



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

Committee I.D. Number

77457

Committee Name

CTE Paul Pirrone

Committee's Mailing Address

PO BOX 55
Samaria, MI 48177

Area Code and Phone

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

3. This Statement covers From:

to 7/17/2016

4. Candidate Last Name

First Name

M.I.

Pirrone

Paul

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

Supervisor

4b. County of Residence

Monroe

6. Treasurer's Name & Residential Address

Emily Hafer
10515 Orchard St.
Samaria, MI 48177

Area Code & Phone

7403570236

7. Treasurer's Business Address

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

Area Code and Phone

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

August 2, 2016

9c. ☐ Annual Statement (Coverage Year)

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

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/we certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/we request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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 cannot be waived.

10. Verification: I/we certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Emily Hafer

Type or Print Name

Signature

Date

7/19/16

Candidate

Paul Pirrone

Type or Print Name

Signature

Date

7/19/16



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS

Column I
This Period

Column II
Cumulative this election cycle

3. Contributions

a. Itemized (Schedule 1A - Column 6) (3a.) \$ 8624.00

b. Unitemized (less than \$20.01 each - no Schedule) (3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions" (3c.) \$ 8624.00

4. Other Receipts (Schedule 1A - 1, Column 6) (4.) \$ 0

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4) (5.) \$ 8624.00

(18.) \$ 8624.00

(19.) \$ 0

(20.) \$ 8624.00

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-1K, Column 7) (6.) \$ 1076.72

7. In-Kind Expenditures (Schedule 1B-1K, Column 6) (7.) \$ 0

(21.) \$ 1076.72

(22.) \$ 0

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6) (8a.) \$ 5086.58

b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8b.) \$ 0

c. Unitemized (less than \$50.01 each - no Schedule) (8c.) \$ 0

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (9.) \$ 5086.58

(23.) \$ 5086.58

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6) (10a.) \$ 1300.00

b. Unitemized (less than \$50.01 each - no Schedule) (10b.) \$ 0

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b) (11.) \$ 1300.00

(24.) \$ 1300.00

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E) (12a.) \$ 0

b. Owed to the Committee (Schedule 1E) (12b.) \$ 0

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.) (13.) \$ 0

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts) (14.) + \$ 8624.00

(15.) = \$ 8624.00

15. SUBTOTAL Add lines 13 and 14
(Add lines 9 and 11) (16.) - \$ 6386.58

16. Amount expended during reporting period
(Add lines 9 and 11) (16.) - \$ 6386.58

17. ENDING BALANCE
(Subtract line 16 from line 15) (17.) \$ 2237.42



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paw Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. Contribution #1 PAC Receipt? ☒ YES 4. Date of Receipt 03/04/2016
Name & Address: Iron Workers Political Action League
Multi Candidate Committee
1750 New York Ave. N.W.
Washington, D.C. 20006
5. If over \$100.00 cumulative, please provide:

\$ 499.00

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt 04/11/2016

Name & Address: U.A. Local 50 Plumbers & Steamfitters
950 Caple Blvd.
Northwood, OH 43619

\$ 500.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/02/2016

Name & Address: Mike Jacobs
6698 Sandywell Dr.
Temperance, MI 48182

\$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/03/2016

Name & Address: Todd Bruning
8019 Summerfield Rd.
Lambertville, MI 48144

\$ 200.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Todd Guns LLC

Business Address 8019 Summerfield Rd. Lambertville, MI

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser 48144

Page Subtotal 1299.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 05/04/2016

Name & Address:

Scott Ruetz
2816 Sanibel Ln.
Lambertville, MI 48144

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation VP of Operations Employer Performance Packaging

[Click Here for Memo Itemization](#)

Business Address 5219 Telegraph Rd. Toledo, OH 43612

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/04/2016

Name & Address:

Timothy Janney
3818 Consear Rd.
Lambertville, MI 48144

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Retail Sales Employer Janney Servicecenter

[Click Here for Memo Itemization](#)

Business Address 5820 Sccor Rd. Toledo, OH 43623

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/05/2016

Name & Address:

Gary King
8654 Terrance Dr.
Lambertville, MI 48144

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2016

Name & Address:

Jim Nyhan
8277 Argyll
Temperance, MI 48144

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employed Employer Consultant

[Click Here for Memo Itemization](#)

Business Address PO Box 279 Temperance, MI 48182

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

Page Subtotal

\$ 800.00

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

\$ 8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2016

Name & Address:

Richard A. Kenny
2345 W Dean Rd
Temperance, MI 48182

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Forest View Lanes

[Click Here for Memo Itemization](#)

Business Address 2345 W Dean Rd. Temperance, MI 48182

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2016

Name & Address:

John Jones
7370 Lewis
Temperance, MI 48182

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employed Employer Decker

[Click Here for Memo Itemization](#)

Business Address 7370 Lewis Temperance, MI 48182

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2016

Name & Address:

Jason Jindo
6975 Lewis Ave
Temperance, MI 48182

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employed Employer Liquor Cabinet

[Click Here for Memo Itemization](#)

Business Address 7370 Lewis Ave Temperance, MI 48182

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/07/2016

Name & Address:

Marc C Malley
8920 Galloway Ct.
Sylvania, OH 43560

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal

700.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/2016

Name & Address:

Steven Lennex
7661 Forest Valley Rd.
Lambertville, MI 48144

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/09/2016

Name & Address:

Terrie Ball
2812 Round Lake Hwy
Manitou Beach, MI 49253

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/10/2016

Name & Address:

Joe Wehrle
6877 Forest Run Rd.
Temperance, MI 48144

\$ 250.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Owner Employer Wehrle Development LTD.

Business Address 6877 Forest Run Rd Temperance, MI 48144

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/10/2016

Name & Address:

Dennis Warner
8941 Lewis Ave.
Temperance, MI 48182

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

550.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 05/13/2016

Name & Address:

Timothy D. Churchill
9042 Lewis Ave
Temperance, MI 48144

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/13/2016

Name & Address:

Marci Rose Sinay
PO Box 209
Lambertville, MI 48144

\$ 400.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Owner Employer Lily ann cabinets

Business Address 2075 Beecher Adrian, MI 49221

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/13/2016

Name & Address:

Tommy Swan
7846 Crabb Rd.
Temperance, MI 48182

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:

Greg Masserant
7482 Windsor Ln
Lambertville, MI 48144

\$ 200.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Owner Employer Masserant

Business Address 8480 Secor Rd. Lambertville, MI

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser 48144

Page Subtotal 800.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE PAUL PIRRONI

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:
Kimberly L. Pfitzer
8245 Argyll
Lambertville, MI 48144

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:
Gene Stock
9289 Crabb Rd.
Temperance, MI 48144

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:
Bret Hicks
9355 Lewis Ave STE D
Temperance, MI 48182

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:
Jennifer Moffitt
2210 Stirrup Dr.
Temperance, MI 48182

\$ 200.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation Human Services Employer State of MI Dept of Health
Business Address 201 Townsend St - Lansing, MI 48933

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

[Click Here for Memo Itemization](#)

Page Subtotal 500.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77457
2. Committee Name CTE Paul Pirroni

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:

Duane Horst
3745 Centennial Rd
Sylvania, OH 43560

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Heating & Cooling Contractor Employer Horst Heating & Cooling

Click Here for Memo Itemization

Business Address 3745 Centennial Rd Sylvania, OH 43560

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:

Mark Barker
6140 Zink Rd
Maybee, MI 48159

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Barker Construction

Click Here for Memo Itemization

Business Address PO Box 170 Maybee, MI 48159 and development

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:

Sivasupiramanian Sriharan
4624 Summerlyn Blvd.
Lambertville, MI 48144

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2016

Name & Address:

Daryl Lajiness
3381 Quail Hollow
Lambertville, MI 48144

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

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

Page Subtotal

1000.00

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

8624.00

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Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/16/2014

Name & Address:

SCOTT E. Bolin
6622 Summerlyn Blvd.
Lambertville, MI 48144

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Developer Employer Summerlyn Builders

Click Here for Memo Itemization

Business Address 6622 Summerlyn Blvd Lambertville, MI 48144

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/16/2016

Name & Address:

Larry King
9192 Summerfield Rd.
Temperance, MI 48182

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Bedford Fence

Click Here for Memo Itemization

Business Address 9192 Summerfield Rd Temperance, MI 48182

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 05/18/2016

Name & Address:

Nick Francis
PO Box 573
Temperance, MI 48182

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer NFA Automotive

Click Here for Memo Itemization

Business Address PO Box 573 Temperance, MI 48182

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 05/20/2016

Name & Address:

Jerry Edmondson
8715 Secor Rd.
Lambertville, MI 48144

\$ 300.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer JLC Enterprises

Click Here for Memo Itemization

Business Address 8715 Secor Rd Lambertville, MI 48144

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

Page Subtotal

1100.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 05/28/2016

Name & Address:

Terry McCormack
15087 Todd Rd.
Petersburg, MI 49270

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation Chairman of the board Employer Cardone Industries

[Click Here for Memo Itemization](#)

Business Address 5501 Whitaker Ave Philadelphia, PA 19124

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 06/09/2016

Name & Address:

Charlotte Dymarkowski
PO Box 210
Swanton, OH 43358

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Foundation Steel

[Click Here for Memo Itemization](#)

Business Address PO Box 210 Swanton, OH 43358

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 06/26/2016

Name & Address:

Lucille Pirrone
7363 Grey Estates Dr.
Lambertville, MI 48144

\$ 25.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 06/26/2016

Name & Address:

David Uhl
1355 Meanwell Rd.
Dundee, MI 48131

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal

425.00

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

8694.00

Enter this total on
line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Timothy Janney
3818 Consear Rd.
Lambertville, MI 48144

\$ 30.00 \$ 230.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

John Potrzebowski
2651 W. Temperance
Temperance, MI 48182

\$ 25.00 \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Gaspare Pirrone
4490 W. Samaria Rd.
Temperance, MI 48182

\$ 50.00 \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Gene Stock
9289 Crabb Rd.
Temperance, MI 48182

\$ 50.00 \$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Retired Employer _____

Business Address _____

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

Page Subtotal

155.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Nathalie T. Jacobs
6698 Sandywell Dr.
Temperance, MI 48182

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Robert Tienvieri
3962 Coachman Dr.
Lambertville, MI 48144

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Timothy Janney
3818 Conser Rd.
Lambertville, MI 48144

\$ 50.00 \$ 280.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Retail Sales Employer Janney Service Center

Business Address 5820 Secor Rd Toledo, OH 43623

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016

Name & Address:

Greg Moore
5425 Forest Dr.
Monroe, MI 48161

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 200.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 8624.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016
Name & Address:

Randall Wilson
2549 Sandpiper Rd.
Lambertville, MI 48144

\$ 20.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016
Name & Address:

Jeff Wilson
2959 Bendigo Ln.
Lambertville, MI 48144

\$ 150.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation Program Manager Employer Dana Holding Corp.

[Click Here for Memo Itemization](#)

Business Address 3939 Technology Dr. Maumee, OH 43537

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016
Name & Address:

Joshua McCormack
15077 Todd Rd
Petersburg, MI 49870

\$ 50.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2016
Name & Address:

Gaspare Pirrone
4490 W. Samana Rd.
Temperance, MI 48182

\$ 500.00 \$ 550.00

5. If over \$100.00 cumulative, please provide:

Occupation Crane Operator Employer Black & Veatch

[Click Here for Memo Itemization](#)

Business Address 11401 Lamar Ave Overland Park, KS 66211

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

Page Subtotal

720.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77657
2. Committee Name CTE Paul Pirrone

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 06/24/2016

Name & Address:

Susan Kraft
5902 Midwest Ave
Toledo, OH 43613

\$ 25.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 07/08/2016

Name & Address:

Lori Pirrone
2126 Daisy Ct.
Temperance, MI 48182

\$ 750.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Scheduling Coordinator Employer Lenhart Orthodontics

Business Address 4323 North Holland Sylvania Rd. Toledo, OH

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser 43623

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal

775.00

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

8624.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

077657

2. Committee Name

CTE Paul Pirrone

Name and Address from whom received contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were purchased

7. Amount or Fair Market Value

8. Cumulative for Election Cycle (Through date in Item 5)

Contribution #1 PAC Receipt? ☐ Yes

Name & Address:

Paul Pirrone
2652 W Temperance
Temperance, MI 48182

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Business Address:

Viking Erectors
PO Box 1336
McMurray, PA
15317

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Ad

\$ 480.00 \$ 480.00

5. Date Of Receipt 06/25/16

6. Vendor Name & Address:

Bedford Press
8336 Monroe Rd #119
Lambertville, MI 48144

Click Here for Memo Itemization

Contribution #2 PAC Receipt? ☐ Yes

Name & Address:

Paul Pirrone
2652 W. Temperance
Temperance, MI 48182

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

Viking Erectors
PO Box 1336
McMurray, PA
15317

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Ad

\$ 2166.72 \$ 746.72

5. Date Of Receipt 06/25/16

6. Vendor Name & Address:

Bedford Press
8336 Monroe Rd #119
Lambertville, MI 48144

Click Here for Memo Itemization

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

Paul Pirrone
2652 W. Temperance
Temperance, MI 48182

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

Viking Erectors
PO Box 1336
McMurray, PA
15317

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Ad

\$ 330.00 \$ 1076.72

5. Date Of Receipt 07/16/16

6. Vendor Name & Address:

Bedford Press
8336 Monroe Rd #119
Lambertville, MI 48144

Click Here for Memo Itemization

Page Subtotal

1076.72

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

1076.72

Enter this total
on line 6 of Summary
Page

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 77657
2. Committee Name CTE Paul Pirrone

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Graphic Signs</u> Address <u>10931 Summerfield Rd.</u> <u>Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>Alter Political Signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/24/16</u> Date Click Here for Memo Itemization Type	<u>\$ 345.00</u>
Expenditure #2 Name <u>GO Daddy</u> Address <u>2299 W. Obispo Ave</u> <u>Suite #201</u> <u>Gilbert, AZ 85233</u> ☐ Fund Raiser	Purpose: <u>Website</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/7/16</u> Date Click Here for Memo Itemization Type	<u>\$ 20.17</u>
Expenditure #3 Name <u>Godaddy</u> Address <u>2299 W. Obispo Ave.</u> <u>Suite #201</u> <u>Gilbert, AZ 85233</u> ☐ Fund Raiser	Purpose: <u>Website</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/7/16</u> Date Click Here for Memo Itemization Type	<u>\$ 12.72</u>
Expenditure #4 Name <u>Vistaprint</u> Address <u>275 Wyman St.</u> <u>Waltham, MA 02451</u> ☐ Fund Raiser	Purpose: <u>Cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/8/16</u> Date Click Here for Memo Itemization Type	<u>\$ 59.59</u>
Expenditure #5 Name <u>Vistaprint</u> Address <u>275 Wyman St.</u> <u>Waltham, MA 02451</u> ☐ Fund Raiser	Purpose: <u>Cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/8/16</u> Date Click Here for Memo Itemization Type	<u>\$ 17.49</u>

Subtotal this page

454.97

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

5086.58

Enter this total
on line 8a of
Summary Page

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number: 77657
2. Committee Name: CTE Paul Pirrone

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Wix.com</u> Address ☐ Fund Raiser	Purpose: <u>Secure website</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/9/16</u> Date	\$ <u>9.90</u>
Expenditure #2 Name <u>Godaddy</u> Address <u>2299 W. Obispo Ave</u> <u>Suite # 201</u> <u>Gilbert, AZ 85233</u> ☐ Fund Raiser	Purpose: <u>Website</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/9/16</u> Date	\$ <u>50.63</u>
Expenditure #3 Name <u>HELP Printers</u> Address <u>9673 Lewis Ave</u> <u>Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>1-sided cards for trade fair</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/11/16</u> Date	\$ <u>132.39</u>
Expenditure #4 Name <u>Stock Sports</u> Address <u>9289 Crabb Rd.</u> <u>Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>Shirts</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/18/16</u> Date	\$ <u>598.90</u>
Expenditure #5 Name <u>Graphic Signs</u> Address <u>10931 Summerfield Rd.</u> <u>Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>Reprint of "paid for by" signs</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/11/16</u> Date	\$ <u>146.28</u>

Subtotal this page

938.10

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

5086.58

Enter this total
on line 8a of
Summary Page

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 77657
2. Committee Name CTE Paul Pirrone

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: <u>Kroger</u> Address: <u>3462 W. Sterns</u> <u>Temperance, MI 48182</u> ☒ Fund Raiser	Purpose: <u>Food for Fundraiser</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/13/16</u> Date	<u>\$ 117.77</u>
Expenditure #2 Name: <u>Kroger</u> Address: <u>3462 W. Sterns</u> <u>Temperance, MI 48182</u> ☒ Fund Raiser	Purpose: <u>Food for Fundraiser</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/14/16</u> Date	<u>\$ 10.10</u>
Expenditure #3 Name: <u>Kroger</u> Address: <u>3462 W. Sterns</u> <u>Temperance, MI 48182</u> ☒ Fund Raiser	Purpose: <u>Food for Fundraiser</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/14/16</u> Date	<u>\$ 30.33</u>
Expenditure #4 Name: <u>HELP Printers</u> Address: <u>9673 Lewis Ave</u> <u>Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>Advertisements</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/23/16</u> Date	<u>\$ 1196.94</u>
Expenditure #5 Name: <u>Colonial Sign & Display Co.</u> Address: <u>5240 Lewis Ave</u> <u>Toledo, OH 43612</u> ☐ Fund Raiser	Purpose: <u>Yard Signs</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/16</u> Date	<u>\$ 959.89</u>

Subtotal this page 2315.03

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 5086.58

Enter this total
on line 8a of
Summary Page

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 77657
2. Committee Name CTE Paul Pirrone

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: <u>Sage</u> Address: <u>8505 Secor Rd. Lambertville, MI 48144</u> ☒ Fund Raiser	Purpose: <u>Food for Fundraiser</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/16</u> Date	<u>\$ 250.00</u>
Expenditure #2 Name: <u>Sage</u> Address: <u>8505 Secor Rd. Lambertville, MI 48144</u> ☒ Fund Raiser	Purpose: <u>Food for Fundraiser</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/16</u> Date	<u>\$ 900.00</u>
Expenditure #3 Name: <u>Mike Jacobs</u> Address: <u>4698 Sandynwell Dr. Temperance, MI 48182</u> ☐ Fund Raiser	Purpose: <u>Bedford Now Ad.</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/5/16</u> Date	<u>\$ 228.48</u>
Expenditure #4 Name: _____ Address: _____ ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name: _____ Address: _____ ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 1378.48

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 5086.58

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE
(For use by officeholders only)

1. Committee I. D. Number 77657
2. Committee Name CTE Paul Pirrone

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Emily Hafer 10515 Orchard Samaria, MI 48177	Purpose Payment for Record keeping services	5/15/16 Date	\$ 300. ⁰⁰
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>00</u> ☐ Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: Taylor Pirrone 2126 Daisy Ct. Temperance, MI 48182	Purpose Payment for campaign Coordinator Services	06/10/16 Date	\$ 800. ⁰⁰
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>00</u> ☐ Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: Emily Hafer 10515 Orchard Samaria, MI 48177	Purpose Payment for Record keeping services	07/17/16 Date	\$ 200. ⁰⁰
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>00</u> ☐ Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address:	Purpose	Date	\$
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____ ☐ Fund Raiser	Click for Memo Itemization Type	

Subtotal this page 1300.⁰⁰

Grand Total of all Schedules 1C
(Complete on last page of Schedule) 1300.⁰⁰

Enter this total
on line 10a of
Summary Page

PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number

77657

2. Committee Name

CTE Paul Pirrone

USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

05/16/2016

4. Number of Individuals Attending
or Participating (whichever is
greater)

57

5. Type of Fund Raising Activity

Get
together.

6. Address and Name (If any) of the
place where the activity was held.

6622 Summerlyn

Lambertville, MI 48144



Private Residence

7. Total Contributions

5100.⁰⁰

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

5100.⁰⁰

10. Total Cost of Event

158.20

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- 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.



CANDIDATE COMMITTEE
COVER PAGE

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

Committee I.D. Number

77657

Committee Name

CTE Paul Pirrone

i. Committee's Mailing Address

PO Box 55
Samaria, MI 48177

Area Code and Phone 740-357-0236

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

7. Treasurer's Business Address

3. This Statement covers From: 07/18/16 to 08/22/16

4. Candidate Last Name

Pirrone

First Name

Paul

M.I.

V

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

Supervisor

4b. County of Residence

Monroe

6. Treasurer's Name & Residential Address

Emily Hafer
10515 Orchard St.
Samaria, MI 48177

Area Code & Phone 740 357 0236

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

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☐ Pre-Election

OR

9b. ☒ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☐ Convention

☐ Special

☐ General

☐ School

☐ Caucus

Date of Election, Convention or Caucus

August 2, 2016

9c. ☐ Annual Statement (Coverage Year)

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

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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 cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Emily Hafer

Type or Print Name

Signature

Date 8/30/16

Candidate

Paul Pirrone

Type or Print Name

Signature

Date 8-27-16

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

77657

2. Committee Name

CTE Paul Pirrone

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Tara Dunnigan</u> Address _____ ☐ Fund Raiser	Purpose: <u>Ad for Golf Outing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/16</u> Date	<u>\$ 100.⁰⁰</u>
Expenditure #2 Name <u>Facebook</u> Address <u>Menlo Park, CA</u> ☐ Fund Raiser	Purpose: <u>Ad on Facebook</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/18/16</u> Date	<u>\$ 25.26</u>
Expenditure #3 Name <u>Facebook</u> Address <u>Menlo Park, CA</u> ☐ Fund Raiser	Purpose: <u>Ad on Facebook</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/18/16</u> Date	<u>\$ 50.01</u>
Expenditure #4 Name <u>Crossing River Studio</u> Address <u>3971 Hoover Rd #40</u> <u>Grove City, OH 43123</u> ☐ Fund Raiser	Purpose: <u>Consulting for Facebook Ads</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/18/16</u> Date	<u>\$ 75.00</u>
Expenditure #5 Name <u>Facebook</u> Address <u>Menlo Park, CA</u> ☐ Fund Raiser	Purpose: <u>Ad on Facebook</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/18/16</u> Date	<u>\$ 250.30</u>

Subtotal this page

500.47

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

500.47

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 776 57

2. Committee Name CTE Paul Pirrone

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>0</u>	(18.) \$ <u>8624.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>0</u>	(20.) \$ <u>8624.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>1076.72</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>500.47</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>500.47</u>	(23.) \$ <u>5587.05</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>1300.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>2237.42</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>0</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>2237.42</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>500.47</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1736.95</u>	