."

Levin of Royal Oak was twice the Democrats' nominee for governor in the 1970s, a state senator and has served in Congress since 1982.

Despite changes in district boundaries in the early 1980s and after the 2000 census to include more of Macomb County, Levin successfully has defended himself in the past.

In recent years, he has been one of the Democratic Party's leaders on trade issues.

Levin's spokeswoman Hilary Chambers said internal polling suggests he has very strong support from Democrats in his district.

"This is an all hands on deck economic crisis so it is too early to be campaigning," Levin said Saturday. "But when it comes to the 2010 election, I look forward to asking voters for their continued support."

Contact **DANSON BELL** at 517-372-8861 or dbs@freepress.com.

Additional Facts



Michigan Report

The Capitol Record Since 1908

Volume #48, Report #88, Article #8—Monday, March 23, 2009

SWITALSKI ANNOUNCES RUN AGAINST U.S. REP. LEVIN

The troubles the state and its leading industry face in making their case before Congress helped Sen. Michael Switalaki (D-Roseville) to make the decision to take on U.S. Rep. Sander Levin (D-Southfield) in the 2010 Democratic primary.

Mr. Switalaki's announcement over the weekend surprised the state's political establishment.

Mr. Levin - himself a former state senator and twice the Democratic candidate for governor in the 1970s - has served the 12th District, which is split over Oakland and Macomb counties since the 1982 election. His brother, U.S. Sen. Carl Levin (D-Detroit), is the longest serving U.S. senator in state history. His son, Andy, nearly won his race for the Senate against Sen. John Pappageorge (R-Troy), which would have made him a colleague of Mr. Switalaki.

Mr. Switalaki's cousin Jon won a seat in the House last fall.

Mr. Switalaki said he had a "gentlemanly discussion" with Mr. Levin a month ago about possibly running for the seat. Mr. Levin attempted to discourage him, Mr. Switalaki said.

In a statement, Mr. Levin said given the economic crisis it was too early to look at campaigning. Instead it was time for "all hands" to work to help "save the auto industry recovery" for state families. When the 2010 election comes, Mr. Levin said he would ask the voters to return him.

Given that it is some 18 months before the 2010 primary, Mr. Switalaki was asked why start the campaign so early. It is better, he said, to get out and campaign early than try to sneak up on a candidate.

While Mr. Levin said it is too early to campaign, his campaign organization had a poll done showing that in the 12th District Mr. Levin has a 74 percent favorability rating with voters compared to 23 percent for Mr. Switalaki. Among likely voters in the district, Mr. Levin was backed by some 62 percent of those polled compared to 14 percent support for Mr. Switalaki.

But, in an interview, Mr. Switalaki said the current system is not working for Michigan, especially considering the difficulty the auto industry had last fall in convincing Congress to forward it loans to help stay in business.

The state and the auto industry faced enormous disrespect in Congress, Mr. Switalaki said.

And given the crisis the state is facing in terms of its economy it needs a new perspective in helping turn it around, Mr. Switalaki said.

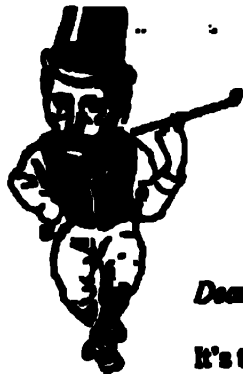
If he wins the Democratic nomination - which is not a lock to win the race, given that Mr. Levin has had some tough races including several with Mr. Pappageorge, but an enormous advantage - Mr. Switalaki said he would bring new energy to the post.

He also said he would "bring something very much needed" to Congress: the ability to work with Republicans.

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124 West Allegan Street, Suite 1200, Lansing, Michigan, 48933
Phone: 517.482.3500 Fax: 517.482.4367 Email: gongwer@gongwer.com**

EXHIBIT 5



O'Switalski !!!

Dear Sons and Daughters of Ireland:

February 23, 2009

It's time again for the *Michael O'Switalski Irish Party*. Please join me for a triumphant return to my old stomping grounds at the *VFW Hall in Roseville* for a wonderful Irish Party and fitting conclusion to the High Holy Days surrounding St. Patrick.

Michael O'Switalski Irish Party

Saturday, March 21, 2009

VFW Hall 25671 Gratiot (Just north of 10 Mile)

6:00 pm to 11:00 pm

Admission \$10 Kids Free

We will have all of your favorites, including National Coney Island chili dogs, Passport Pizza, Hummus and Tabouleh from Jella's Market, Pasta from Villa Penna, Turkey with mashed potato and gravy from Amore's Restaurant, my Scots-Irish wife Roma's award-winning Leek and Potato Soup, Beth Aluto's and Theresa Vitale's desserts, and fresh fruit from Manzella's Market. Thirsty? Have some Beer, wine, pop and Guinness.

Acclaimed Roseville Artist Liz Perpignon will facepaint and provide games and activities for your kids. Liz will be ably assisted by the beautiful Carla Vitale. Several Pinata will be annihilated during the course of the evening, releasing many treats to your children.

May I have this dance? After two decades of training my grade school classmates at Burns Night Suppers, The Class of '73 and associated hangers on will take the floor for Ceilidh Dancing, a kind of Scots-Irish country line dance, and we will drag you from your seat and make you join us. As always, we will entertain you with more professional ethnic dancing by Slav, Sikh, and Irish youths, and youthful-acting bagpipers.

Times are hard, so you get all this for a measly \$10, plus your kids are free. This is the best value for money in the history of political fundraisers. Plus you get me, and I intend to announce what my future plans are that evening. So I hope you and your family will join me. The enclosed tickets are decorative in nature. You can pay at the door. Please come and enjoy yourself.

Sincerely,


Mickey O'Switalski

Paid for by the Committee to Elect Michael Switalski State Senator, 31412 Gay, Roseville, MI 48066 (504) 294-5570

10044260417

EXHIBIT 6

FEC
FORM 1STATEMENT OF
ORGANIZATIONRECEIVED
FEC MAIL CENTER

JUN 16 P 8 19

1. NAME OF
COMMITTEE (in full)☒ (Check if name
is changed)Example: type type
over the line.

1276415

SWITALSKI, FOR CONGRESS

ADDRESS (number and street)

31412 947

☐ (Check if address
is changed)

KOSKOVILLE

MI

48064-1235

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address
is changed)

MICKEY@SWITALSKI.FORCONGRESS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address
is changed)

SWITALSKI.FORCONGRESS.COM

2. DATE

07/06/2009

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒ NEW (N)

OR

☐ AMENDED (A)

I certify that I have examined this Statement and in the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MICHAEL SWITALSKI

Signature of Treasurer



Date

07/06/2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 18 U.S.C. § 1001.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.Official
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-426-6900
Local 202-696-1100FEC FORM 1
(Revised 05/2008)

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20030072300

5. TYPE OF COMMITTEE

Candidate Committee:

(a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate MICHAEL ROBERT SWITALSKI

Candidate Party Affiliation DEM Office Sought ☒ House ☐ Senate ☐ President State MI District 12

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

(a) ☐ This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

(a) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is:

Corporation _____ Corporation with Capital Stock _____ Labor Organization _____
Membership Organization _____ Trade Association _____ Cooperative _____

In addition, this committee is a Lobbyist/Registrant PAC.

(b) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(a) ☐ This committee solicits contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(b) ☐ This committee solicits contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FED ID number C
2. _____ FED ID number C
3. _____ FED ID number C
4. _____ FED ID number C

10044260419
20030072301

SWITALSKI FOR CONGRESS

ZIP CODE

Reserv. 446 41 48,066-1225

ZIP CODE

Teletype number **~~584-1294-1570~~**

Reserv. 446 131 198,966-1235

ZIP CODE

File number 584-294-5570

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

B. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, or has safety deposit boxes or custodian funds.

Name of Bank, Depository, etc.

Mailing Address

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

10044260421

29030072303

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☒ USPS First Class Mail	Postmarked <i>4/16/09</i>
☐ USPS Registered/Certified	Postmarked (R/C)
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Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☐ USPS Express Mail	Postmarked
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☐ Received from House Records & Registration Office	Date of Receipt
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 PREPARER (3/2008)	<i>4/14/09</i> DATE PREPARED

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20030072304



**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 510478-1		3. This Statement covers From: 11/28/2006 To: 12/31/2007 Mo Day Year Mo Day Year	
2. Committee Name CTE Michael Switalski State Senator		4. Candidate Last Name Switalski First Name Michael M.I. 4a. Office Sought (including District # or Community Served (if applicable)) State Senate 10TH District 4b. County of Residence Macomb Driver License # (Optional)	
5. Committee's Mailing Address 31412 Gay Street Roseville MI 48066 Area Code and Phone (586) 284-5570 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 State official.		6. Treasurer's Name & Residential Address Joann Marie Mathyo 19215 Angela Court Roseville MI 48066 Area code & Phone (586) 282-9273 Driver License # (Optional)	
7. Treasurer's Business Address Area Code and Phone		8. Designated Recordkeeper's Name and Mailing Address (if the committee has a Designated Recordkeeper) Area Code and Phone Driver License # (Optional)	
9. TYPE OF STATEMENT 9a. ☐ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☐ Primary ☐ General ☐ Convention ☐ School ☐ Special ☐ Caucus Date of Election, Convention or Caucus Month Day Year		9c. ☒ Annual Statement (2007 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 Effective Date of Dissolution Month Day Year By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.			
10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete. Electronically Filed: Current Treasurer or Designated Recordkeeper w/ Joann Marie Mathyo Type or Print Name Signature Date 01/31/2008 Mo Day Year Electronically Filed: Candidate Michael Switalski Type or Print Name Signature Date 01/31/2008 Mo Day Year			

Authority granted under P.A. 308 of 1976

10044260423



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

284622

SUMMARY PAGE
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Schabell State Senator

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>9993.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(3b.) \$	<u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>9993.00</u>	(18.) \$ <u>10008.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)			
	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)		(5.) \$ <u>9993.00</u>	(20.) \$ <u>10008.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-K, Column 7)			
	(6.) \$	<u>0.00</u>	(21.) \$ <u>0.00</u>
7. In-Kind Expenditures (Schedule 1B-K, Column 6)			
	(7.) \$	<u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>12402.06</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-3)	(8b.) \$	<u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>203.93</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)		(9.) \$ <u>12606.01</u>	(23.) \$ <u>12606.16</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debt and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>64161.10</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) +	<u>9993.00</u>	
15. SUBTOTAL Add Lines 13 and 14	(15.) =	<u>74154.10</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) -	<u>12606.01</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>61548.09</u>	

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.
All required schedules must be included with this statement. If your ending balance is negative, please recheck your math.

CPR Rev 11/2006-2008

Authority granted under P.A. 386 of 1976

10044260424



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

284022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Swishild State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees 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>12/01/2006</u> Name: <u>Thomas M</u> Address: <u>38578 Gainesborough</u> <u>Clinton Twp MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>optometrist</u> Employer <u>Anthony Montella</u> Business Address <u>17180 Stone Dr</u> <u>Clinton Twp MI 48036</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	125.00	125.00
3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt <u>12/01/2006</u> Name: <u>Anthony Montella</u> Address: <u>17150 Stone Dr</u> <u>Clinton Twp MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>George Adams Jr.</u> Address: <u>3360 26 Mile</u> <u>Shelby MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Addamias Akin</u> Address: <u>1152 Boyd</u> <u>Troy MI 48063-8409</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	255.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

294022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switzki State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>5</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>stan Amerski</u> Address: <u>37125 Berlieman</u> <u>Warren MI 48091</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>6</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Michael Anstett</u> Address: <u>Box 903</u> <u>Sterling Hts MI 48311</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>7</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Anthony Marocco Victory PAC</u> Address: <u>39055 Moreau</u> <u>Clinton Twp MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>8</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Bruce Appel</u> Address: <u>14885 Stonybrook Drive</u> <u>Shelby Township MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

2940322

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Saffold State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Issa, Atter</u> Address: <u>42206 Ryan Rd</u> <u>Stirling Heights MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	60.00	60.00
3. Contribution # <u>10</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Isabelle Bagnasco</u> Address: <u>18008 Martin</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>11</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Tom Bagnasco</u> Address: <u>37795 Elm</u> <u>Harrison Twp MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>12</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Greg Balinas</u> Address: <u>38007 Hornwood</u> <u>Harrison Twp MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	120.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 13 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Pat Balnes Address: 36807 Thornwood Harrison Twp MI 48045 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 14 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jean Banks Address: 34344 Manor Run Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	12.00	12.00
3. Contribution # 15 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Maria Bertalone Address: 5785 Boulder Pointe Dr Washington Twp MI 48094 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 16 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jatinder Batra Address: 3132 Barlway Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
Page Subtotal	92.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael S. Bullock State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report ☒ contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 17 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Don Binkowski Address: 11838 13 Mile Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # 18 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Bryan Bire Address: 29173 Cotton Rd #203 Chesterfield MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 19 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Deb Bink Address: 348 Elm Wyandotte MI 48192 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 20 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Zvonko Blazevich Address: 41426 Secane Dr Sterling Heights MI 48314 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Spinkowski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>21</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Ron Bridges Address: 49088 Parkfield Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>22</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Melanie Brown Address: 22514 Ridgeway St Clair Shores MI 48180 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>23</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Phyllis Brown Address: 25086 Jeanette Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>24</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: George Brumbaugh Address: 43728 Catalina Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
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294022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Schwartz State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	5. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>25</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Lucy Buccolotto</u> Address: <u>31454 Glende</u> <u>warren MI 48088</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>26</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Lloyd Burns</u> Address: <u>21331 Blum</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>27</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Mary Dolores Calder</u> Address: <u>15400 18 Mile Road</u> <u>Rich B. Apt 227</u> <u>Clinton Township MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>28</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Kathy Capicchioni</u> Address: <u>48463 Dunn</u> <u>Macomb MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

284822

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>29</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Helen Casalera Address: 38272 Great Oaks Circle Clinton Twp MI 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>30</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Diane Casalou Address: 7085 Ridge Rd Canton MI 48187 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00
3. Contribution # <u>31</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Henry Casper Address: 21781 Blum Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>32</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: John Chirban Address: 30844 J Carlo Street Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
Page Subtotal	160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

294022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Schmitt State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Gene Chownyk</u> Address: <u>19004 Birmingham</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>34</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Patricia Chownyk</u> Address: <u>19004 Birmingham</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>35</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Gayle Closs</u> Address: <u>28324 Compton</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>36</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Renee Closs</u> Address: <u>31760 Beechwood</u> <u>Warren MI 48090</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
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294022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>37</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: John Cole Address: 19533 McGinn Roseville MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>38</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Mary Ann Cole Address: 15400 18 Mile Clinton Twp MI 48002 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>39</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: CTE Harold Haugh Address: 19404 Candlelight Roseville MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
3. Contribution # <u>40</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: CTE Joe Romano Address: 12236 Grindley Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
Page Subtotal	145.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Schmidt State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>41</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: CTE Leonard Haggerty Address: 18710 Rockport Roseville MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>42</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: CTE Maria Schmidt Address: 36755 Woodville Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>43</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jason Davidson Address: 38427 Oakshire Clinton Two MI 48035 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>44</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jason Davidson Address: 38427 Oakshire Clinton Two MI 48035 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	45.00
Page Subtotal	105.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swishid State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>45</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: Theresa Dearhammer Address: 31420 Kelly Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>46</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ed Dabier Address: 37480 Carpathia Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>47</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Dennis Dedonatis Address: 22427 Wildwood BCS MI 48081 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>48</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Nicole DeJove Address: 22513 Sunnyside St Clair Shores MI 48060 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Sufinski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>49</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Gerald DelMaine</u> Address: <u>12429 Lyford</u> <u>Starling Heights MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>50</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Michael Devault</u> Address: <u>7910 Walter Road</u> <u>Lansburg MI 48046</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00
3. Contribution # <u>51</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Josephine Dicicco</u> Address: <u>28000 Park</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	20.00	20.00
3. Contribution # <u>52</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Frank DiGiovanni</u> Address: <u>30829 Riverbend Drive S.</u> <u>Clinton Township MI 48036-2488</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1
2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>53</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Douglas Dinning Address: 3770 Lake Forest Drive Sterling Heights MI 48314 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00
3. Contribution # <u>54</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Richard Doherty Address: 31746 Gloria Court Warren MI 48093 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>55</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jack Dolan Address: 42600 Garfield Suite 101 Canton Township MI 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
3. Contribution # <u>56</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Anne Dopis Address: 47008 Scanton Macomb MI 48044 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	180.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1
2. Committee Name CTE Michael Saffold State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report ☒ contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>57</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Pat Dopla</u> Address: <u>47080 Scanlon</u> <u>Macomb MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>58</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Matthew Dregar</u> Address: <u>330 N. Rogers Rd</u> <u>Northville MI 48167</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>59</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>DTE Energy Co. PAC</u> Address: <u>3000 Second Avenue</u> <u>Detroit MI 48226</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	350.00	350.00
3. Contribution # <u>60</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Charlie Eliot</u> Address: <u>27401 Blum</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	425.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>01</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Rosemarie England</u> Address: <u>16465 Northview</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>02</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Carol M. Eovold</u> Address: <u>30116 Blossom</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	16.00	16.00
3. Contribution # <u>03</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Edith Faller</u> Address: <u>27300 Groveland</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>04</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Larry Faller</u> Address: <u>36347 Elliot</u> <u>Sterling Heights MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	61.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Svalinski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>65</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Nick Fuller Address: 37300 Groesbeck Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>66</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Don Fields Address: 19579 Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # <u>67</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Garnet Fleming Address: 25375 Collingwood Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # <u>68</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Mihai Fuller Address: 49000 Portskill Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	90.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Spink State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>69</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Theresa Genest Address: 18831 Waterman Roseville MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>70</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jenny Garfil Address: 5703 Kennedy Circle Warren MI 48093 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>71</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Scott Goldberg Address: 1945 Long Pointe Dr Bloomfield Hills MI 48302 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>72</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Kathy Goodrich Address: 18804 Forest Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Siskind State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 73 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Kaven Goodrich Address: 18804 Forest Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 74 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ronald H. Grove Address: 25508 Kelly Road Suite C Roseville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 75 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ronald H. Grove Address: 25508 Kelly Road Suite C Roseville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	30.00
3. Contribution # 76 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Richard Grychat Address: 25148 Aliso Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>77</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Richard Haines</u> Address: <u>48237 Hecker</u> <u>Union MI 48317</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
3. Contribution # <u>78</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Singh Harjinder</u> Address: <u>24588 Jennifer</u> <u>Flat Rock MI 48134</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	60.00	60.00
3. Contribution # <u>79</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Margaret Hartley</u> Address: <u>30545 Quirkart</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>80</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>HEALTH Political Action Comm</u> Address: <u>6215 W. St. Joseph Highway</u> <u>Lansing MI 48917</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	350.00	350.00
Page Subtotal	490.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Siskind State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>81</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2007</u> Name: <u>Holena Hoaney</u> Address: <u>723 Shawwassee</u> <u>Lansing MI 48015</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		45.00	45.00
3. Contribution # <u>82</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2007</u> Name: <u>Shirley Holakid</u> Address: <u>1365 roslin</u> <u>Grosse Pte. Wds MI 48236</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		30.00	30.00
3. Contribution # <u>83</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2007</u> Name: <u>Cheryl Holan</u> Address: <u>3836 River</u> <u>East China MI 48054</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		15.00	15.00
3. Contribution # <u>84</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2007</u> Name: <u>Donna Hope</u> Address: <u>5835 N. River</u> <u>East China MI 48054</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		15.00	15.00
Page Subtotal		105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Smith MI State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>85</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Kathleen Houlhan Address: 8888 Wealthy Street Clarkston MI 48346 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # <u>86</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Dennis Houser Address: 837 Beaconfield Grosse Pointe Park MI 48230 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>87</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Ethel Huerle Address: 18385 Bonner Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>88</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Sheila Hunter Address: 25365 Collingwood Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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Bureau of Elections

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>88</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Linda Jansen Address: 16400 Novara Detroit MI 48205 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>89</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Surinderjit Karim Address: 3546 Pipers Glen Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>90</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Veronica Kinselt Address: 16143 Wilson Street Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>91</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: C Konenkamp Address: 42105 Villanova Sterling Heights MI 48313 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Savelle State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>93</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Joe Koemala Address: 78 S Main Mt Clemens MI 48043 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>94</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Chuck Kulikowski Address: 30275 Macol Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>95</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: John Kusana Address: 19825 Barbara Clinton Twp MI 48035 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>96</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: Carl Kushner Address: 7404 River Vista Union MI 48317 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
Page Subtotal	75.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Schwartz State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>97</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Carl Kushner Address: 7404 River Vista Livonia MI 48150 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	60.00
3. Contribution # <u>98</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Pat LaFave Address: 38798 Mulberry Clinton Twp MI 48035 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>99</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Dennis Lamborn Address: 28202 Parkington Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>100</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Craig LaFever Address: 11035 Fairfield Livonia MI 48150 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>101</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Amy Lefevre Address: 11035 Fairfield Livonia MI 48150 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>102</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Liz Lanhart Address: 27100 Schorherr Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>103</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Joe Lentine Address: 29377 Hoover Warren MI 48093 5. If over \$100.00 cumulative, please provide: Occupation <u>Business owner -</u> Employer <u>Lentine Mortgage Invest</u> <u>Vendor</u> <u>Co</u> Business Address <u>29377 Hoover</u> <u>Warren MI 48093</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	150.00	150.00
3. Contribution # <u>104</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Philip Longueuil Address: 17975 Common Road Roseville MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	195.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CITE Michael Siskind State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 105 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Philip Longueuil Address: 17975 Common Road Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	30.00
3. Contribution # 106 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Lisa Lozen Address: 32229 Solon Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 107 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ronald MacKool Address: 31050 Greenhaven Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 108 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Moira Mahoney Address: 29545 Waldorf Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CJE Michael Spillholz State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 109 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: Frank Maleano Address: 1358 Abbot Detroit MI 48226 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 110 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: Marteen Makowicz Address: 21848 Karam Warren MI 48091 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 111 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: Katherine Manz Address: 45622 Kendig Livonia MI 48317 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # 112 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: Greg Marotte Address: 25545 Waldorf Farmville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Swishald State Senator

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3. Contribution # 113 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Melissa Mathias Address: 1700 Forest Park Findlay OH 45840 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 114 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: D. Jane May Address: 20515 Arlington Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	20.00	20.00
3. Contribution # 115 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: George McCloskey Address: 37000 Union Lake Road Harrison Township MI 48045 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # 116 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Thomas J. McDonald Address: PO Box 46039 Mt. Clemens MI 48046-8039 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired Friend of the Court 50</u> Employer <u>Macomb County Court System</u> Business Address <u>Main Street</u> Address <u>Mt. Clemens MI 48046</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	200.00	200.00
Page Subtotal	265.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 117 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: MI Assoc. of Anesths. PAC Address: 530 W. Ionia Ste C Lansing MI 48033 8. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	175.00	175.00
3. Contribution # 118 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: MI Assoc. of Counties PAC Address: 835 N. Washington Lansing MI 48033 8. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	175.00	175.00
3. Contribution # 119 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: Art Miller Address: 11139 Olive Warren MI 48093 8. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 120 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: Charles Milons Address: 21300 15 Mile Clinton Twp MI 48035 8. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	380.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Szybeltd State Senator

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3. Contribution # <u>121</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Patty Hasenleder Mione</u> Address: <u>44238 Terricar</u> <u>Clinton Township MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>122</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>MI Trial Lawyers Ass'n PAC</u> Address: <u>304 S. Croyte Road</u> <u>Suite B</u> <u>Lansing MI 48917</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	450.00	450.00
3. Contribution # <u>123</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>BM Molt</u> Address: <u>3488 Munster</u> <u>Rochester Hills MI 48309</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>124</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>BM Molt</u> Address: <u>3488 Munster</u> <u>Rochester Hills MI 48309</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	30.00
Page Subtotal	495.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>125</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Anna Muzzi</u> Address: <u>25111 Collingwood</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>126</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Harold Muzzi</u> Address: <u>25111 Collingwood</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>127</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>MarjR Narvia</u> Address: <u>24020 Tottenham Ct</u> <u>Novi MI 48374</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>128</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>John Newton</u> Address: <u>19082 Roseola</u> <u>Eastpoint MI 48021</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swiftold State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>129</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Janet O'Brien</u> Address: <u>12441 Grindley</u> <u>Stirling Heights MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>130</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Dennis O'Meara</u> Address: <u>32124 Eastway</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>131</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Laurie O'Meara</u> Address: <u>32124 Eastway</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>132</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Rae A. Oldaugh</u> Address: <u>28511 Pinhurst</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	100.00	100.00
Page Subtotal	145.00	
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Spitznagel State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 133 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Pat Olejak</u> Address: <u>42129 Villanova</u> <u>Starling Heights MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 134 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Gloria Olan</u> Address: <u>2805 Suncrest</u> <u>Starling Heights MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
3. Contribution # 135 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Mary Otto</u> Address: <u>29146 Dembo</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 136 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>John Pace</u> Address: <u>15752 Jennifer</u> <u>Fraser MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	95.00	
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Bureau of Elections

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swishaldt State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>137</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Quarino Pica</u> Address: <u>16708</u> <u>Major</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # <u>138</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Steve Ratkov</u> Address: <u>32794 N. Westhervane Drive</u> <u>New Baltimore MI 48047-3137</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00
3. Contribution # <u>139</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Norm Raymon</u> Address: <u>24225 Prairie</u> <u>Warren MI 48090</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>140</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Tom Raymon</u> Address: <u>24225 Prairie</u> <u>Warren MI 48090</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	160.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report ☒ contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 141 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Tom Raymus Address: 30518 Edmunton St Clair Shore MI 48060 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	45.00	45.00
3. Contribution # 142 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: REALTORS PAC of MI 1 Address: 720 N. Washington Avenue PO Box 40725 Lansing MI 48201-7925 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	350.00	350.00
3. Contribution # 143 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: D Rockeclider Address: 42141 Villanova Sterling Heights MI 48313 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 144 PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: Registrars PAC Local 58 IEW Address: 1366 Abbott Street Detroit MI 48226-2400 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	150.00	150.00
Page Subtotal	560.00	
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swiftold State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>145</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Kathy Rollinger Address: 37475 Fiori Trl Clinton Twp MI 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>146</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Melanie Rollinger Address: 28290 Kaufman Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>147</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Becky Russell Address: 29786 Gregg Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>148</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Josephine Saville-Dunn Address: 21685 Centerbrook Grosse Pointe Wds MI 48236 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	25.00	25.00
Page Subtotal	85.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swolinski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>149</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: <u>C. Scarsella</u> Address: <u>52948 Muirfield</u> <u>Chesterfield MI 48051</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>150</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: <u>Norman Schieman</u> Address: <u>14500 East 12 Mile Road</u> <u>Bloomfield Hills MI 48301</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>151</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: <u>Mike Scott</u> Address: <u>22616 Katzman</u> <u>Clinton Twp MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>152</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: <u>Beth Samczak</u> Address: <u>21621 Francis</u> <u>St Clair Shores MI 48062</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Sieradzki State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 153 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ray Samozak Address: 21621 Francis St. Clair Shores MI 48082 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 154 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Edward Sieradzki Address: 14713 Bristol Court Shelby Township MI 48315-4410 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # 155 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Ed Sieradzki Address: 25944 Arlington Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 156 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Marge Sieradzki Address: 25944 Arlington Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 157 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: Mike Sighle Address: 15385 Michael Taylor MI 48180 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 158 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: Ruby Sighle Address: 15385 Michael Taylor MI 48180 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 159 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: Kamwardup Singh Address: 3445 N Canlivery Oaks Circle Oakland Twp MI 48363 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 160 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/15/2007</u> Name: Simrat Singh Address: 600 E Madison Ann Arbor MI 48109 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

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3. Contribution # 161 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Sharon Skupney Address: 32607 Deerwood Macomb MI 48044 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 162 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Craig Skupny Address: 32607 Deerwood Macomb MI 48042 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 163 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: William Snell Address: 33223 Louise Clinton Twp MI 48035 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 164 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: John Specht Address: 31625 Tall Pines Ct Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Stryland State Senator

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3. Contribution # <u>165</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Richard Steenland</u> Address: <u>19458 Rockport</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>166</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Elsine Stoffes</u> Address: <u>37279 Great Oaks</u> <u>Clinton Twp MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>167</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Mary Stainbaur</u> Address: <u>15987 Chestnut</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>168</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Fita Staber</u> Address: <u>28624 Koortz</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	90.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 168 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Marcia Sturison Address: 12285 Hickory Utica MI 48315 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 170 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Tom Sumnield Address: 33674 Morningside Fraser MI 48026 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 171 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Clarence R. Switalski Address: 38800 Lund Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	25.00	25.00
3. Contribution # 172 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Jim Switalski Address: 39410 Los Olas Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	70.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>173</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>John Switalski</u> Address: <u>31705 Forest Lane</u> <u>Warren MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	60.00	60.00
3. Contribution # <u>174</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Linda Switalski</u> Address: <u>3216 Karam</u> <u>Warren MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>175</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Matthew Switalski</u> Address: <u>16215 18 Mile Rd</u> <u>Clinton Township MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	60.00	60.00
3. Contribution # <u>176</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Nancy Switalski</u> Address: <u>10000 Martin Road</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
Page Subtotal	185.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swisheldt State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>177</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Francis Szymanski</u> Address: <u>38819 Fountain</u> <u>Roseville MI 48068</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>178</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Nino Tanzini</u> Address: <u>15820 LaNene</u> <u>Redford MI 48238</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>179</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Stephanie Tanzini</u> Address: <u>12551 Pine Ridge</u> <u>W. Bloomfield MI 48324</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>180</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2007</u> Name: <u>Kathy Taranto</u> Address: <u>1880840 Harbor Hill</u> <u>Clinton Twp MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swishgill State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report ☒ contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>181</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Paul Terr</u> Address: <u>321 Seymour</u> <u>Lansing MI 48906</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Lobbyist</u> Employer <u>Terr & Assoc.</u> Business <u>116 W Larnesse</u> Address <u>Lansing MI 48906</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	150.00	150.00
3. Contribution # <u>182</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Paul Terr</u> Address: <u>321 Seymour</u> <u>Lansing MI 48906</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Lobbyist</u> Employer <u>Terr & Assoc.</u> Business <u>116 W Larnesse</u> Address <u>Lansing MI 48906</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	75.00	225.00
3. Contribution # <u>183</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Agnes Taylor</u> Address: <u>25245 Huron</u> <u>Roseville MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business _____ Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>184</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Donna Taylor</u> Address: <u>3117 Kentworth</u> <u>Dearborn MI 48126</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business _____ Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	40.00	40.00
Page Subtotal	290.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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Bureau of Elections

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Sytski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>185</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Deborah Decker Thomas</u> Address: <u>14373 Kerner Drive</u> <u>Staring Heights MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>186</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Eleanor Tocco</u> Address: <u>37139 Arizona</u> <u>Clinton Twp MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>187</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Michael Tomich</u> Address: <u>24601 Princeton Street</u> <u>Dearborn MI 48124-3113</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # <u>188</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Michael Tomich</u> Address: <u>24601 Princeton Street</u> <u>Dearborn MI 48124-3113</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	45.00
Page Subtotal	90.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1
2. Committee Name CTE Michael Siskind State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>188</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Tim Tomlinson</u> Address: <u>42850 Garfield</u> <u>Clinton Township MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	50.00	50.00
3. Contribution # <u>190</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Steve Truman</u> Address: <u>40112 Flagstaff</u> <u>Sterling Heights MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>191</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Karla VanBuskirk-Krynsfeld</u> Address: <u>15003 Doris</u> <u>Livonia MI 48154</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	75.00	75.00
3. Contribution # <u>192</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: <u>Rebecca A. Vasil</u> Address: <u>3314 Yorkshire</u> <u>Detroit MI 48224</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	25.00	25.00
Page Subtotal	165.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swiftold State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 193 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Mark Vlar Address: 14732 Lydia Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 194 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Michelle Vlar Address: 14722 Lydia Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 195 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Ronald Virgin Address: 1419 Country Drive Troy MI 48068 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 196 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Cassa Vitale Address: 22638 Floral Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1
2. Committee Name CTE Michael Switalski State Senator

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3. Contribution # <u>197</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Carla Vitale</u> Address: <u>35539 Floral</u> <u>Roseville MI 48068</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	30.00
3. Contribution # <u>198</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Theresa Vitale</u> Address: <u>35539 Floral</u> <u>Roseville MI 48068</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	30.00	30.00
3. Contribution # <u>199</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Theresa Walsh</u> Address: <u>7537 Polge</u> <u>Warren MI 48091</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # <u>200</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: <u>Kathy Walters</u> Address: <u>21108 Woodward</u> <u>Clinton Twp MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	75.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 201 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Lynn Walters Address: 29173 Cotton Rd #203 Chesterfield MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 202 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Mike Wales Address: 28339 Mavis Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 203 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Gary Weller Address: 22825 Alger St Clare Shores MI 48080 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
3. Contribution # 204 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Nancy Weller Address: 22825 Alger St Clare Shores MI 48080 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	15.00	15.00
Page Subtotal	60.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>205</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Whitney Wenger Address: 12275 Hickory East Utica MI 48315 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>206</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Daryl White Address: 37337 Tall Oak Drive Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>207</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Marie Wonsiewski Address: 15185 Raphael Warren MI 48090 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # <u>208</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Otto Wilhelm Address: 16405 Charleston Roseville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	75.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Szybalaki State Senator

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3. Contribution # 209 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Stanley Wilkins Address: 31651 Stamen Circle Farmington Hills MI 48336 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # 210 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Rita Wilson Address: 16330 Kennedy Rooseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # 211 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Tom Zierke Address: 13805 Deepwood CT Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
3. Contribution # 212 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/16/2007</u> Name: Brian Zmick Address: 35643 Diane Richmond MI 48062 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	30.00	30.00
Page Subtotal	120.00	
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 213 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: John Zmick Address: 18845 Maple Rooseville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 214 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2007</u> Name: Bruce Zmick Address: 12885 Montebello Ct Sterling Heights MI 48313 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 215 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/14/2007</u> Name: Donald Arnold Address: 27243 Pinewood Rooseville MI 48065 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	15.00	15.00
3. Contribution # 216 PAC Receipt? ☒ YES 4. Date of Receipt <u>04/14/2007</u> Name: MI Restaurant Assn PAC Address: 225 West Washington Lansing MI 48933 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	175.00	175.00
Page Subtotal	220.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	3. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 217 PAC Receipt? ☒ YES 4. Date of Receipt <u>04/16/2007</u> Name: Auto Dealers of Michigan PAC Address: 318 West Ottawa Street Lansing MI 48933 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	350.00	350.00
3. Contribution # 218 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/16/2007</u> Name: Dan Gorczylo Address: 16001 E Jefferson Grosse Pointe MI 48230 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>US Health & Life Insur. Co</u> Business Address <u>8220 Irving Rd Sterling Heights MI 48312</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	500.00	500.00
3. Contribution # 219 PAC Receipt? ☒ YES 4. Date of Receipt <u>04/16/2007</u> Name: Ind PAC of MI Harness H Assn Address: PO Box 348 Okemos MI 48865 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	175.00	175.00
3. Contribution # 220 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/04/2007</u> Name: Darlene Budde Address: 28099 Essex Roseville MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	10.00	10.00
Page Subtotal	1035.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510476-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>221</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>08/04/2007</u> Name: <u>Delta PAC</u> Address: <u>PO Box 283</u> <u>Oakman MI 48865</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	175.00	175.00
3. Contribution # <u>222</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>08/04/2007</u> Name: <u>Cecilia Maloney</u> Address: <u>39422 Hidden Lane</u> <u>Clinton Twp MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	60.00	60.00
3. Contribution # <u>223</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>08/04/2007</u> Name: <u>MI Bankers Ass'n PAC</u> Address: <u>222 N. Washington Square</u> <u>Suite 320</u> <u>Lansing MI 48233</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	175.00	175.00
3. Contribution # <u>224</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>08/04/2007</u> Name: <u>MI Elms & Mid. Sch'l Ptn. PAC</u> Address: <u>1880 N College</u> <u>Mason MI 48854</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	175.00	175.00
Page Subtotal	585.00	
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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

294022

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

Enter contributor's name and address. If contribution is from an individual and the amount is \$50.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>225</u> PAC Receipt? ☒ YES 4. Date of Receipt <u>08/15/2007</u> Name: <u>Karoub Associates PAC</u> Address: <u>121 W. Allegan Street</u> <u>Lansing MI 48233</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	350.00	350.00
3. Contribution # <u>225</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>11/15/2007</u> Name: <u>John A. Brothers</u> Address: <u>30118 Indianwood Drive</u> <u>Chesterfield Township MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser	100.00	100.00

Page Subtotal

450.00

Grand Total of All Schedules 1A
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9889.00

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

284022

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name <u>Mike Cloven/Cloens</u> Address <u>16279 12 Mile</u> <u>Roseville</u> <u>MI 48068</u> ☐ Fund Raiser	Purpose: <u>District office Xmas party</u> Expenditure Code <u>ET</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/11/2008	120.00
Expenditure # 2 Name <u>Perfect Plumbing</u> Address <u>Gratiot</u> <u>Macomb</u> <u>MI 48044</u> ☐ Fund Raiser	Purpose: <u>District office clear sewage</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/11/2008	455.00
Expenditure # 3 Name <u>Helena Heaney</u> Address <u>723 Shawwassee</u> <u>Lansing</u> <u>MI 48915</u> ☐ Fund Raiser	Purpose: <u>X-Mas lunch for adopted fami-</u> <u>y</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/17/2008	100.00
Expenditure # 4 Name <u>Community Frdn. Greater Flint</u> Address <u>302 Church</u> <u>Flint</u> <u>MI 48502</u> ☐ Fund Raiser	Purpose: <u>Donation to Bob Emerson Leade-</u> <u>rship Fund</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/18/2008	100.00
Expenditure # 5 Name <u>Internationa Foundation</u> Address <u>1145 Great Oaks Blvd</u> <u>Rochester</u> <u>MI 48307</u> ☐ Fund Raiser	Purpose: <u>donation</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/18/2008	100.00
Subtotal this page			905.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name Staples Address 31900 Gratiot Avenue Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>District office supplies</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/05/2007	211.99
Expenditure # 7 Name Ed Stross Address Gratiot Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>District office painting</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/08/2007	600.00
Expenditure # 8 Name Postmaster Address Gratiot Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>Renew bulk permit</u> Expenditure Code <u>MA</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/08/2007	180.00
Expenditure # 9 Name CTE Harold Haugh Address 19464 Candlelight Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>Refund for excess contrib.</u> Expenditure Code <u>RF</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/16/2007	55.00
Expenditure # 10 Name Postmaster Address Gratiot Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/16/2007	195.00
Subtotal this page			1221.99
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Sufahid State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 11 Name <u>xpex</u> Address <u>28030 Groesbeck</u> <u>Roseville MI 48068</u> ☒ Fund Raiser	Purpose: <u>Paper for fundraiser</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/23/2007</u>	<u>205.16</u>
Expenditure # 12 Name <u>Postmaster</u> Address <u>Graftot</u> <u>Roseville MI 48068</u> ☐ Fund Raiser	Purpose: <u>postage for insider mailing</u> Expenditure Code <u>MA</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/27/2007</u>	<u>914.39</u>
Expenditure # 13 Name <u>Imperial House</u> Address <u>Groesbeck & 15 Mile Road</u> <u>Clinton Township MI 48038</u> ☒ Fund Raiser	Purpose: <u>Deposit for hall</u> Expenditure Code <u>RE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/11/2007</u>	<u>750.00</u>
Expenditure # 14 Name <u>Little Brown Jug</u> Address <u>25531 Graftot</u> <u>roseville MI 48068</u> ☒ Fund Raiser	Purpose: <u>bear leg</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/15/2007</u>	<u>160.00</u>
Expenditure # 15 Name <u>Amora's Family Restaurant</u> Address <u>34770 Groesbeck</u> <u>Clinton Twp MI 48035</u> ☒ Fund Raiser	Purpose: <u>food</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/16/2007</u>	<u>132.61</u>
Subtotal this page			<u>2162.30</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee ID Number 510478-1

2. Committee Name GTE Michael Switzki State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 16 Name <u>Imperial House</u> Address <u>Groesbeck & 15 Mile Road</u> <u>Clinton Township MI 48038</u> ☒ Fund Raiser	Purpose: <u>Rent</u> Expenditure Code <u>RE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/2007</u>	<u>750.00</u>
Expenditure # 17 Name <u>Margaret Schmigitz Band</u> Address <u>2706 Shenandoah</u> <u>Royal Oak MI 48073</u> ☒ Fund Raiser	Purpose: <u>band</u> Expenditure Code <u>ET</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/2007</u>	<u>550.00</u>
Expenditure # 18 Name <u>National Coney Island</u> Address <u>28801 Groesbeck</u> <u>Roseville MI 48065</u> ☒ Fund Raiser	Purpose: <u>coney dogs</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/2007</u>	<u>390.00</u>
Expenditure # 19 Name <u>Passport Pizza</u> Address <u>35510 Groesbeck</u> <u>Clinton Twp MI 48035</u> ☒ Fund Raiser	Purpose: <u>pizza</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/2007</u>	<u>180.00</u>
Expenditure # 20 Name <u>GTE Joe Romano</u> Address <u>12238 Grindley</u> <u>Sterling Heights MI 48312</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/28/2007</u>	<u>100.00</u>

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Grand Total of all Schedules 1B
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1970.00

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1 Committee I.D. Number 510478-1

2 Committee Name CTE Michael Sautahdt State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 21 Name <u>Roseville Optimist's Club</u> Address <u>28280 Kaufman</u> <u>Roseville MI 48066</u> ☐ Fund Raiser	Purpose: <u>dues</u> Expenditure Code <u>PP</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/26/2007</u>	<u>130.00</u>
Expenditure # 22 Name <u>Roma Heaney</u> Address <u>31412 Gay Street</u> <u>Roseville MI 48066</u> ☐ Fund Raiser	Purpose: <u>party supplies</u> Expenditure Code <u>NF</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/29/2007</u>	<u>431.23</u>
Expenditure # 23 Name <u>Children's Trust Fund</u> Address <u>235 S Grand River</u> <u>Suite 1411 Lansing MI 48933</u> ☐ Fund Raiser	Purpose: <u>donation</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/29/2007</u>	<u>100.00</u>
Expenditure # 24 Name <u>MI Youth in Gov't</u> Address <u>PO Box 65</u> <u>Quincy MI 48933</u> ☐ Fund Raiser	Purpose: <u>donation</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/29/2007</u>	<u>50.00</u>
Expenditure # 25 Name <u>American Cancer Society</u> Address <u>39425 Garfield</u> <u>Clinton Township MI 48038</u> ☐ Fund Raiser	Purpose: <u>donation</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/03/2007</u>	<u>150.00</u>
Subtotal this page			<u>861.23</u>
Grand Total of all Schedule 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switzold State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 26 Name <u>Staples</u> Address <u>31900 Graft Avenue</u> <u>Roseville MI 48068</u> ☐ Fund Raiser	Purpose: <u>District office supplies</u> Expenditure Code <u>FF</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/03/2007</u>	<u>52.98</u>
Expenditure # 27 Name <u>North American Coil</u> Address <u>16841 10 Mile Rd</u> <u>Eastpointe MI 48021</u> ☒ Fund Raiser	Purpose: <u>beer tappr</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/16/2007</u>	<u>30.00</u>
Expenditure # 28 Name <u>MI Beer & Wine Wholesalers PAC</u> Address <u>332 Townsend Street</u> <u>Lansing MI 48933</u> ☒ Fund Raiser	Purpose: <u>Cost of food and rental</u> Expenditure Code <u>FE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/22/2007</u>	<u>1248.99</u>
Expenditure # 29 Name <u>Macomb County Democrats</u> Address <u>230 North Avenue</u> <u>Mount Clemens MI 48043</u> ☐ Fund Raiser	Purpose: <u>ad in program</u> Expenditure Code <u>PA</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/17/2007</u>	<u>33.00</u>
Expenditure # 30 Name <u>American Cancer Society</u> Address <u>38425 Garfield</u> <u>Clinton Township MI 48038</u> ☐ Fund Raiser	Purpose: <u>donation</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/18/2007</u>	<u>250.00</u>
Subtotal this page			<u>1814.97</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 31 Name <u>CTE Barb Ziarko</u> Address <u>13805 Deepwood</u> <u>Starling Heights MI 48315</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2007</u>	<u>100.00</u>
Expenditure # 32 Name <u>CTE Maria Schmidt</u> Address <u>35755 Woodville</u> <u>Starling Heights MI 48312</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2007</u>	<u>100.00</u>
Expenditure # 33 Name <u>Major</u> Address <u>30800 Little Mack</u> <u>Roseville MI 48066</u> ☐ Fund Raiser	Purpose: <u>Donation of food for Cancer Society event</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2007</u>	<u>205.39</u>
Expenditure # 34 Name <u>Steve & Barry's University</u> Address <u>Grafton</u> <u>Roseville MI 48066</u> ☐ Fund Raiser	Purpose: <u>donation of shirts to cancer</u> <u>500.0000%</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/21/2007</u>	<u>180.11</u>
Expenditure # 35 Name <u>State of MI Capitol Committee</u> Address <u>PO Box 30014</u> <u>Lansing MI 48909</u> ☐ Fund Raiser	Purpose: <u>Seals & bags for students @</u> <u>3000 P&H</u> Expenditure Code <u>CC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/22/2007</u>	<u>179.30</u>
Subtotal this page			<u>764.80</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 36 Name <u>State of MI Capitol Committee</u> Address <u>PO Box 30014</u> <u>Lansing MI 48908</u> ☐ Fund Raiser	Purpose: <u>Framing of seal for Eagle Sco-</u> <u>tt</u> Expenditure Code <u>GI</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/2007</u>	<u>16.00</u>
Expenditure # 37 Name <u>Shrine Highlanders</u> Address <u>c/o Peter Flaton @ Ruml Police</u> <u>Roseville MI 48068</u> ☒ Fund Raiser	Purpose: <u>Band</u> Expenditure Code <u>ET</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/30/2007</u>	<u>100.00</u>
Expenditure # 38 Name <u>World Gardenland</u> Address <u>29800 Gratiot</u> <u>Roseville MI 48068</u> ☐ Fund Raiser	Purpose: <u>district office flowers</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/11/2007</u>	<u>100.00</u>
Expenditure # 39 Name <u>MI Democrat Party</u> Address <u>606 Townsend</u> <u>Lansing MI 48933</u> ☐ Fund Raiser	Purpose: <u>dues</u> Expenditure Code <u>PP</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/2007</u>	<u>125.00</u>
Expenditure # 40 Name <u>Enhanced Wireless</u> Address <u>32146 Beaconsfield</u> <u>Roseville MI 48068</u> ☐ Fund Raiser	Purpose: <u>phone battery</u> Expenditure Code <u>EQ</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/07/2007</u>	<u>63.50</u>
Subtotal this page			<u>404.50</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Swiftoldi State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 41 Name <u>Sprint</u> Address <u>31100 Graftot</u> <u>Roseville MI 48065</u> ☐ Fund Raiser	Purpose: <u>phone accessories</u> Expenditure Code <u>EQ</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/07/2007</u>	<u>158.98</u>
Expenditure # 42 Name <u>CTE Karen Wojcik</u> Address <u>28335 Waverly</u> <u>Roseville MI 48065</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/09/2007</u>	<u>100.00</u>
Expenditure # 43 Name <u>Meijer</u> Address <u>30800 Little Mack</u> <u>Roseville MI 48065</u> ☐ Fund Raiser	Purpose: <u>district office supplies</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/14/2007</u>	<u>122.89</u>
Expenditure # 44 Name <u>Clarke American Checks</u> Address <u>10831 Laureate</u> <u>San Antonio TX 78248</u> ☐ Fund Raiser	Purpose: <u>order checks</u> Expenditure Code <u>BK</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/22/2007</u>	<u>56.50</u>
Expenditure # 45 Name <u>CTE Richard Sleenland</u> Address <u>18455 Rockport</u> <u>Roseville MI 48065</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/29/2007</u>	<u>100.00</u>
Subtotal this page			<u>538.17</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Sutcliffe State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 46 Name <u>DeLaSalle Collegiate Soccer</u> Address <u>14600 Common</u> <u>Warren MI 48098</u> ☐ Fund Raiser	Purpose: <u>sponsor @ golf outing</u> Expenditure Code <u>PP</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/2007</u>	<u>200.00</u>
Expenditure # 47 Name <u>Grand Traverse Resort & Spa</u> Address <u>100 Grand Traverse Village</u> <u>po box 404</u> <u>Acme MI 49810</u> ☐ Fund Raiser	Purpose: <u>lodging</u> Expenditure Code <u>TE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/2007</u>	<u>309.50</u>
Expenditure # 48 Name <u>Council Of State Gov't</u> Address <u>701 East 22nd St</u> <u>Suite 110</u> <u>Lombard IL 60148</u> ☐ Fund Raiser	Purpose: <u>Registration fee for conference</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/2007</u>	<u>300.00</u>
Expenditure # 49 Name <u>Thrifty Florist</u> Address <u>29600 Gratiot</u> <u>Roseville MI 48068</u> ☐ Fund Raiser	Purpose: <u>flowers</u> Expenditure Code <u>GI</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2007</u>	<u>63.60</u>
Expenditure # 50 Name <u>Perfect Plumbing</u> Address <u>Gratiot</u> <u>Macomb MI 48044</u> ☐ Fund Raiser	Purpose: <u>district office expense</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/2007</u>	<u>362.00</u>

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 51 Name <u>Walter Nowinski</u> Address <u>8641 Hickory</u> <u>Stirling Heights MI 48312</u> ☐ Fund Raiser	Purpose: <u>donation for sponsor ice cream social</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/24/2007	100.00
Expenditure # 52 Name <u>GTE Jonathan Switalski</u> Address <u>31705 Forest Lane</u> <u>Warren MI 48093</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/13/2007	100.00
Expenditure # 53 Name <u>GTE Valde Garcia</u> Address <u>P O Box 2130</u> <u>Howell MI 48844</u> ☐ Fund Raiser	Purpose: <u>fundraiser ticket</u> Expenditure Code <u>TC</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/27/2007	100.00
Expenditure # 54 Name <u>Perfect Plumbing</u> Address <u>Grafton</u> <u>Mason MI 48044</u> ☐ Fund Raiser	Purpose: <u>district office expense</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/03/2007	196.00
Expenditure # 55 Name <u>Home Depot</u> Address <u>20500 Thirteen Mile</u> <u>Riceville MI 48066</u> ☐ Fund Raiser	Purpose: <u>district office expense -supplies</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/30/2007	184.36

Subtotal this page

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

570.36

Enter this total
on line 8a of
Summary Page

10044260492



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

294022

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name GTE Michael Switalski State Senator

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 58 Name Home Depot Address 20900 Thirteen Mile Roseville MI 48066 ☐ Fund Raiser	Purpose: <u>district office supplies</u> Expenditure Code _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/24/2007	44.57

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

44.57
12402.08

Enter this total
on line 6a of
Summary Page

10044260493



2. Committee Name CTE Michael Switzki State Senator

- USE A SEPARATE SHEET FOR EACH EVENT-

***Includes In-Kind Contributions and All Expenditures Made For the Event**[illegible]

- Authority granted under P.A. 388 of 1978

10044260494



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

29-0022

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 510478-1

2. Committee Name CTE Michael Switalski State Senator

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>03/18/2007</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) 400	5. Type of Fund Raising Activity Irish Party '07	6. Address and Name (If any) of the place where the activity was held Irish Party '07 Grosbeck Hwy Clinton Twp MI 48038 ☒ Private Residence
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7. Total Contributions of \$20.00 or less 2153.00

8. Total Contributions of \$20.01 or more 5050.00

9. SUBTOTAL (Add lines 7 and 8) 7203.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 7203.00

12. Total Cost of Event* 3247.87

*Includes In-Kind Contributions and All
Expenditures Made For the Event

13. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-K), 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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