MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
05 OCT 28 PM 2:53
CARMELLA SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS MICHIGAN

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.

This statement covers From: 8 25 05 (Mo Day Year) To 10 23 05 (Mo Day Year)

1. Committee I.D. Number
137666

2. Committee Name
Committe to elect John A. Sexauer

4. Candidate Last Name: Sexauer First Name: John M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
City coural Fraser Mi

4b. County of Residence: Macomb

5. Committee's Mailing Address
32121 Lincolnshire
Fraser 48026

Area Code and Phone 586-415-0385

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

6. Treasurer's Name & Residential Address
Colleen Sexauer

Area Code & Phone (586) 415-0385

7. Treasurer's Business Address
32121 Lincolnshire
Fraser

Area Code and Phone (586) 415 0385

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

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
11 08 05
Month Day Year

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
_____
Month Day Year

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: Colleen Sexauer (Type or Print Name) Colleen Sexauer (Signature) Date 10 28 05 (Mo Day Year)

Candidate: John Sexauer (Type or Print Name) John Sexauer (Signature) Date 10 28 05 (Mo Day Year)

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 137666

2. Committee Name Committee to Elect John Sessler

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	3993.59	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	3993.59	(18.) $ 3993.59
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $		(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	3993.59	(20.) $ 3993.59
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $		(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $		(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	3993.59	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $		
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	3993.59	(23.) $ 3993.59
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $		
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $		(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	3993.59	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $		

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.) + $	3993.59
15. SUBTOTAL Add lines 13 and 14	(15.) = $	3993.59
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	3993.59
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	0 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 132666

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions 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 10-28-05 Name: John A Setauer Address: 32121 Lincolnshire Fraser, Mi **5. If over $100.00 cumulative, please provide:** Occupation Retired Employer Police Officer Business Address 32121 Lincolnshire Fraser Type of Contribution: ☐ Direct ☒ Loan from a person ☐ Fund Raiser	3993.59	3993.59
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt Name: Address: **5. If over $100.00 cumulative, please provide:** Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt Name: Address: **5. If over $100.00 cumulative, please provide:** Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt Name: Address: **5. If over $100.00 cumulative, please provide:** Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	3993 59	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on line 3 of Summary Page.

Page _____ of _____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137666
2. Committee Name Committee to Elect John Sergour

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 US Postal Service Address Fraser, MI ☐ Fund Raiser	Purpose: Mailers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/04	319.90
Expenditure #2 Name US Postal Service Address Fraser, MI ☐ Fund Raiser	Purpose: Mailers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/19	185.00
Expenditure #3 Name America's Finest Printers Address 17060 Masonic Fraser ☐ Fund Raiser	Purpose: Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/19	132.50
Expenditure #4 Name America's Finest Print Address 17060 Masonic Fraser ☐ Fund Raiser	Purpose: Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/14	561.80
Expenditure #5 Name America's Finest Print Address 17060 Masonic Fraser ☐ Fund Raiser	Purpose: Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/27	46.84

Subtotal this page 1246.04
Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 13766
2. Committee Name Committee to Elect John Sexauer

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 America Finest Print Address 17060 Masonic Fraser ☐ Fund Raiser	Purpose: Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/18	58.00
Expenditure #2 Name Sawicki & Son Address 1521 W LaFayette Detroit ☐ Fund Raiser	Purpose: Signs & TShirts ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/29	1412.98
Expenditure #3 Name Sawicki & Son Address 1521 W. LaFayette Detroit ☐ Fund Raiser	Purpose: Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/06	914.04
Expenditure #4 Name Home Depot Address 20500 13 Mile Roseville ☐ Fund Raiser	Purpose: Sign Material ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/30	283.94
Expenditure #5 Name Home Depot Address 20500 13 Mile Roseville ☐ Fund Raiser	Purpose: Sign Glue ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/07	17.16

Subtotal this page 2686.12
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137666
2. Committee Name Committee to Elect John Stevens

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 Sears Address Masonic Contract ☐ Fund Raiser	Purpose: Staple Gun ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/30	61 43
Expenditure #2 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		

Subtotal this page	61 43
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3993 59

Enter this total on line 8a of Summary Page

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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137666
2. Committee Name Committee to Elect John Sraver

This Schedule itemizes:
a. ☑ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: John A Sraver	4. Type: loan 5. Date Debt Was Incurred: 6. Original Amount of Debt: $	/ / $ / / $ / / $ / / $ / / $	$ 0	$ 3993 59 ☐ FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: $	/ / $ / / $ / / $ / / $ / / $	$	☐ FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: $	/ / $ / / $ / / $ / / $ / / $		☐ FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee) 3993 59

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

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

Page _____ of _____