

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00066925	2 Total pages filed: 162	
3 COMMITTEE NAME Comerica Inc. PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/07/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 1717 Main Street MC 6554 Dallas, TX 75201			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Daniel	MI MI	Receipt # Amount
	NICKNAME	LAST Donohoe	SUFFIX	Date Processed
				Date Imaged
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1717 Main St. MC 6554 Dallas, TX 75201			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 650282 MC 6554 Dallas, TX 75201			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
		(214) 462-4402		
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)			
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input checked="" type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5			
11 PERIOD COVERED	Month Day Year	THROUGH		Month Day Year
	08/26/2024			09/25/2024

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**MONTHLY FILING GPAC REPORT:
PURPOSE AND TOTALS**

**FORM MPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Comerica Inc. PAC	13 Filer ID (Ethics Commission Filers) 00066925
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Angie Chen Button State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 1,864.56
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,049.34
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 169,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 388,855.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Daniel Donohoe

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ann Johnson State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Salman Bhojani State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Cole Hefner State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC	13 Filer ID (Ethics Commission Filers) 00066925
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Drew Darby State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Giovanni Capriglione State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jay Dean State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jeffery Leach State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Joe Moody State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Morgan Meyer State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Oscar Longoria State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rafael Anchia State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ryan Guillen State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Sam Harless State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Dade Phelan State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Stanley Lambert State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Trent Ashby State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Matt Shaheen State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Todd Hunter State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Toni Rose State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Brent Hagenbuch State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Carol Alvarado State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Cesar Blanco State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Hinojosa Juan State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LaMantia Morgan State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Nathan Johnson State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Lady Phil King State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Royce West State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Comerica Inc. PAC		13 Filer ID (Ethics Commission Filers) 00066925
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Tan Parker State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Joan Huffman State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Donna Campbell State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - MPAC

17 COMMITTEE NAME Comerica Inc. PAC		18 Filer ID (Ethics Commission Filers) 00066925
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,049.34
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 169,000.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/125 Rpt: 14/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Andrew	7 Amount of Contribution (\$) \$12.47
	6 Contributor address; City; State; Zip Code Brooklyn, MI 49230-9747	
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Andrew	Amount of Contribution (\$) \$12.47
	Contributor address; City; State; Zip Code Brooklyn, MI 49230-9747	
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Monica	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Southfield, MI 48033-2520	
Principal occupation / Job title (See Instructions) LOAN CLOSING MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Monica	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Southfield, MI 48033-2520	
Principal occupation / Job title (See Instructions) LOAN CLOSING MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Patricia	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Southfield, MI 48033-6191	
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/125 Rpt: 15/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Patricia <hr/> 6 Contributor address; City; State; Zip Code Southfield, MI 48033-6191	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alitawi, Sonia <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170-5275	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) REG TRUST ADVISOR IV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alitawi, Sonia <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170-5275	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) REG TRUST ADVISOR IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambroziak, David <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-5510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambroziak, David <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-5510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/125 Rpt: 16/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amicucci, Tracey	7 Amount of Contribution (\$) \$28.27
	6 Contributor address; City; State; Zip Code Shelby Township, MI 48315-6913	
8 Principal occupation / Job title (See Instructions) INCENTIVE COMP DIRECTOR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amicucci, Tracey	Amount of Contribution (\$) \$28.27
	Contributor address; City; State; Zip Code Shelby Township, MI 48315-6913	
Principal occupation / Job title (See Instructions) INCENTIVE COMP DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jenae	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Morrison, CO 80465-1577	
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jenae	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Morrison, CO 80465-1577	
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Laura	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Houston, TX 77024-6216	
Principal occupation / Job title (See Instructions) ALT GRP MGR - CRE		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/125 Rpt: 17/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Laura <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-6216	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) ALT GRP MGR - CRE		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angonia, Eric <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028-3757	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angonia, Eric <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028-3757	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attl, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92128-4708	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attl, Matthew <hr/> Contributor address; City; State; Zip Code San Diego, CA 92128-4708	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/125 Rpt: 18/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Efen <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072-3534	7 Amount of Contribution (\$) \$6.92
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Efen <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072-3534	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aviles, Margareth <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034-5154	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aviles, Margareth <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034-5154	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Wilma <hr/> Contributor address; City; State; Zip Code Farmington Hills, MI 48334-2350	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) MGR II BRCO CONTROL TESTING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/125 Rpt: 19/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babb, Wilma <hr/> 6 Contributor address; City; State; Zip Code Farmington Hills, MI 48334-2350	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) MGR II BRCO CONTROL TESTING		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baer, Sarune <hr/> Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIR CREDIT APP & PUBLICATIONS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baer, Sarune <hr/> Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIR CREDIT APP & PUBLICATIONS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Corey <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002-7503	Amount of Contribution (\$) \$19.25
Principal occupation / Job title (See Instructions) EXEC DIRECTOR MM & BUS BANKING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Corey <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002-7503	Amount of Contribution (\$) \$19.25
Principal occupation / Job title (See Instructions) EXEC DIRECTOR MM & BUS BANKING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/125 Rpt: 20/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Jason	7 Amount of Contribution (\$) \$33.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057-1814	
8 Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Jason	Amount of Contribution (\$) \$33.00
	Contributor address; City; State; Zip Code Houston, TX 77057-1814	
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Senai	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Frisco, TX 75035-0106	
Principal occupation / Job title (See Instructions) DIR FIN PLANNING & ANALYSIS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Senai	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Frisco, TX 75035-0106	
Principal occupation / Job title (See Instructions) DIR FIN PLANNING & ANALYSIS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Nancy	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code West Bloomfield, MI 48323-2316	
Principal occupation / Job title (See Instructions) TALENT DEVELOPMENT MGR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/125 Rpt: 21/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Nancy <hr/> 6 Contributor address; City; State; Zip Code West Bloomfield, MI 48323-2316	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) TALENT DEVELOPMENT MGR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barwig, Kathryn <hr/> Contributor address; City; State; Zip Code Wyandotte, MI 48192-6226	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) OPERATIONS DEPARTMENT MGR II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barwig, Kathryn <hr/> Contributor address; City; State; Zip Code Wyandotte, MI 48192-6226	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) OPERATIONS DEPARTMENT MGR II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan, Theresa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-8109	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR RETAIL SALES ENABLEMENT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan, Theresa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-8109	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR RETAIL SALES ENABLEMENT		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/125 Rpt: 22/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckerman, Joseph <hr/> 6 Contributor address; City; State; Zip Code Plymouth, MI 48170-1094	7 Amount of Contribution (\$) \$8.07
8 Principal occupation / Job title (See Instructions) DIR CORP SUSTAINABILITY		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckerman, Joseph <hr/> Contributor address; City; State; Zip Code Plymouth, MI 48170-1094	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) DIR CORP SUSTAINABILITY		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-1413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-1413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Nathaniel <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070-2079	Amount of Contribution (\$) \$40.38
Principal occupation / Job title (See Instructions) CHIEF DE&I OFFICER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/125 Rpt: 23/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Nathaniel	7 Amount of Contribution (\$) \$40.38
6 Contributor address; City; State; Zip Code McKinney, TX 75070-2079		
8 Principal occupation / Job title (See Instructions) CHIEF DE&I OFFICER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Rebecca	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Canton, MI 48188-3211		
Principal occupation / Job title (See Instructions) FINANCE LEAD		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Rebecca	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Canton, MI 48188-3211		
Principal occupation / Job title (See Instructions) FINANCE LEAD		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Melany	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Oxford, MI 48371-6720		
Principal occupation / Job title (See Instructions) DIR LTS LOAN SERVICING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Melany	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code Oxford, MI 48371-6720		
Principal occupation / Job title (See Instructions) DIR LTS LOAN SERVICING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/125 Rpt: 24/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Norman 6 Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-3614	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bird, Norman Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-3614	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackaby, Douglas Contributor address; City; State; Zip Code Chesterfield, MI 48051-1780	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackaby, Douglas Contributor address; City; State; Zip Code Chesterfield, MI 48051-1780	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Gregory Contributor address; City; State; Zip Code Northville, MI 48168-9414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/125 Rpt: 25/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Gregory <hr/> 6 Contributor address; City; State; Zip Code Northville, MI 48168-9414	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloom, Jeffrey <hr/> Contributor address; City; State; Zip Code Corona Del Mar, CA 92625-1942	Amount of Contribution (\$) \$63.05
Principal occupation / Job title (See Instructions) MD NATL/SPEC - CRE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloom, Jeffrey <hr/> Contributor address; City; State; Zip Code Corona Del Mar, CA 92625-1942	Amount of Contribution (\$) \$63.05
Principal occupation / Job title (See Instructions) MD NATL/SPEC - CRE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bongard, Joel <hr/> Contributor address; City; State; Zip Code Canton, MI 48188-8506	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DIR-AML COMPLIANCE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bongard, Joel <hr/> Contributor address; City; State; Zip Code Canton, MI 48188-8506	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DIR-AML COMPLIANCE		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/125 Rpt: 26/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers, Darin <hr/> 6 Contributor address; City; State; Zip Code Macomb, MI 48044-2943	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) Sr. Bank Manager		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers, Darin <hr/> Contributor address; City; State; Zip Code Macomb, MI 48044-2943	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouchereau, Jean-Paul <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92673-7034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouchereau, Jean-Paul <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92673-7034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen Jr., Edgar <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27609-7007	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) PRESIDENT SE MARKET		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/125 Rpt: 27/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen Jr., Edgar <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27609-7007	7 Amount of Contribution (\$) \$62.00
8 Principal occupation / Job title (See Instructions) PRESIDENT SE MARKET		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Jeffrey <hr/> Contributor address; City; State; Zip Code Berkley, MI 48072-1876	Amount of Contribution (\$) \$19.24
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Jeffrey <hr/> Contributor address; City; State; Zip Code Berkley, MI 48072-1876	Amount of Contribution (\$) \$19.24
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasch, Glenn <hr/> Contributor address; City; State; Zip Code Macomb, MI 48042-5629	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasch, Glenn <hr/> Contributor address; City; State; Zip Code Macomb, MI 48042-5629	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/125 Rpt: 28/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawner, Eric <hr/> 6 Contributor address; City; State; Zip Code Jackson, MI 49201-9740	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawner, Eric <hr/> Contributor address; City; State; Zip Code Jackson, MI 49201-9740	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brecht, Matthew <hr/> Contributor address; City; State; Zip Code Ira, MI 48023-2457	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIR RENEWABLE ENERGY SOLUTIONS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brecht, Matthew <hr/> Contributor address; City; State; Zip Code Ira, MI 48023-2457	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIR RENEWABLE ENERGY SOLUTIONS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Lynette <hr/> Contributor address; City; State; Zip Code Commerce Township, MI 48382-4893	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FRAUD RISK MANAGER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/125 Rpt: 29/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Lynette <hr/> 6 Contributor address; City; State; Zip Code Commerce Township, MI 48382-4893	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FRAUD RISK MANAGER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Wendy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2502	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXEC DIR CORP RESPONSIBILITY		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Wendy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2502	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXEC DIR CORP RESPONSIBILITY		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brittner, Karen <hr/> Contributor address; City; State; Zip Code Sparta, MI 49345-1216	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brittner, Karen <hr/> Contributor address; City; State; Zip Code Sparta, MI 49345-1216	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/125 Rpt: 30/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Larry <hr/> 6 Contributor address; City; State; Zip Code Southfield, MI 48076-4911	7 Amount of Contribution (\$) \$33.27
8 Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Larry <hr/> Contributor address; City; State; Zip Code Southfield, MI 48076-4911	Amount of Contribution (\$) \$33.27
Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Kerri <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33436-1704	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Kerri <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33436-1704	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhart, Megan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1220	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Chief Administrative Officer		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/125 Rpt: 31/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhart, Megan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-1220	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Chief Administrative Officer		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buscher, Laura <hr/> Contributor address; City; State; Zip Code Ypsilanti, MI 48197-8206	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) LOAN CLOSING MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buscher, Laura <hr/> Contributor address; City; State; Zip Code Ypsilanti, MI 48197-8206	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) LOAN CLOSING MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Randi <hr/> Contributor address; City; State; Zip Code Washington, MI 48094-2180	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) DIR-COMML CREDIT SUPPORT CTR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Randi <hr/> Contributor address; City; State; Zip Code Washington, MI 48094-2180	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) DIR-COMML CREDIT SUPPORT CTR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/125 Rpt: 32/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Clint <hr/> 6 Contributor address; City; State; Zip Code Midlothian, TX 76065-5686	7 Amount of Contribution (\$) \$10.38
8 Principal occupation / Job title (See Instructions) CEG DEPT MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Clint <hr/> Contributor address; City; State; Zip Code Midlothian, TX 76065-5686	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) CEG DEPT MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calisi, Denise <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PW REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calisi, Denise <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PW REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camden, Bryan <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035-1647	Amount of Contribution (\$) \$31.33
Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/125 Rpt: 33/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camden, Bryan 6 Contributor address; City; State; Zip Code Frisco, TX 75035-1647	7 Amount of Contribution (\$) \$31.33
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Mark Contributor address; City; State; Zip Code Long Beach, CA 90803-5157	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Mark Contributor address; City; State; Zip Code Long Beach, CA 90803-5157	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnegie, Amanda Contributor address; City; State; Zip Code Dallas, TX 75224-1445	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) DIR OF ONBOARDING & SELF SERV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnegie, Amanda Contributor address; City; State; Zip Code Dallas, TX 75224-1445	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) DIR OF ONBOARDING & SELF SERV		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/125 Rpt: 34/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassa, Claudia	7 Amount of Contribution (\$) \$13.12
6 Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3442		
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassa, Claudia	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3442		
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamness, Constance	Amount of Contribution (\$) \$12.46
Contributor address; City; State; Zip Code Sterling Heights, MI 48312-1422		
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamness, Constance	Amount of Contribution (\$) \$12.46
Contributor address; City; State; Zip Code Sterling Heights, MI 48312-1422		
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, Marci	Amount of Contribution (\$) \$6.65
Contributor address; City; State; Zip Code Rockford, MI 49341-8579		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/125 Rpt: 35/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, Marci <hr/> 6 Contributor address; City; State; Zip Code Rockford, MI 49341-8579	7 Amount of Contribution (\$) \$6.65
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chausse, Melinda <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-6682	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF CREDIT OFFICER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chausse, Melinda <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-6682	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF CREDIT OFFICER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Nicole <hr/> Contributor address; City; State; Zip Code Millbrae, CA 94030-2124	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) DIV GEN COUNSEL		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Nicole <hr/> Contributor address; City; State; Zip Code Millbrae, CA 94030-2124	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) DIV GEN COUNSEL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/125 Rpt: 36/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, Jaclyn	7 Amount of Contribution (\$) \$5.76
6 Contributor address; City; State; Zip Code Oakland Township, MI 48306-1532		
8 Principal occupation / Job title (See Instructions) DIR SHARED SVCS & PURCH		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, Jaclyn	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Oakland Township, MI 48306-1532		
Principal occupation / Job title (See Instructions) DIR SHARED SVCS & PURCH		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Lori	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Macomb, MI 48042-2339		
Principal occupation / Job title (See Instructions) MORTG/CONS LOAN UNDERWRITG MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Lori	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Macomb, MI 48042-2339		
Principal occupation / Job title (See Instructions) MORTG/CONS LOAN UNDERWRITG MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coak, Anthony	Amount of Contribution (\$) \$9.23
Contributor address; City; State; Zip Code Romulus, MI 48174-3914		
Principal occupation / Job title (See Instructions) MUNI REP III		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/125 Rpt: 37/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coak, Anthony <hr/> 6 Contributor address; City; State; Zip Code Romulus, MI 48174-3914	7 Amount of Contribution (\$) \$9.23
8 Principal occupation / Job title (See Instructions) MUNI REP III		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn, Vickie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386-3359	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn, Vickie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386-3359	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Eoin <hr/> Contributor address; City; State; Zip Code Houston, TX 77082-6850	Amount of Contribution (\$) \$43.76
Principal occupation / Job title (See Instructions) DIR US BANKING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Eoin <hr/> Contributor address; City; State; Zip Code Houston, TX 77082-6850	Amount of Contribution (\$) \$43.76
Principal occupation / Job title (See Instructions) DIR US BANKING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/125 Rpt: 38/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colvin, Jeff <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90069-1256	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) DIRECTOR ENTERTAINMENT LENDING		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colvin, Jeff <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90069-1256	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DIRECTOR ENTERTAINMENT LENDING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costa, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) MD NATL/SPEC EFS ENT TLS USB		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costa, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) MD NATL/SPEC EFS ENT TLS USB		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coury, Kaitlin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-2517	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIR CREDIT PRODUCT DEV & SUPP		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/125 Rpt: 39/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coury, Kaitlin <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75238-2517	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) DIR CREDIT PRODUCT DEV & SUPP		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covell, Edward <hr/> Contributor address; City; State; Zip Code Clinton Township, MI 48038-5226	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) PORTFOLIO RISK OFFICER IV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covell, Edward <hr/> Contributor address; City; State; Zip Code Clinton Township, MI 48038-5226	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) PORTFOLIO RISK OFFICER IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crayton, Kevin <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76092-2965	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crayton, Kevin <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76092-2965	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/125 Rpt: 40/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crespi, Megan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Plymouth, MI 48170-1719		
8 Principal occupation / Job title (See Instructions) CHIEF OPERATING OFFICER		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crespi, Megan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Plymouth, MI 48170-1719		
Principal occupation / Job title (See Instructions) CHIEF OPERATING OFFICER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cribbs, Jason	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code The Woodlands, TX 77381-6449		
Principal occupation / Job title (See Instructions) PETROLEUM ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cribbs, Jason	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code The Woodlands, TX 77381-6449		
Principal occupation / Job title (See Instructions) PETROLEUM ENGINEER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Rachel	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Orange, CA 92867-2919		
Principal occupation / Job title (See Instructions) SALES ENABLEMENT PROJ MGR SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/125 Rpt: 41/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Rachel <hr/> 6 Contributor address; City; State; Zip Code Orange, CA 92867-2919	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SALES ENABLEMENT PROJ MGR SR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalmotte, Gregory <hr/> Contributor address; City; State; Zip Code Lake Worth, FL 33467-7387	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalmotte, Gregory <hr/> Contributor address; City; State; Zip Code Lake Worth, FL 33467-7387	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Darrin <hr/> Contributor address; City; State; Zip Code White Lake, MI 48386-2459	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) PRODUCT MGR IV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Darrin <hr/> Contributor address; City; State; Zip Code White Lake, MI 48386-2459	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) PRODUCT MGR IV		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/125 Rpt: 42/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Steven	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Northville, MI 48168-3275		
8 Principal occupation / Job title (See Instructions) PRESIDENT - MI Market		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Steven	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Northville, MI 48168-3275		
Principal occupation / Job title (See Instructions) PRESIDENT - MI Market		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Degler, Constance	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Dallas, TX 75229-4033		
Principal occupation / Job title (See Instructions) HEAD OF PRIVATE WEALTH		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Degler, Constance	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Dallas, TX 75229-4033		
Principal occupation / Job title (See Instructions) HEAD OF PRIVATE WEALTH		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimitrie, Jennifer	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Shelby Township, MI 48315-1911		
Principal occupation / Job title (See Instructions) DIR ACCOUNTING OPS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/125 Rpt: 43/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimitrie, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Shelby Township, MI 48315-1911	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIR ACCOUNTING OPS		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, Bryan <hr/> Contributor address; City; State; Zip Code Beverly Hills, MI 48025-2834	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbs, Bryan <hr/> Contributor address; City; State; Zip Code Beverly Hills, MI 48025-2834	Amount of Contribution (\$) \$31.89
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobson, Roxsand <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48322-1745	Amount of Contribution (\$) \$23.10
Principal occupation / Job title (See Instructions) MGR DIV BUS RISK&CONTROL OFCR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobson, Roxsand <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48322-1745	Amount of Contribution (\$) \$23.10
Principal occupation / Job title (See Instructions) MGR DIV BUS RISK&CONTROL OFCR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/125 Rpt: 44/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dokmanovich, Mike <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278-5101	7 Amount of Contribution (\$) \$58.50
8 Principal occupation / Job title (See Instructions) DIR CREDIT RISK MGMT DCSNING		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dokmanovich, Mike <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-5101	Amount of Contribution (\$) \$58.50
Principal occupation / Job title (See Instructions) DIR CREDIT RISK MGMT DCSNING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohoe, Daniel <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7584	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) DIRECTOR GOVT RELATIONS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohoe, Daniel <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7584	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) DIRECTOR GOVT RELATIONS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downham, Daniel <hr/> Contributor address; City; State; Zip Code Allen, TX 75002-1872	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) CORP DEV OFFICER SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/125 Rpt: 45/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downham, Daniel <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002-1872	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) CORP DEV OFFICER SR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drapinski, Adam <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48067-2054	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR II IRH		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drapinski, Adam <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48067-2054	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR II IRH		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Earhart, Tina <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75181-2346	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) PRODUCT MANAGER III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Earhart, Tina <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75181-2346	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) PRODUCT MANAGER III		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/125 Rpt: 46/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebejer, Dale <hr/> 6 Contributor address; City; State; Zip Code Chesterfield, MI 48047-4885	7 Amount of Contribution (\$) \$6.92
8 Principal occupation / Job title (See Instructions) ALLIANCE TRUST BDO ANALYST		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebejer, Dale <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48047-4885	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) ALLIANCE TRUST BDO ANALYST		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eidt, Pamela <hr/> Contributor address; City; State; Zip Code Detroit, MI 48236-2153	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) INTERNATIONAL OPS MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eidt, Pamela <hr/> Contributor address; City; State; Zip Code Detroit, MI 48236-2153	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) INTERNATIONAL OPS MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Martin <hr/> Contributor address; City; State; Zip Code Grosse Pointe Shores, MI 48236-1460	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) GROUP MANAGER II - INTL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/125 Rpt: 47/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Martin <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Shores, MI 48236-1460	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - INTL		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernst, Robert <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1962	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernst, Robert <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1962	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etue, Paul <hr/> Contributor address; City; State; Zip Code Carleton, MI 48117-9330	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) SR. INCENTIVE COMP CONSULTANT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etue, Paul <hr/> Contributor address; City; State; Zip Code Carleton, MI 48117-9330	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) SR. INCENTIVE COMP CONSULTANT		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/125 Rpt: 48/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ezop, Mark <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MGR I BRCO CONTROL TESTING		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ezop, Mark <hr/> Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MGR I BRCO CONTROL TESTING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Curtis <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2112	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHAIRMAN AND CEO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Curtis <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2112	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHAIRMAN AND CEO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris Hernandez, Tamra <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258-1613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GROUP MANAGER I - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/125 Rpt: 49/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris Hernandez, Tamra <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258-1613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER I - BBG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Featherngill, Lisa <hr/> Contributor address; City; State; Zip Code Advance, NC 27006-8543	Amount of Contribution (\$) \$19.25
Principal occupation / Job title (See Instructions) NATL DIR WEALTH PLANNING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Featherngill, Lisa <hr/> Contributor address; City; State; Zip Code Advance, NC 27006-8543	Amount of Contribution (\$) \$19.25
Principal occupation / Job title (See Instructions) NATL DIR WEALTH PLANNING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fell, Charles <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2502	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fell, Charles <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2502	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - TLS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/125 Rpt: 50/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrer, Francis <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034-0049	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SENIOR COUNSEL		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrer, Francis <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034-0049	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SENIOR COUNSEL		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figone, Marco <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5573	Amount of Contribution (\$) \$34.56
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Figone, Marco <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5573	Amount of Contribution (\$) \$34.56
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fincher, Ashley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-4405	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) DEP GEN COUNSL LIT & CORP OPS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/125 Rpt: 51/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fincher, Ashley <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218-4405	7 Amount of Contribution (\$) \$41.00
8 Principal occupation / Job title (See Instructions) DEP GEN COUNSL LIT & CORP OPS		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finn, Jeffrey <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-1867	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) ALLIANCE INVESTMENT SPEC III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finn, Jeffrey <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-1867	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) ALLIANCE INVESTMENT SPEC III		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, John <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901-2550	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, John <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901-2550	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) RETAIL REGIONAL DIRECTOR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/125 Rpt: 52/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick-Keeler, Lisa <hr/> 6 Contributor address; City; State; Zip Code South Lyon, MI 48178-9018	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick-Keeler, Lisa <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178-9018	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzsimmons, Debra <hr/> Contributor address; City; State; Zip Code Brighton, MI 48114-7323	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MGR BRCO BUS UNIT COMPLIANCE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzsimmons, Debra <hr/> Contributor address; City; State; Zip Code Brighton, MI 48114-7323	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MGR BRCO BUS UNIT COMPLIANCE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Eden <hr/> Contributor address; City; State; Zip Code Commerce Township, MI 48382-1480	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRODUCT MGR IV		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/125 Rpt: 53/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Eden <hr/> 6 Contributor address; City; State; Zip Code Commerce Township, MI 48382-1480	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) PRODUCT MGR IV		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, David <hr/> Contributor address; City; State; Zip Code Littleton, CO 80127-2183	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, David <hr/> Contributor address; City; State; Zip Code Littleton, CO 80127-2183	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foreman, Julie <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020-8849	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) BDO-SBA IV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foreman, Julie <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020-8849	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) BDO-SBA IV		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/125 Rpt: 54/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Margaret	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Rochester Hills, MI 48307-2233		
8 Principal occupation / Job title (See Instructions) DIR FINANCE TRANSFORMATION		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Margaret	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rochester Hills, MI 48307-2233		
Principal occupation / Job title (See Instructions) DIR FINANCE TRANSFORMATION		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fryman, Daniel	Amount of Contribution (\$) \$19.25
Contributor address; City; State; Zip Code Dwg, TX 76016-6026		
Principal occupation / Job title (See Instructions) DIR COMMERCIAL REAL ESTATE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fryman, Daniel	Amount of Contribution (\$) \$19.25
Contributor address; City; State; Zip Code Dwg, TX 76016-6026		
Principal occupation / Job title (See Instructions) DIR COMMERCIAL REAL ESTATE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Michael	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Chesaning, MI 48616-9502		
Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/125 Rpt: 55/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Michael <hr/> 6 Contributor address; City; State; Zip Code Chesaning, MI 48616-9502	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fundukian, Jeffrey <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-3958	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) BUS APPLICATION MANAGER SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fundukian, Jeffrey <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-3958	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) BUS APPLICATION MANAGER SR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Kelly <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-5420	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) INVESTOR RELATIONS DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Kelly <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-5420	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) INVESTOR RELATIONS DIRECTOR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/125 Rpt: 56/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galbreath, David <hr/> 6 Contributor address; City; State; Zip Code Weston, FL 33331-3815	7 Amount of Contribution (\$) \$41.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galbreath, David <hr/> Contributor address; City; State; Zip Code Weston, FL 33331-3815	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, James <hr/> Contributor address; City; State; Zip Code Clarkston, MI 48348-3564	Amount of Contribution (\$) \$41.19
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, James <hr/> Contributor address; City; State; Zip Code Clarkston, MI 48348-3564	Amount of Contribution (\$) \$41.19
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gersch, Nicole <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-6805	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) CORP SECRETARY & SR DEPUTY GC		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/125 Rpt: 57/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gersch, Nicole <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206-6805	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) CORP SECRETARY & SR DEPUTY GC		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Getz, Michael <hr/> Contributor address; City; State; Zip Code Livonia, MI 48152-2852	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR I - LOAN SYN		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Getz, Michael <hr/> Contributor address; City; State; Zip Code Livonia, MI 48152-2852	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR I - LOAN SYN		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenn, W Todd <hr/> Contributor address; City; State; Zip Code Northville, MI 48168-8597	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIR PORTFOLIO RISK CONSULTING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenn, W Todd <hr/> Contributor address; City; State; Zip Code Northville, MI 48168-8597	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIR PORTFOLIO RISK CONSULTING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/125 Rpt: 58/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, David <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013-3344	7 Amount of Contribution (\$) \$9.23
8 Principal occupation / Job title (See Instructions) DIRECTR COMML UNDERWRITING CTR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, David <hr/> Contributor address; City; State; Zip Code Allen, TX 75013-3344	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) DIRECTR COMML UNDERWRITING CTR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodrich, Ann <hr/> Contributor address; City; State; Zip Code Otsego, MI 49078-9755	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETAIL LOAN PROD MGMT LEADER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodrich, Ann <hr/> Contributor address; City; State; Zip Code Otsego, MI 49078-9755	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETAIL LOAN PROD MGMT LEADER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradinscak, MaryEllen <hr/> Contributor address; City; State; Zip Code Redford, MI 48239-3860	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) COM CARD INTEGRATN CONSULT SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/125 Rpt: 59/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradinscak, MaryEllen	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code Redford, MI 48239-3860		
8 Principal occupation / Job title (See Instructions) COM CARD INTEGRATN CONSULT SR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruley, Bret	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bloomfield Hills, MI 48301-4140		
Principal occupation / Job title (See Instructions) DIR COLLATERAL EVALUATION SVCS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruley, Bret	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bloomfield Hills, MI 48301-4140		
Principal occupation / Job title (See Instructions) DIR COLLATERAL EVALUATION SVCS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guarino, Joann	Amount of Contribution (\$) \$6.92
Contributor address; City; State; Zip Code Madison Heights, MI 48071-2009		
Principal occupation / Job title (See Instructions) BRCO CONTROL TEST SR ANALYST		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guarino, Joann	Amount of Contribution (\$) \$6.92
Contributor address; City; State; Zip Code Madison Heights, MI 48071-2009		
Principal occupation / Job title (See Instructions) BRCO CONTROL TEST SR ANALYST		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/125 Rpt: 60/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gudenau, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Davison, MI 48423-8503	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) SR. PRODUCT ANALYST		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gudenau, Kathleen <hr/> Contributor address; City; State; Zip Code Davison, MI 48423-8503	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SR. PRODUCT ANALYST		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Martha <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-6109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR ACAO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Martha <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-6109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR ACAO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzak, Steven <hr/> Contributor address; City; State; Zip Code Warren, MI 48093-2514	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) REGIONAL OPS TEAM MGR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/125 Rpt: 61/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzak, Steven <hr/> 6 Contributor address; City; State; Zip Code Warren, MI 48093-2514	7 Amount of Contribution (\$) \$10.38
8 Principal occupation / Job title (See Instructions) REGIONAL OPS TEAM MGR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haile, Fasika <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052-2527	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MODEL DEVELOPMENT DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haile, Fasika <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052-2527	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MODEL DEVELOPMENT DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haller, Eric <hr/> Contributor address; City; State; Zip Code Brownstown Township, MI 48174-2545	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT MANAGER I		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haller, Eric <hr/> Contributor address; City; State; Zip Code Brownstown Township, MI 48174-2545	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT MANAGER I		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/125 Rpt: 62/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamrick, Roland <hr/> 6 Contributor address; City; State; Zip Code Charlotte, NC 28226-2614	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamrick, Roland <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28226-2614	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Brian <hr/> Contributor address; City; State; Zip Code Dublin, OH 43017-8772	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) DIR RETAIL STRTG & TF		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Brian <hr/> Contributor address; City; State; Zip Code Dublin, OH 43017-8772	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) DIR RETAIL STRTG & TF		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harraman, Brent <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479-6344	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGIONAL DIR SMALL BUS BKG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/125 Rpt: 63/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harraman, Brent <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479-6344	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REGIONAL DIR SMALL BUS BKG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Dale <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105-9296	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Dale <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105-9296	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Von <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056-5815	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF LEGAL OFFICR- GEN COUNSL		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Von <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056-5815	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF LEGAL OFFICR- GEN COUNSL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/125 Rpt: 64/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazard, Dawn	7 Amount of Contribution (\$) \$9.23
6 Contributor address; City; State; Zip Code Millington, MI 48746-9713		
8 Principal occupation / Job title (See Instructions) COMPLIANCE SPEC II		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazard, Dawn	Amount of Contribution (\$) \$9.23
Contributor address; City; State; Zip Code Millington, MI 48746-9713		
Principal occupation / Job title (See Instructions) COMPLIANCE SPEC II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heisten, Kevin	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Waterford, MI 48327-3506		
Principal occupation / Job title (See Instructions) SR TALENT ACQ CONSULTANT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heisten, Kevin	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Waterford, MI 48327-3506		
Principal occupation / Job title (See Instructions) SR TALENT ACQ CONSULTANT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helmer, Scott	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-2134		
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR I - LOAN SYN		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/125 Rpt: 65/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helmer, Scott <hr/> 6 Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-2134	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MANAGING DIRECTOR I - LOAN SYN		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd, Debra <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035-7605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR TALENT DEVELOPMENT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd, Debra <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035-7605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR TALENT DEVELOPMENT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Robert <hr/> Contributor address; City; State; Zip Code San Jose, CA 95123-3839	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Robert <hr/> Contributor address; City; State; Zip Code San Jose, CA 95123-3839	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/125 Rpt: 66/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, James	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Southlake, TX 76092-8900		
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzog, James	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Southlake, TX 76092-8900		
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hibbard, Scott	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code West Olive, MI 49460-8718		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hibbard, Scott	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code West Olive, MI 49460-8718		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Jeffrey	Amount of Contribution (\$) \$8.50
Contributor address; City; State; Zip Code Rowlett, TX 75088-9003		
Principal occupation / Job title (See Instructions) MODEL RISK MANAGER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/125 Rpt: 67/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75088-9003	7 Amount of Contribution (\$) \$8.50
8 Principal occupation / Job title (See Instructions) MODEL RISK MANAGER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoin, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75063-3347	Amount of Contribution (\$) \$31.46
Principal occupation / Job title (See Instructions) DIR NATL DEALER SERVICES		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoin, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75063-3347	Amount of Contribution (\$) \$31.46
Principal occupation / Job title (See Instructions) DIR NATL DEALER SERVICES		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huitson, Gary <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069-8549	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huitson, Gary <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069-8549	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/125 Rpt: 68/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inboden, Mary <hr/> 6 Contributor address; City; State; Zip Code Sodus, MI 49126-9705	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) SR TRUST FIDUCIARY STRATEGIST		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inboden, Mary <hr/> Contributor address; City; State; Zip Code Sodus, MI 49126-9705	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) SR TRUST FIDUCIARY STRATEGIST		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaaj, Sukhinder <hr/> Contributor address; City; State; Zip Code Plano, TX 75024-6823	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) MODEL RISK DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaaj, Sukhinder <hr/> Contributor address; City; State; Zip Code Plano, TX 75024-6823	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) MODEL RISK DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Brett <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-3742	Amount of Contribution (\$) \$30.69
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/125 Rpt: 69/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Brett <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080-3742	7 Amount of Contribution (\$) \$30.69
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Victoria <hr/> Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5243	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) SR MGR TECH PORTFOLIO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Victoria <hr/> Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5243	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) SR MGR TECH PORTFOLIO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamrog, Stephanie <hr/> Contributor address; City; State; Zip Code Wayland, MI 49348-9738	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MGR TM SALES ASSOCIATES		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamrog, Stephanie <hr/> Contributor address; City; State; Zip Code Wayland, MI 49348-9738	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MGR TM SALES ASSOCIATES		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/125 Rpt: 70/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarbo, Marie <hr/> 6 Contributor address; City; State; Zip Code Sterling Heights, MI 48314-3775	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarbo, Marie <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48314-3775	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR MANAGER TECHNOLOGY		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferies, Martha <hr/> Contributor address; City; State; Zip Code Flint, MI 48503-4305	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) AP TAX ANALYST SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferies, Martha <hr/> Contributor address; City; State; Zip Code Flint, MI 48503-4305	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) AP TAX ANALYST SR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gary <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016-6400	Amount of Contribution (\$) \$32.31
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/125 Rpt: 71/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gary <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016-6400	7 Amount of Contribution (\$) \$32.31
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Heather <hr/> Contributor address; City; State; Zip Code Clawson, MI 48017-1694	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) APPLICATION PRODUCT OWNER LEAD		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Heather <hr/> Contributor address; City; State; Zip Code Clawson, MI 48017-1694	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) APPLICATION PRODUCT OWNER LEAD		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, James <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033-2125	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SR DIR DIV BUS RISK&CTRL OFCR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, James <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033-2125	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SR DIR DIV BUS RISK&CTRL OFCR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/125 Rpt: 72/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Cedric	7 Amount of Contribution (\$) \$10.38
6 Contributor address; City; State; Zip Code Lancaster, TX 75146-1362		
8 Principal occupation / Job title (See Instructions) CEO Race & Equity Prog Fellow		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Cedric	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Lancaster, TX 75146-1362		
Principal occupation / Job title (See Instructions) CEO Race & Equity Prog Fellow		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Cynthia	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Pasadena, CA 91105-1431		
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Cynthia	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Pasadena, CA 91105-1431		
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Erica	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5235		
Principal occupation / Job title (See Instructions) MGR I BRCO CONTROL TESTING		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/125 Rpt: 73/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Erica <hr/> 6 Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5235	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) MGR I BRCO CONTROL TESTING		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Jeremy <hr/> Contributor address; City; State; Zip Code West Hills, CA 91304-2115	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - BBG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Jeremy <hr/> Contributor address; City; State; Zip Code West Hills, CA 91304-2115	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kana, Bryan <hr/> Contributor address; City; State; Zip Code Winchester, MA 01890-1612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kana, Bryan <hr/> Contributor address; City; State; Zip Code Winchester, MA 01890-1612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/125 Rpt: 74/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellstrom, Donna <hr/> 6 Contributor address; City; State; Zip Code Auburn Hills, MI 48326-1014	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SR CX JOURNEY ARCHITECT		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellstrom, Donna <hr/> Contributor address; City; State; Zip Code Auburn Hills, MI 48326-1014	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SR CX JOURNEY ARCHITECT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Beatrice <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078-1246	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR COMMUNITY DEVELOPMENT BNKG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Beatrice <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078-1246	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR COMMUNITY DEVELOPMENT BNKG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerns, Kristine <hr/> Contributor address; City; State; Zip Code Pinckney, MI 48169-8145	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/125 Rpt: 75/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerns, Kristine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pinckney, MI 48169-8145		
8 Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klesel, Jason	Amount of Contribution (\$) \$11.07
Contributor address; City; State; Zip Code Dallas, TX 75206-7911		
Principal occupation / Job title (See Instructions) MGR - COMMRCCL UNDRWRTNG CTR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klesel, Jason	Amount of Contribution (\$) \$11.07
Contributor address; City; State; Zip Code Dallas, TX 75206-7911		
Principal occupation / Job title (See Instructions) MGR - COMMRCCL UNDRWRTNG CTR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, August	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2631		
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, August	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Richardson, TX 75080-2631		
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/125 Rpt: 76/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knudsen III, George	7 Amount of Contribution (\$) \$12.46
6 Contributor address; City; State; Zip Code Roseville, MI 48066-7124		
8 Principal occupation / Job title (See Instructions) INFRASTRUCTURE OPS ANALYST IV		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knudsen III, George	Amount of Contribution (\$) \$12.46
Contributor address; City; State; Zip Code Roseville, MI 48066-7124		
Principal occupation / Job title (See Instructions) INFRASTRUCTURE OPS ANALYST IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kociara, John	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Wolverine Lake, MI 48390-1813		
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kociara, John	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Wolverine Lake, MI 48390-1813		
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotcher, Brandon	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Sterling Heights, MI 48313-2501		
Principal occupation / Job title (See Instructions) MGR - COMMRCCL UNDRWRTNG CTR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/125 Rpt: 77/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kotcher, Brandon <hr/> 6 Contributor address; City; State; Zip Code Sterling Heights, MI 48313-2501	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) MGR - COMMRC L UNDRWRTNG CTR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreager, Keith <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48309-1355	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreager, Keith <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48309-1355	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurumisawa, Hiroshi <hr/> Contributor address; City; State; Zip Code Northville, MI 48168-8500	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - INTL		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurumisawa, Hiroshi <hr/> Contributor address; City; State; Zip Code Northville, MI 48168-8500	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - INTL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/125 Rpt: 78/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwapis, Gregory <hr/> 6 Contributor address; City; State; Zip Code Rochester, MI 48307-1441	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) LOAN REVIEW DIRECTOR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwapis, Gregory <hr/> Contributor address; City; State; Zip Code Rochester, MI 48307-1441	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) LOAN REVIEW DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labauve, Jeffrey <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803-1605	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labauve, Jeffrey <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90803-1605	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lafferty, Jonathan <hr/> Contributor address; City; State; Zip Code Warren, MI 48092-2575	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) MANAGER TECHNOLOGY		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/125 Rpt: 79/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lafferty, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Warren, MI 48092-2575	7 Amount of Contribution (\$) \$9.23
8 Principal occupation / Job title (See Instructions) MANAGER TECHNOLOGY		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lardner, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3312	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) DIRECTOR SPECIAL ASSETS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lardner, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3312	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) DIRECTOR SPECIAL ASSETS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larrair, Paul <hr/> Contributor address; City; State; Zip Code Van Buren Township, MI 48111-1677	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) SR. BANK MANAGER MULTI-SITE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larrair, Paul <hr/> Contributor address; City; State; Zip Code Van Buren Township, MI 48111-1677	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) SR. BANK MANAGER MULTI-SITE		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/125 Rpt: 80/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lashbrook, Mark	7 Amount of Contribution (\$) \$13.12
	6 Contributor address; City; State; Zip Code Marysville, MI 48040-2559	
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - USB		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lashbrook, Mark	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Marysville, MI 48040-2559	
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - USB		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauter, Glenn	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620-2595	
Principal occupation / Job title (See Instructions) GROUP MANAGER II - SBA		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauter, Glenn	Amount of Contribution (\$) \$13.12
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620-2595	
Principal occupation / Job title (See Instructions) GROUP MANAGER II - SBA		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leggett, John	Amount of Contribution (\$) \$14.00
	Contributor address; City; State; Zip Code Troy, MI 48083-2524	
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT MANAGER I		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/125 Rpt: 81/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leggett, John <hr/> 6 Contributor address; City; State; Zip Code Troy, MI 48083-2524	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT MANAGER I		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemerond, Michelle <hr/> Contributor address; City; State; Zip Code Grosse Ile, MI 48138-1068	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) GROUP MANAGER I - CDI		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemerond, Michelle <hr/> Contributor address; City; State; Zip Code Grosse Ile, MI 48138-1068	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) GROUP MANAGER I - CDI		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesikar, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1849	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) NATL DIRECTOR SALES & STRATEGY		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesikar, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1849	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) NATL DIRECTOR SALES & STRATEGY		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/125 Rpt: 82/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leskovsky, Stephen <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4214	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leskovsky, Stephen <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4214	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LoFiego, James <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178-2096	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LoFiego, James <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178-2096	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, Eric <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-4124	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/125 Rpt: 83/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, Eric <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77396-4124	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Tyler <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48067-2951	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Tyler <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48067-2951	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn, Robert <hr/> Contributor address; City; State; Zip Code Superior Township, MI 48198-7602	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) INTERNATIONAL/OFAC MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn, Robert <hr/> Contributor address; City; State; Zip Code Superior Township, MI 48198-7602	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) INTERNATIONAL/OFAC MANAGER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/125 Rpt: 84/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mach, Gary <hr/> 6 Contributor address; City; State; Zip Code Novi, MI 48375-3250	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) SPECIAL ASSETS OFFICER IV		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mach, Gary <hr/> Contributor address; City; State; Zip Code Novi, MI 48375-3250	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) SPECIAL ASSETS OFFICER IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macmichael, Michael <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-1528	Amount of Contribution (\$) \$23.24
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macmichael, Michael <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-1528	Amount of Contribution (\$) \$23.24
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maletich, Daniel <hr/> Contributor address; City; State; Zip Code Jackson, MI 49201-8318	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/125 Rpt: 85/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maletich, Daniel <hr/> 6 Contributor address; City; State; Zip Code Jackson, MI 49201-8318	7 Amount of Contribution (\$) \$29.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massie, Michael <hr/> Contributor address; City; State; Zip Code Ferndale, MI 48220-1385	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRINCIPAL PROJECT MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massie, Michael <hr/> Contributor address; City; State; Zip Code Ferndale, MI 48220-1385	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PRINCIPAL PROJECT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Geoffrey <hr/> Contributor address; City; State; Zip Code Woodland Hills, CA 91364-2403	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Geoffrey <hr/> Contributor address; City; State; Zip Code Woodland Hills, CA 91364-2403	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/125 Rpt: 86/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek, Lori	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Fenton, MI 48430-4008	
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazurek, Lori	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fenton, MI 48430-4008	
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Latonya	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5183	
Principal occupation / Job title (See Instructions) AUDIT DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Latonya	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Van Buren Township, MI 48111-5183	
Principal occupation / Job title (See Instructions) AUDIT DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Jeniffer	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lake Orion, MI 48360-1827	
Principal occupation / Job title (See Instructions) MGR PROCUREMENT SYS & OPS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/125 Rpt: 87/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Jeniffer <hr/> 6 Contributor address; City; State; Zip Code Lake Orion, MI 48360-1827	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) MGR PROCUREMENT SYS & OPS		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEachern, Lora <hr/> Contributor address; City; State; Zip Code Troy, MI 48085-1020	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) DIRECTOR BLC		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEachern, Lora <hr/> Contributor address; City; State; Zip Code Troy, MI 48085-1020	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) DIRECTOR BLC		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Coby <hr/> Contributor address; City; State; Zip Code Katy, TX 77493-1836	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - NDS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Coby <hr/> Contributor address; City; State; Zip Code Katy, TX 77493-1836	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - NDS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/125 Rpt: 88/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Shawna <hr/> 6 Contributor address; City; State; Zip Code South Lyon, MI 48178-9645	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) COMMERCIAL CARD GROUP MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Shawna <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178-9645	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) COMMERCIAL CARD GROUP MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Cassandra <hr/> Contributor address; City; State; Zip Code Irving, TX 75039-3655	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR RETAIL BANK		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Cassandra <hr/> Contributor address; City; State; Zip Code Irving, TX 75039-3655	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR RETAIL BANK		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medalle, Stephen <hr/> Contributor address; City; State; Zip Code Clinton Township, MI 48038-7413	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/125 Rpt: 89/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medalle, Stephen	7 Amount of Contribution (\$) \$8.07
6 Contributor address; City; State; Zip Code Clinton Township, MI 48038-7413		
8 Principal occupation / Job title (See Instructions) SR STAFF ENGINEER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Aaron	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Troy, MI 48085-3437		
Principal occupation / Job title (See Instructions) EXEC DIR COMMCL UNDERWRITING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Aaron	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Troy, MI 48085-3437		
Principal occupation / Job title (See Instructions) EXEC DIR COMMCL UNDERWRITING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, David	Amount of Contribution (\$) \$6.92
Contributor address; City; State; Zip Code Fowlerville, MI 48836-8306		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - BBG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, David	Amount of Contribution (\$) \$6.92
Contributor address; City; State; Zip Code Fowlerville, MI 48836-8306		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/125 Rpt: 90/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Sarah <hr/> 6 Contributor address; City; State; Zip Code Bloomfield Hills, MI 48304-3773	7 Amount of Contribution (\$) \$12.46
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Sarah <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48304-3773	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitor, Arthur <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1145	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MGR INCENTIVE COMPENSATION		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molitor, Arthur <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1145	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MGR INCENTIVE COMPENSATION		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Christine <hr/> Contributor address; City; State; Zip Code Detroit, MI 48223-1722	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) General Auditor		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/125 Rpt: 91/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Christine	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Detroit, MI 48223-1722		
8 Principal occupation / Job title (See Instructions) General Auditor		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Elise	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Clemente, CA 92673-6414		
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Elise	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Clemente, CA 92673-6414		
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Gigi	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Allen, TX 75013-5676		
Principal occupation / Job title (See Instructions) GLOBAL CASH MGMT LEADER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Gigi	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Allen, TX 75013-5676		
Principal occupation / Job title (See Instructions) GLOBAL CASH MGMT LEADER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/125 Rpt: 92/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Brennan <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94123-3812	7 Amount of Contribution (\$) \$9.23
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Brennan <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94123-3812	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morency, Denise <hr/> Contributor address; City; State; Zip Code Clarkston, MI 48346-1244	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DIR TECHNOLOGY TRANSFORM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morency, Denise <hr/> Contributor address; City; State; Zip Code Clarkston, MI 48346-1244	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DIR TECHNOLOGY TRANSFORM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Heather <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48047-4845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRUST OPS UNIT MGR-SPECIALIST		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/125 Rpt: 93/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Heather <hr/> 6 Contributor address; City; State; Zip Code Chesterfield, MI 48047-4845	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TRUST OPS UNIT MGR-SPECIALIST		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller Jr., John <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28211-4071	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller Jr., John <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28211-4071	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Tara <hr/> Contributor address; City; State; Zip Code Livonia, MI 48150-3754	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) Mktg Strategic Program Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Tara <hr/> Contributor address; City; State; Zip Code Livonia, MI 48150-3754	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) Mktg Strategic Program Manager		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/125 Rpt: 94/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nahra, Nadya	7 Amount of Contribution (\$) \$10.23
	6 Contributor address; City; State; Zip Code Saint Clair Shores, MI 48082-1183	
8 Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nahra, Nadya	Amount of Contribution (\$) \$10.23
	Contributor address; City; State; Zip Code Saint Clair Shores, MI 48082-1183	
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Danny	Amount of Contribution (\$) \$10.38
	Contributor address; City; State; Zip Code Allen, TX 75002-1547	
Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Danny	Amount of Contribution (\$) \$10.38
	Contributor address; City; State; Zip Code Allen, TX 75002-1547	
Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowicki, Julie	Amount of Contribution (\$) \$30.53
	Contributor address; City; State; Zip Code Milford, MI 48380-4116	
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/125 Rpt: 95/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowicki, Julie	7 Amount of Contribution (\$) \$30.53
6 Contributor address; City; State; Zip Code Milford, MI 48380-4116		
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Gregory	Amount of Contribution (\$) \$13.50
Contributor address; City; State; Zip Code Beverly Hills, MI 48025-3921		
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Gregory	Amount of Contribution (\$) \$13.50
Contributor address; City; State; Zip Code Beverly Hills, MI 48025-3921		
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODwyer, Mary	Amount of Contribution (\$) \$15.12
Contributor address; City; State; Zip Code Dallas, TX 75225-1702		
Principal occupation / Job title (See Instructions) SR TALENT ACQ CONSULTANT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODwyer, Mary	Amount of Contribution (\$) \$15.12
Contributor address; City; State; Zip Code Dallas, TX 75225-1702		
Principal occupation / Job title (See Instructions) SR TALENT ACQ CONSULTANT		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/125 Rpt: 96/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberg, Jay <hr/> 6 Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-2412	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIR OF BUSINESS MANAGEMENT		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberg, Jay <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48302-2412	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIR OF BUSINESS MANAGEMENT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oblak, Matthew <hr/> Contributor address; City; State; Zip Code Novi, MI 48375-4223	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) COMML CARD ACCOUNT MANAGER III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oblak, Matthew <hr/> Contributor address; City; State; Zip Code Novi, MI 48375-4223	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) COMML CARD ACCOUNT MANAGER III		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliveri, Leigh <hr/> Contributor address; City; State; Zip Code Allen Park, MI 48101-1528	Amount of Contribution (\$) \$6.66
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT SPECIALIST		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/125 Rpt: 97/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliveri, Leigh <hr/> 6 Contributor address; City; State; Zip Code Allen Park, MI 48101-1528	7 Amount of Contribution (\$) \$6.66
8 Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT SPECIALIST		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olszewski, Donald <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48310-7451	Amount of Contribution (\$) \$12.96
Principal occupation / Job title (See Instructions) TMA IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkwis, Ryan <hr/> Contributor address; City; State; Zip Code Oakland, MI 48363-2346	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR ENT UTILITY PLATFORM ENG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orkwis, Ryan <hr/> Contributor address; City; State; Zip Code Oakland, MI 48363-2346	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR ENT UTILITY PLATFORM ENG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otman, Patricia <hr/> Contributor address; City; State; Zip Code Linden, MI 48451-8994	Amount of Contribution (\$) \$33.12
Principal occupation / Job title (See Instructions) DIRECTOR ENTERPRISE FRAUD		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/125 Rpt: 98/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otman, Patricia	7 Amount of Contribution (\$) \$33.12
6 Contributor address; City; State; Zip Code Linden, MI 48451-8994		
8 Principal occupation / Job title (See Instructions) DIRECTOR ENTERPRISE FRAUD		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Stephanie	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-2367		
Principal occupation / Job title (See Instructions) NATL MGR PAYMENTS ONBOARD		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Stephanie	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-2367		
Principal occupation / Job title (See Instructions) NATL MGR PAYMENTS ONBOARD		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panken, Leah	Amount of Contribution (\$) \$29.00
Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-2810		
Principal occupation / Job title (See Instructions) SENIOR COUNSEL		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panken, Leah	Amount of Contribution (\$) \$29.00
Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-2810		
Principal occupation / Job title (See Instructions) SENIOR COUNSEL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/125 Rpt: 99/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paputa, Judy <hr/> 6 Contributor address; City; State; Zip Code Novi, MI 48374-2839	7 Amount of Contribution (\$) \$10.38
8 Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paputa, Judy <hr/> Contributor address; City; State; Zip Code Novi, MI 48374-2839	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3607	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) BDO-SBA IV		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-3607	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) BDO-SBA IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patzelt, Katherine <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-6553	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/125 Rpt: 100/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patzelt, Katherine <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95816-6553	7 Amount of Contribution (\$) \$33.00
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pente, Stephen <hr/> Contributor address; City; State; Zip Code Monroe, MI 48162-3280	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pente, Stephen <hr/> Contributor address; City; State; Zip Code Monroe, MI 48162-3280	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peraino, Frank <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48322-4320	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) DIV GEN COUNSEL		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peraino, Frank <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48322-4320	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) DIV GEN COUNSEL		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/125 Rpt: 101/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrizo, David <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95124-1249	7 Amount of Contribution (\$) \$6.92
8 Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - TLS		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrizo, David <hr/> Contributor address; City; State; Zip Code San Jose, CA 95124-1249	Amount of Contribution (\$) \$6.92
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR III - TLS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters IV, Gerret <hr/> Contributor address; City; State; Zip Code Oxford, MI 48371-1155	Amount of Contribution (\$) \$17.76
Principal occupation / Job title (See Instructions) MANAGER TD SERVICES		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters IV, Gerret <hr/> Contributor address; City; State; Zip Code Oxford, MI 48371-1155	Amount of Contribution (\$) \$17.76
Principal occupation / Job title (See Instructions) MANAGER TD SERVICES		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillivant, Amy <hr/> Contributor address; City; State; Zip Code Lake Orion, MI 48360-1211	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) DIR CORPORATE REAL ESTATE		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/125 Rpt: 102/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillivant, Amy	7 Amount of Contribution (\$) \$23.00
6 Contributor address; City; State; Zip Code Lake Orion, MI 48360-1211		
8 Principal occupation / Job title (See Instructions) DIR CORPORATE REAL ESTATE		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillivant, Laura	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Lake Orion, MI 48360-1231		
Principal occupation / Job title (See Instructions) PRINCIPAL ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillivant, Laura	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Lake Orion, MI 48360-1231		
Principal occupation / Job title (See Instructions) PRINCIPAL ENGINEER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poel, Roger	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hudsonville, MI 49426-8003		
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poel, Roger	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hudsonville, MI 49426-8003		
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/125 Rpt: 103/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Kellie	7 Amount of Contribution (\$) \$5.76
6 Contributor address; City; State; Zip Code North Branch, MI 48461-8110		
8 Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Kellie	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code North Branch, MI 48461-8110		
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raine, Casandra	Amount of Contribution (\$) \$8.07
Contributor address; City; State; Zip Code Warren, MI 48091-1484		
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT CONSULTANT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raine, Casandra	Amount of Contribution (\$) \$8.07
Contributor address; City; State; Zip Code Warren, MI 48091-1484		
Principal occupation / Job title (See Instructions) PRODUCTION SUPPORT CONSULTANT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajcevski, Janet	Amount of Contribution (\$) \$31.00
Contributor address; City; State; Zip Code Rochester Hills, MI 48306-4837		
Principal occupation / Job title (See Instructions) MANAGEMENT ACCOUNTING DIRECTOR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/125 Rpt: 104/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rajcevski, Janet <hr/> 6 Contributor address; City; State; Zip Code Rochester Hills, MI 48306-4837	7 Amount of Contribution (\$) \$31.00
8 Principal occupation / Job title (See Instructions) MANAGEMENT ACCOUNTING DIRECTOR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Richard <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48051-1985	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Richard <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48051-1985	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reckis, Robert <hr/> Contributor address; City; State; Zip Code San Jose, CA 95126-1407	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reckis, Robert <hr/> Contributor address; City; State; Zip Code San Jose, CA 95126-1407	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/125 Rpt: 105/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Oxford, MI 48371-4056	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) Sr. Bank Manager		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Jeffrey <hr/> Contributor address; City; State; Zip Code Oxford, MI 48371-4056	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reich, Kimberly <hr/> Contributor address; City; State; Zip Code Leonard, MI 48367-2909	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SR DIR DIV BUS RISK&CTRL OFCR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reich, Kimberly <hr/> Contributor address; City; State; Zip Code Leonard, MI 48367-2909	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SR DIR DIV BUS RISK&CTRL OFCR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riek, Jordan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-5644	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DEPUTY CISO		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/125 Rpt: 106/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riek, Jordan	7 Amount of Contribution (\$) \$13.12
6 Contributor address; City; State; Zip Code Dallas, TX 75231-5644		
8 Principal occupation / Job title (See Instructions) DEPUTY CISO		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ris, Lynn	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Oakland Township, MI 48306-1489		
Principal occupation / Job title (See Instructions) SBL UNDERWRITING OFFICER III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ris, Lynn	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Oakland Township, MI 48306-1489		
Principal occupation / Job title (See Instructions) SBL UNDERWRITING OFFICER III		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, Michael	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Grosse Ile, MI 48138-1554		
Principal occupation / Job title (See Instructions) EXEC DIR NATL & SPEC BUSINESS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, Michael	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Grosse Ile, MI 48138-1554		
Principal occupation / Job title (See Instructions) EXEC DIR NATL & SPEC BUSINESS		Employer (See Instructions) Comerica

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/125 Rpt: 107/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Macomb, MI 48042-6187	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) AML RISK MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Kenneth <hr/> Contributor address; City; State; Zip Code Macomb, MI 48042-6187	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) AML RISK MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roman, Dan <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48306-3674	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roman, Dan <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48306-3674	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Sara <hr/> Contributor address; City; State; Zip Code Livonia, MI 48154-3375	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) SR. PROJECT MANAGER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/125 Rpt: 108/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romano, Sara	7 Amount of Contribution (\$) \$10.38
6 Contributor address; City; State; Zip Code Livonia, MI 48154-3375		
8 Principal occupation / Job title (See Instructions) SR. PROJECT MANAGER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowell, La Toya	Amount of Contribution (\$) \$12.46
Contributor address; City; State; Zip Code Plano, TX 75074-8938		
Principal occupation / Job title (See Instructions) MGR COMMUNITY AFFAIRS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowell, La Toya	Amount of Contribution (\$) \$12.46
Contributor address; City; State; Zip Code Plano, TX 75074-8938		
Principal occupation / Job title (See Instructions) MGR COMMUNITY AFFAIRS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruks, Ronald	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Bloomfield Hills, MI 48301-2246		
Principal occupation / Job title (See Instructions) ALT GRP MGR - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruks, Ronald	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Bloomfield Hills, MI 48301-2246		
Principal occupation / Job title (See Instructions) ALT GRP MGR - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/125 Rpt: 109/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Marvin	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-2830		
8 Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Marvin	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Grosse Pointe Farms, MI 48236-2830		
Principal occupation / Job title (See Instructions) RETAIL DISTRICT MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabanovic, Anida	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Clinton Township, MI 48036-3669		
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabanovic, Anida	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Clinton Township, MI 48036-3669		
Principal occupation / Job title (See Instructions) Sr. Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samal, Dillip	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Aurora, IL 60502-9095		
Principal occupation / Job title (See Instructions) PRINCIPAL ENGINEER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/125 Rpt: 110/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samal, Dillip <hr/> 6 Contributor address; City; State; Zip Code Aurora, IL 60502-9095	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) PRINCIPAL ENGINEER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuelson, Ronald <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-1243	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuelson, Ronald <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-1243	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Kirby <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-3427	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Kirby <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-3427	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/125 Rpt: 111/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sangani, Piyush <hr/> 6 Contributor address; City; State; Zip Code Dublin, CA 94568-4904	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) DIR CREDIT RISK MGMT DCSNING		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sangani, Piyush <hr/> Contributor address; City; State; Zip Code Dublin, CA 94568-4904	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) DIR CREDIT RISK MGMT DCSNING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scattini, Devin <hr/> Contributor address; City; State; Zip Code San Jose, CA 95124-2301	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scattini, Devin <hr/> Contributor address; City; State; Zip Code San Jose, CA 95124-2301	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DIV CAO		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaden, Megan <hr/> Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1813	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) SR DIVISIONAL HR DIR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/125 Rpt: 112/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaden, Megan <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Park, MI 48230-1813	7 Amount of Contribution (\$) \$8.07
8 Principal occupation / Job title (See Instructions) SR DIVISIONAL HR DIR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ashley <hr/> Contributor address; City; State; Zip Code Macomb, MI 48042-2327	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) COMPLIANCE SPECIALIST III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ashley <hr/> Contributor address; City; State; Zip Code Macomb, MI 48042-2327	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) COMPLIANCE SPECIALIST III		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seder, Tina <hr/> Contributor address; City; State; Zip Code Saint Clair Shores, MI 48080-3736	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) TRUST BUSINESS SUPPORT SPEC SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seder, Tina <hr/> Contributor address; City; State; Zip Code Saint Clair Shores, MI 48080-3736	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) TRUST BUSINESS SUPPORT SPEC SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/125 Rpt: 113/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sefzik, Peter <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-3818	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CHIEF BANKING OFFICER		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sefzik, Peter <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3818	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF BANKING OFFICER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252-4982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252-4982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Lykesha <hr/> Contributor address; City; State; Zip Code Redford, MI 48239-1902	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) NATL COM DVP PROG MGR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/125 Rpt: 114/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Lykesha <hr/> 6 Contributor address; City; State; Zip Code Redford, MI 48239-1902	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) NATL COM DVP PROG MGR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoup, John <hr/> Contributor address; City; State; Zip Code Northville, MI 48167-2102	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) FRAUD INVESTIGATIONS DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoup, John <hr/> Contributor address; City; State; Zip Code Northville, MI 48167-2102	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) FRAUD INVESTIGATIONS DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Michael <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1514	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Michael <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1514	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/125 Rpt: 115/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siravo, Susan <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95864-3004	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) MGR SOCIAL MEDIA AND CONTENT		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siravo, Susan <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95864-3004	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) MGR SOCIAL MEDIA AND CONTENT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slapak, Vladimir <hr/> Contributor address; City; State; Zip Code Birmingham, MI 48009-1268	Amount of Contribution (\$) \$35.54
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slapak, Vladimir <hr/> Contributor address; City; State; Zip Code Birmingham, MI 48009-1268	Amount of Contribution (\$) \$35.54
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeffrey <hr/> Contributor address; City; State; Zip Code Birmingham, MI 48009-7162	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) PROCESS SERVICES ANALYST SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/125 Rpt: 116/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeffrey	7 Amount of Contribution (\$) \$5.76
6 Contributor address; City; State; Zip Code Birmingham, MI 48009-7162		
8 Principal occupation / Job title (See Instructions) PROCESS SERVICES ANALYST SR		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Nathan	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Troy, MI 48085-3734		
Principal occupation / Job title (See Instructions) DIR RELATIONSHIP PRICING		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Nathan	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Troy, MI 48085-3734		
Principal occupation / Job title (See Instructions) DIR RELATIONSHIP PRICING		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrentino, Michelle	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Kingwood, TX 77339-1594		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrentino, Michelle	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Kingwood, TX 77339-1594		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - BBG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/125 Rpt: 117/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacherski, Yvonne <hr/> 6 Contributor address; City; State; Zip Code Pigeon, MI 48755-9640	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SR MARKETING OPS MGR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacherski, Yvonne <hr/> Contributor address; City; State; Zip Code Pigeon, MI 48755-9640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR MARKETING OPS MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamson, Gregory <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648-4320	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamson, Gregory <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92648-4320	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) REG DIR -PRIV BNKG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stansbury, Jacob <hr/> Contributor address; City; State; Zip Code Grand Haven, MI 49417-2276	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) SMALL BUSINESS BANKER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/125 Rpt: 118/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stansbury, Jacob <hr/> 6 Contributor address; City; State; Zip Code Grand Haven, MI 49417-2276	7 Amount of Contribution (\$) \$9.23
8 Principal occupation / Job title (See Instructions) SMALL BUSINESS BANKER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Alicia <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48304-1053	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) DIR CORP QUALITY		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Alicia <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48304-1053	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) DIR CORP QUALITY		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Maria <hr/> Contributor address; City; State; Zip Code Grosse Pointe, MI 48230-1245	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) Credit Product Support Officer		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Maria <hr/> Contributor address; City; State; Zip Code Grosse Pointe, MI 48230-1245	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) Credit Product Support Officer		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/125 Rpt: 119/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Russell	7 Amount of Contribution (\$) \$33.00
6 Contributor address; City; State; Zip Code Troy, MI 48098-2676		
8 Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Russell	Amount of Contribution (\$) \$33.00
Contributor address; City; State; Zip Code Troy, MI 48098-2676		
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stolevski, Christina	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Oakland Township, MI 48306-1860		
Principal occupation / Job title (See Instructions) NATL RETAIL BC STRATEGIC MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stolevski, Christina	Amount of Contribution (\$) \$13.12
Contributor address; City; State; Zip Code Oakland Township, MI 48306-1860		
Principal occupation / Job title (See Instructions) NATL RETAIL BC STRATEGIC MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storemski, Edna	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Elgin, TX 78621		
Principal occupation / Job title (See Instructions) BCO CONTROL TEST SR ANALYST		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/125 Rpt: 120/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Storemski, Edna <hr/> 6 Contributor address; City; State; Zip Code Elgin, TX 78621	7 Amount of Contribution (\$) \$10.38
8 Principal occupation / Job title (See Instructions) BRCO CONTROL TEST SR ANALYST		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoudemire II, Robert <hr/> Contributor address; City; State; Zip Code Macomb, MI 48044-1382	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) FORECLOSURE & LEGAL MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoudemire II, Robert <hr/> Contributor address; City; State; Zip Code Macomb, MI 48044-1382	Amount of Contribution (\$) \$8.07
Principal occupation / Job title (See Instructions) FORECLOSURE & LEGAL MGR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-6711	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIR TOTAL REWARD RISK & HR OPS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-6711	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIR TOTAL REWARD RISK & HR OPS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/125 Rpt: 121/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroughter, Louis	7 Amount of Contribution (\$) \$5.76
6 Contributor address; City; State; Zip Code Detroit, MI 48235-1223		
8 Principal occupation / Job title (See Instructions) MGR - COMMRC L UNDRWRTNG CTR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroughter, Louis	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Detroit, MI 48235-1223		
Principal occupation / Job title (See Instructions) MGR - COMMRC L UNDRWRTNG CTR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Daniel	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Rochester, MI 48306-4824		
Principal occupation / Job title (See Instructions) SALES ENABLEMENT PROJ MGR SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Daniel	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Rochester, MI 48306-4824		
Principal occupation / Job title (See Instructions) SALES ENABLEMENT PROJ MGR SR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suarez, Larry	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Birmingham, MI 48009-1007		
Principal occupation / Job title (See Instructions) DIRECTOR - IRH		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/125 Rpt: 122/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suarez, Larry <hr/> 6 Contributor address; City; State; Zip Code Birmingham, MI 48009-1007	7 Amount of Contribution (\$) \$5.76
8 Principal occupation / Job title (See Instructions) DIRECTOR - IRH		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3704	Amount of Contribution (\$) \$43.00
Principal occupation / Job title (See Instructions) SPECIAL ASSETS GROUP MGR I		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Joseph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3704	Amount of Contribution (\$) \$43.00
Principal occupation / Job title (See Instructions) SPECIAL ASSETS GROUP MGR I		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susnjar, Nick <hr/> Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275-6315	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susnjar, Nick <hr/> Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275-6315	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/125 Rpt: 123/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swiftney, Steven <hr/> 6 Contributor address; City; State; Zip Code Rochester Hills, MI 48306-3148	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swiftney, Steven <hr/> Contributor address; City; State; Zip Code Rochester Hills, MI 48306-3148	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szmansky, Michael <hr/> Contributor address; City; State; Zip Code Troy, MI 48083-5386	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DOMAIN ARCHITECT		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szmansky, Michael <hr/> Contributor address; City; State; Zip Code Troy, MI 48083-5386	Amount of Contribution (\$) \$10.38
Principal occupation / Job title (See Instructions) DOMAIN ARCHITECT		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tech, Karl <hr/> Contributor address; City; State; Zip Code Grosse Pointe Shores, MI 48236-1750	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/125 Rpt: 124/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tech, Karl <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Shores, MI 48236-1750	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrell, Jacquetta <hr/> Contributor address; City; State; Zip Code Macomb, MI 48044-4929	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrell, Jacquetta <hr/> Contributor address; City; State; Zip Code Macomb, MI 48044-4929	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) Bank Manager		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Annette <hr/> Contributor address; City; State; Zip Code Redford, MI 48239-3843	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) PRODUCT MANAGER III		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Annette <hr/> Contributor address; City; State; Zip Code Redford, MI 48239-3843	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) PRODUCT MANAGER III		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/125 Rpt: 125/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Mary <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90277-4449	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) MANAGER, CRE REGIONAL MARKET		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Mary <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-4449	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) MANAGER, CRE REGIONAL MARKET		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Chris <hr/> Contributor address; City; State; Zip Code Dixon, CA 95620-4803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Chris <hr/> Contributor address; City; State; Zip Code Dixon, CA 95620-4803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trejo, Julie <hr/> Contributor address; City; State; Zip Code Waterford, MI 48327-1785	Amount of Contribution (\$) \$8.31
Principal occupation / Job title (See Instructions) DATA MGMT REPORTING TEAM LEAD		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/125 Rpt: 126/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trejo, Julie	7 Amount of Contribution (\$) \$8.31
6 Contributor address; City; State; Zip Code Waterford, MI 48327-1785		
8 Principal occupation / Job title (See Instructions) DATA MGMT REPORTING TEAM LEAD		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truant, Jeffrey	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Farmington, MI 48335-3358		
Principal occupation / Job title (See Instructions) GRP MGR-TM SALES		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truant, Jeffrey	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Farmington, MI 48335-3358		
Principal occupation / Job title (See Instructions) GRP MGR-TM SALES		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlian, Andrea	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Canton, MI 48188-6288		
Principal occupation / Job title (See Instructions) TM SALES MGR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlian, Andrea	Amount of Contribution (\$) \$10.38
Contributor address; City; State; Zip Code Canton, MI 48188-6288		
Principal occupation / Job title (See Instructions) TM SALES MGR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/125 Rpt: 127/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlian, Michael	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Canton, MI 48188-6288		
8 Principal occupation / Job title (See Instructions) PROJECT & SUPPORT MANAGER		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uhlian, Michael	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Canton, MI 48188-6288		
Principal occupation / Job title (See Instructions) PROJECT & SUPPORT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Kevin	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Long Island City, NY 11101-4750		
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urban, Kevin	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Long Island City, NY 11101-4750		
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ursuy, Joseph	Amount of Contribution (\$) \$70.27
Contributor address; City; State; Zip Code Oakland Township, MI 48306-4955		
Principal occupation / Job title (See Instructions) MD NATL/SPEC - ESD ENGY		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/125 Rpt: 128/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ursuy, Joseph <hr/> 6 Contributor address; City; State; Zip Code Oakland Township, MI 48306-4955	7 Amount of Contribution (\$) \$70.27
8 Principal occupation / Job title (See Instructions) MD NATL/SPEC - ESD ENGY		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uy, Arnold <hr/> Contributor address; City; State; Zip Code Keller, TX 76248-3270	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uy, Arnold <hr/> Contributor address; City; State; Zip Code Keller, TX 76248-3270	Amount of Contribution (\$) \$5.76
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaitkevicius, Matthew <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-3645	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) INVESTIGATIONS OFCR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaitkevicius, Matthew <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073-3645	Amount of Contribution (\$) \$9.23
Principal occupation / Job title (See Instructions) INVESTIGATIONS OFCR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/125 Rpt: 129/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Diepenbos, Michael <hr/> 6 Contributor address; City; State; Zip Code Grand Rapids, MI 49546-6442	7 Amount of Contribution (\$) \$32.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Diepenbos, Michael <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49546-6442	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - BBG		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Tassell, Jeffrey <hr/> Contributor address; City; State; Zip Code Walnut Creek, CA 94595-2363	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - NDS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Tassell, Jeffrey <hr/> Contributor address; City; State; Zip Code Walnut Creek, CA 94595-2363	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - NDS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vickers, Jarred <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-1520	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/125 Rpt: 130/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vickers, Jarred	7 Amount of Contribution (\$) \$27.00
6 Contributor address; City; State; Zip Code Dallas, TX 75248-1520		
8 Principal occupation / Job title (See Instructions) DIR OF MID MARKET & BUS BKNG		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voigt, Daniel	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Dallas, TX 75225-7211		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voigt, Daniel	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Dallas, TX 75225-7211		
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - MM		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Todd	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-7344		
Principal occupation / Job title (See Instructions) INVESTMENT STRATEGIST SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Todd	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Denton, TX 76208-7344		
Principal occupation / Job title (See Instructions) INVESTMENT STRATEGIST SR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/125 Rpt: 131/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Janelle <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201-6302	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) PW REGIONAL DIRECTOR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Janelle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-6302	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) PW REGIONAL DIRECTOR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Jonathan <hr/> Contributor address; City; State; Zip Code Rcho Sta Marg, CA 92688-2752	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Jonathan <hr/> Contributor address; City; State; Zip Code Rcho Sta Marg, CA 92688-2752	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MGR IV - CRE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-2732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHIEF EXPERIENCE OFFICER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/125 Rpt: 132/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, James <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-2732	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CHIEF EXPERIENCE OFFICER		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weddell, Charles <hr/> Contributor address; City; State; Zip Code New Hudson, MI 48165-8128	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ALT GRP MGR - CRE		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weddell, Charles <hr/> Contributor address; City; State; Zip Code New Hudson, MI 48165-8128	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ALT GRP MGR - CRE		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weston, Walter <hr/> Contributor address; City; State; Zip Code Redmond, WA 98053-3218	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weston, Walter <hr/> Contributor address; City; State; Zip Code Redmond, WA 98053-3218	Amount of Contribution (\$) \$12.46
Principal occupation / Job title (See Instructions) GROUP MANAGER II - TLS		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/125 Rpt: 133/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Brandon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-3520	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Brandon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3520	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) GROUP MANAGER II - USB		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiting, David <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7225	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR TECH & LIFE SCIENCES		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiting, David <hr/> Contributor address; City; State; Zip Code Plano, TX 75093-7225	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) DIR TECH & LIFE SCIENCES		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Meredith <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35802-4900	Amount of Contribution (\$) \$13.12
Principal occupation / Job title (See Instructions) PRIV BNKG OFCR IV		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/125 Rpt: 134/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittington, Meredith <hr/> 6 Contributor address; City; State; Zip Code Huntsville, AL 35802-4900	7 Amount of Contribution (\$) \$13.12
8 Principal occupation / Job title (See Instructions) PRIV BNKG OFCR IV		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggs, Leticia <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91801-2914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRUST SR PROJECT MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiggs, Leticia <hr/> Contributor address; City; State; Zip Code Alhambra, CA 91801-2914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRUST SR PROJECT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Mary <hr/> Contributor address; City; State; Zip Code Parker, TX 75002-2779	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PETROLEUM ENGINEER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Mary <hr/> Contributor address; City; State; Zip Code Parker, TX 75002-2779	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PETROLEUM ENGINEER		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/125 Rpt: 135/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Winston <hr/> 6 Contributor address; City; State; Zip Code Mableton, GA 30126-1263	7 Amount of Contribution (\$) \$6.61
8 Principal occupation / Job title (See Instructions) PRODUCT MANAGER IV		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Winston <hr/> Contributor address; City; State; Zip Code Mableton, GA 30126-1263	Amount of Contribution (\$) \$6.61
Principal occupation / Job title (See Instructions) PRODUCT MANAGER IV		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimbley, Stacy <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48051-3028	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimbley, Stacy <hr/> Contributor address; City; State; Zip Code Chesterfield, MI 48051-3028	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Brian <hr/> Contributor address; City; State; Zip Code Livonia, MI 48154-2536	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MANAGING DIR-TRUST ALLIANCES		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/125 Rpt: 136/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Brian <hr/> 6 Contributor address; City; State; Zip Code Livonia, MI 48154-2536	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) MANAGING DIR-TRUST ALLIANCES		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worley III, Fred <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070-6145	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR EFS		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worley III, Fred <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070-6145	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR EFS		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, John <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056-5614	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SR DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, John <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056-5614	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SR DIVISIONAL FINANCE DIRECTOR		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/125 Rpt: 137/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wurtz, Barbara <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92618-8891	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) DIRECTR COMML UNDERWRITING CTR		9 Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wurtz, Barbara <hr/> Contributor address; City; State; Zip Code Irvine, CA 92618-8891	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIRECTR COMML UNDERWRITING CTR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yamashiro, Teri <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607-3502	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) BUS UNIT RISK MANAGER SR		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yamashiro, Teri <hr/> Contributor address; City; State; Zip Code Valley Village, CA 91607-3502	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) BUS UNIT RISK MANAGER SR		Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Lori <hr/> Contributor address; City; State; Zip Code San Jose, CA 95128-4009	Amount of Contribution (\$) \$31.10
Principal occupation / Job title (See Instructions) CAO II		Employer (See Instructions) Comerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/125 Rpt: 138/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Lori	7 Amount of Contribution (\$) \$31.10
6 Contributor address; City; State; Zip Code San Jose, CA 95128-4009		
8 Principal occupation / Job title (See Instructions) CAO II		9 Employer (See Instructions) Comerica
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zonca, Robert	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Chesterfield, MI 48051-1799		
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zonca, Robert	Amount of Contribution (\$) \$5.76
Contributor address; City; State; Zip Code Chesterfield, MI 48051-1799		
Principal occupation / Job title (See Instructions) PRIN PRODUCT MANAGER		Employer (See Instructions) Comerica

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 139/162

2 FILER NAME
Comerica Inc. PAC

3 Filer ID (Ethics Commission Filers)
00066925

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 140/162
2 FILER NAME Comerica Inc. PAC		3 Filer ID (Ethics Commission Filers) 00066925
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Andy Barr For Congress, Inc.	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 2059 Lexington, KY 40588	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Angie Chen Button Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 832748 Richardson, TX 75083	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Ann Johnson Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 56386 Houston, TX 77256-6386	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name Ann Wagner For Congress
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 50 Ballwin, MO 63022-0050
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2024	Payee name Beatty For Congress
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 222 East Town Street Suite 2W Columbus, OH 43215-4616
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 09/06/2024	Payee name Bhojani for Texas
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 Campus Circle Drive East, Suite 100 Irving, TX 75063-2705
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name Bill Foster For Congress
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6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 9104 Aurora, IL 60598-9104
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Brent Hagenbuch Campaign
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2800 Shoreline r, #310 Denton, TX 76210-4410
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Brian Fitzpatrick for All of Us
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 939 Langhorne, PA 19047
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name Carey For Congress
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6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 16032 Columbus, OH 43216-6032
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Carol Alvarado Campaign
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 230842 Houston, TX 77223-0842
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Cesar Blanco for Texas Senate
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 929 El Paso, TX 79946-0929
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/06/2024	5 Payee name Cole Hefner for State Representative	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 167 Mount Pleasant, TX 75456-0167	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Craig Goldman For Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 100039 Fort Worth, TX 76185-0039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name David Scott for Congress	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 960821 Riverdale, GA 30296-0821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Don Bacon For Congress	
6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 391368 Omaha, NE 68139-1368	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Drew Darby Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 3284 San Angelo, TX 76902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Emmer For Congress	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 279 Elk River, MN 55330-0279	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name French Hill for Arkansas
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6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 7841 Little Rock, AR 72217
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Friends For Gregory Meeks
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 153-01 Jamaica Ave. Suite 535 Jamaica, NY 11432
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Friends of Donna Campbell
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1308 Common St, Ste 2015 Box 713 New Braunfels, TX 78130-3557
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name Garbarino For Congress
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 101 Bayport, NY 11705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Giovanni Capriglione Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 92007 Southlake, TX 76092-0101
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Himes for Congress
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 857 Post Road, #312 Fairfield, CT 06824
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Jake Ellzey For Congress	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 791 Hwy 77 N Suite-C #258 Waxahachie, TX 75165-1879	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Jay Dean for Texas	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3822 Holly Ridge Longview, TX 75605-2500	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name Jeff Leach Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 866186 Plano, TX 75086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/06/2024	5 Payee name Joe Moody Campaign	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 285 Puesta Del Sol El Paso, TX 79912-4872	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name John Curtis for Utah	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 296 Provo, UT 84603-0296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Josh Gottheimer for Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 584 Ridgewood, NJ 07451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/06/2024	5 Payee name Juan Hinojosa for State Senate	
6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1508 S. Lone Star Way Ste. 5B Edinburg, TX 78539-3603	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Lawler For Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 87 South Salem, NY 10590-0087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Lori Chavez-Deremer For Congress	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13203 SE 172nd Ave Ste 166 #399 Happy Valley, OR 97086-8738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Lucas For Congress	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1726 Oklahoma City, OK 73101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name McCaul For Congress, Inc	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1108 Lavaca St Suite 110-402 Austin, TX 78701-2110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Meuser For Congress	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box183 Hudson, WI 54016-0183	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Mike Flood For Congress	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 81041 Lincoln, NE 68501-1041	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Monica For Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 4605 McAllen, TX 78502-4605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Montanans for Tester	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1135 Helena, MT 59624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Morgan LaMantia Campaign
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6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1324 E Madison Brownsville, TX 78520-5758
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Morgan Meyer for Texas
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3838 Oak Lawn Avenue Suite 400 Dallas, TX 75219-4506
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Nathan Johnson Campaign
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 670994 Dallas, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/06/2024	5 Payee name Oscar Longoria Campaign	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 4224 Mission, TX 78572	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/17/2024	Candidate/Officeholder name Pete Sessions for Congress	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 7754 Waco, TX 76714-7754	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2024	Candidate/Officeholder name Phil King Campaign	
Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 1913 Weatherford, TX 76086-7913	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Rafael Anchia for Texas House District 103
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6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768-2910
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Rick Scott For Florida
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 130708 Tampa, FL 33681-0708
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Roger Williams For U S Congress Committee
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 N. Caddo St. Pmb #174 Cleburne, TX 76031
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Royce West Campaign Committee
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6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5787 South Hampton Rd. Suite 255 Dallas, TX 75232-6333
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Ryan Guillen Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5346 E. US Hwy 83, Building A, Suite 5-A Rio Grande City, TX 78582-9471
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Sam Harless Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15814 Champion Forest PMB 312 Spring, TX 77379-7141
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
4 Date 09/17/2024	5 Payee name Sherman For Congress	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 777 S. Figueroa Street Suite 4050 Los Angeles, CA 90017	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Steil For Wisconsin, Inc.	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1818 Milton Ave # 1448 Janesville, WI 53545	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Sylvia Garcia For Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 8530 Houston, TX 77249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Tan Parker Campaign
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6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 271741 Flower Mound, TX 75027-1741
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Texans for Dade
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 848 Nederland, TX 77627-0848
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Texans for Joan Huffman
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3100 Edloe St, Suite 220 Houston, TX 77027-6030
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Texans for Stan Lambert Campaign
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box #3752 Abilene, TX 79604-3752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Texans for Trent Ashby
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 412 Lufkin, TX 75902-0412
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name The Matt Shaheen Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3917 Malton Drive Plano, TX 75025-3829
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/06/2024	5 Payee name Todd Hunter Campaign
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 445 Cape Henry Drive Corpus Christi, TX 78412-2633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2024	Payee name Toni Rose Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 41867 Dallas, TX 75241
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Torres For Congress
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 580303 Bronx, NY 10458-0714
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/22 Rpt:	2 FILER NAME Comerica Inc. PAC	3 Filer ID (Ethics Commission Filers) 00066925
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4 Date 09/17/2024	5 Payee name Vicente Gonzalez for Congress
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 6270 Brownsville, TX 78523-6270
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2024	Payee name WICKER FOR SENATE
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 64 JACKSON, MS 39205-0064
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Young Kim for Congress
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 17490 Anaheim, CA 92817-7490
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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