



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 07/21/14 to 08/25/14

| | | | |
|--|--|---------------------------|-------------------|
| 1. Committee I.D. Number 013853-3 | 4. Candidate Last Name Hackel | First Name Mark | M.I. A. |
| 2. Committee Name Mark Hackel for County Executive | 4a. Office Sought Including District # or Community Served (If applicable) County Executive 12 | | |
| | 4b. County of Residence MACOMB | | |

| | |
|--|--|
| 5. Committee's Mailing Address 12900 Hall Rd. Suite 500 Sterling Heights, MI 48313 Area Code and Phone <u>(586) 254-1040</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official. | 6. Treasurer's Name & Residential Address Harold J. Burns 1460 Kinney Rd. Memphis, MI 48041 Area Code & Phone <u>(586) 206-8110</u> |
|--|--|

| | |
|--|---|
| 7. Treasurer's Business Address 12900 Hall Rd. Suite 500 Sterling Heights, MI 48313 Area Code and Phone <u>(586) 254-1040</u> | 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone _____ |
|--|---|

FILED
14 SEP 13 PM 2:45
CARRIE A. SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

| | | |
|--|--|---|
| 9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>08/05/14</u> | Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) | 9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. |
|--|--|---|

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

| | | |
|---|---------------|-----------------------|
| Current Treasurer or Designated Record keeper Harold J. Burns Type or Print Name | Signature | Date <u>9/3/14</u> |
| Candidate Mark A. Hackel Type or Print Name | Signature | Date <u>9-3-14</u> |



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 013853-3

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Mark Hackel for County Executive

| RECEIPTS | | Column I This Period | Column II Cumulative this election cycle |
|--|------------|-------------------------|---|
| 3. Contributions | | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ | <u>9,525.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ | <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ | <u>\$9,525.00</u> | (18.) \$ <u>\$202,514.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ | <u>\$0.07</u> | (19.) \$ <u>\$192.68</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ | <u>\$9,525.07</u> | (20.) \$ <u>\$202,706.68</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ | <u>\$0.00</u> | (21.) \$ <u>\$2,124.38</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ | <u>\$0.00</u> | (22.) \$ <u>\$0.00</u> |
| EXPENDITURES | | | |
| 8. Expenditures | | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ | <u>\$17,707.30</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ | <u>\$0.00</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ | <u>\$0.00</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ | <u>\$17,707.30</u> | (23.) \$ <u>\$133,102.80</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | | |
| 10. Disbursements | | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ | <u>\$0.00</u> | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ | <u>\$0.00</u> | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ | <u>\$0.00</u> | (24.) \$ <u>\$0.00</u> |
| DEBTS AND OBLIGATIONS | | | |
| 12. Debts and Obligations | | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ | <u>\$0.00</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ | <u>\$0.00</u> | |
| BALANCE STATEMENT | | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ | <u>\$81,704.16</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ | <u>\$9,525.07</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ | <u>\$91,229.23</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ | <u>\$17,707.30</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ | <u>\$73,521.93</u> | * |



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Dominic Abbate 2500 Royal View Dr. Oakland MI 48363 | | \$ <u>50.00</u> | \$ <u>675.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Wakely Associates</u> Business Address <u>30500 Van Dyke Warren MI 48093-6369</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Richard Adlen 20470 Colman St. Clinton Twp. MI 48035-4028 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Dean Alan 21900 Church St. Clair Shores MI 48080 | | \$ <u>50.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Floyd Allen 2500 Fisher Building Detroit MI 48202 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$250.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Claudia Amboyer 54367 Queensrow Shelby Twp. MI 48316 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Keith Azzopardi 46542 Heathmoor Chesterfield MI 48051 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Joel Ballor 50383 Heatherwood Shelby Twp. MI 48317 | | \$ <u>50.00</u> | \$ <u>375.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Vice President</u> Employer <u>Ballor Towing</u> Business Address <u>57760 Main New Haven MI 48048</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: Sabiha Banihassan 6758 Abington Ave. Detroit MI 48228-3818 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$250.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Karen Beasley 1157 Sandy Ridge Rochester Hills MI 48306 | | \$ <u>350.00</u> | \$ <u>350.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Schoenherr Family Practice</u> Business Address <u>15055 22 Mile Rd., Ste. B Shelby Twp. MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: John Bierbusse 77147 N. Mary Grace Ct. Romeo MI 48065 | | \$ <u>50.00</u> | \$ <u>175.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>Macomb/St. Clair Workforce</u> Business Address <u>21885 Dunham Rd., Ste 11 Clinton Twp. MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Gary Broad 20850 Moxon Dr. Clinton Twp. MI 48036 | | \$ <u>40.00</u> | \$ <u>790.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Midwest Steel</u> Business Address <u>2525 E. Grand Blvd. Detroit MI 48211</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Leonard Bugajewski 16982 Stewart Clinton Twp. MI 48038 | | \$ <u>50.00</u> | \$ <u>900.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Leonard's Syrups</u> Business Address <u>4225 Nancy Ave. Detroit MI 48212</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$490.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Paul Chirco 3045 Harrow Way Shelby Twp. MI 48316 | | \$ <u>100.00</u> | \$ <u>600.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer <u>Chirco Title Agency</u> Business Address <u>26800 Harper St. Clair Shores MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Lynn Davidson 20800 Park Pl. Ln. Clinton Twp. MI 48036 | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Macomb County Friend of the Court</u> Business Address <u>40 N. Main Street, 6th Floor Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Alfred DeFlaviis 19657 Ashley Ct. Livonia MI 48152 | | \$ <u>20.00</u> | \$ <u>95.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Mark F. Deldin 41258 Windmill St. Harrison Twp. MI 48045 | | \$ <u>20.00</u> | \$ <u>770.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy County Executive</u> Employer <u>Macomb County</u> Business Address <u>One South Main, 8th Floor Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$190.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Dan Demeester 9349 Meisner Rd. Casco MI 48064 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Brian DeMuyneck 48774 Pointe Lakeview Chesterfield MI 48047 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Donald Denault 15731 Marcie Fraser MI 48026 | | \$ <u>20.00</u> | \$ <u>95.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Michael DeVault 7910 Walters Rd. Laingsburg MI 48848 | | \$ <u>100.00</u> | \$ <u>450.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Superintendent</u> Employer <u>Macomb Intermediate School District</u> Business Address <u>44001 Garfield Rd Clinton Twp. MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$180.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
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1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: Alisa Diez 13526 Towering Oaks Dr. Shelby Twp. MI 48315-1330 | | \$ <u>50.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Richard Doherty 31746 Gloria Ct. Warren MI 48093 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Eleanor Duquette 19075 Faulman Rd. Clinton Twp. MI 48035 | | \$ <u>20.00</u> | \$ <u>45.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Andrey Duzyj 26657 Haverhill Warren MI 48091 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$170.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Richard Ellis 85 S. Wilson Mount Clemens MI 48043 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Joann Eschenburg 18989 Carmelo Dr. N. Clinton Twp. MI 48038 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Rose Marie Fessler 13652 Amanda Sterling Heights MI 48313 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Eric Foster 32127 Riverdale St. Harrison Twp. MI 48045 | | \$ <u>50.00</u> | \$ <u>900.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Belle Maer Harbor</u> Business Address <u>41700 Conger Bay Drive Harrison Twp. MI 48045</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$160.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|--|---|
| <p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u></p> <p>Name & Address: Steven Fox 12109 Hidden View Ct. Utica MI 48315</p> | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Prosecutor</u> Employer <u>Macomb County</u></p> <p>Business Address <u>One South Main, 4th Floor Mt. Clemens MI 48043</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | <p>Click Here for Memo Itemization</p> | |
| <p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u></p> <p>Name & Address: F. Norman Fox 48153 Mallard Dr. Chesterfield MI 48047</p> | | \$ <u>20.00</u> | \$ <u>370.00</u> |
| <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Retired</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | <p>Click Here for Memo Itemization</p> | |
| <p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u></p> <p>Name & Address: James George 19634 Westchester Clinton Twp. MI 48038</p> | | \$ <u>50.00</u> | \$ <u>1,475.00</u> |
| <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Retired</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | <p>Click Here for Memo Itemization</p> | |
| <p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u></p> <p>Name & Address: Yousif Ghafari 17101 Michigan Ave. Dearborn MI 48126</p> | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | <p>Click Here for Memo Itemization</p> | |

Page Subtotal \$220.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Thomas Giachino 2742 Rhodes Dr. Troy MI 48083 | | \$ <u>20.00</u> | \$ <u>770.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Metro Technology Services</u> Business Address <u>44 First Street Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Thomas Giftos 27947 Groesbeck Roseville MI 48066 | | \$ <u>100.00</u> | \$ <u>200.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Restaurant Executive</u> Employer <u>National Coney Island</u> Business Address <u>27947 Groesbeck, Roseville MI 48066</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Sharon Gire 37567 Radde St. Clinton Twp. MI 48036 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Viktor Gjonaj 14523 Bournemuth Dr. Shelby Twp. MI 48315 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal **\$210.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Paul Glantz 303 Gray Woods Ln. Lake Angelus MI 48326 | | \$ <u>100.00</u> | \$ <u>350.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Proctor Financial, Inc.</u> Business Address <u>5225 Crooks Troy MI 48095</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Steven Gold 13340 Balfour Ave. Huntington Woods MI 48070 | | \$ <u>25.00</u> | \$ <u>525.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Macomb County</u> Business Address <u>One South Main, 8th Floor Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Thomas Guastello 34120 Woodward Ave. Birmingham MI 48009 | | \$ <u>50.00</u> | \$ <u>2,325.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Developer</u> Employer <u>Self Employed</u> Business Address <u>34120 Woodward Birmingham MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Thomas Hakim 22525 Hall Rd. Ste. D Macomb MI 48042 | | \$ <u>1,000.00</u> | \$ <u>1,000.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Hakim Financial</u> Business Address <u>22525 Hall Rd. Ste. D Macomb MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$1,175.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: John Hart 38120 Willowmere St. Harrison Twp. MI 48045 | | \$ <u>20.00</u> | \$ <u>120.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Donald Herman 17815 Clover Hill Dr. Macomb MI 48044 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Robert Hindman 49522 Keycove St. Chesterfield MI 48047 | | \$ <u>100.00</u> | \$ <u>650.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>American Graphics</u> Business Address <u>34895 Groesbeck Hwy Clinton Twp. MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Andrea Irons 15795 Newport Clinton Twp. MI 48038 | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self Employed</u> Business Address <u>38770 Garfield Ste. 100 Clinton Twp. MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$ 210.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: John Jendza P.O. Box 46024 Mt. Clemens MI 48046 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Kenneth Jenkins 46385 White Cap Dr. Macomb MI 48044 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Timothy Johnson 23224 Robert John St. St. Clair Shores MI 48080 | | \$ <u>40.00</u> | \$ <u>290.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Gaukler Pointe Communications</u> Business Address <u>23224 Robert John St. Clair Shores MI 48080</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: James Kaiser 2089 Camel Drive Sterling Heights MI 48310 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$230.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Thomas Kalkofen 12402 Frank Dr. Romeo MI 48065 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: Richard Kennedy 4195 Sandy Creek Dr. Shelby Twp. MI 48316-3077 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Richardo Kilpatrick 903 N. Opdyke Rd. Suite C Auburn Hills MI 48326 | | \$ <u>50.00</u> | \$ <u>125.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kilpatrick & Associates</u> Business Address <u>903 N. Opdyke Rd. Suite C Auburn Hills MI 48326</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Robert Kirk 19500 Hall Rd. #100 Clinton Twp. MI 48038 | | \$ <u>100.00</u> | \$ <u>1,450.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk, Huth, Lange & Badalamenti, PLC</u> Business Address <u>19500 Hall Rd. #100 Clinton Twp. MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$270.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Gary Kirsh 59499 Hayes Rd. Washington Twp. MI 48094 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: George Curis 37362 Flore Clinton Twp. MI 48036 | | \$ <u>200.00</u> | \$ <u>200.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Curis Management</u> Business Address <u>21115 Mack Grosse Pointe Woods MI 48236</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Judy Lavers 39757 Mazuchet Dr. Harrison Twp. MI 48045 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Pamela Lavers 27870 Lauren St. E. Harrison Twp. MI 48045 | | \$ <u>100.00</u> | \$ <u>750.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Assistant County Executive</u> Employer <u>Macomb County</u> Business Address <u>One South Main, 8th Floor Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$400.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: John Leackfeldt 2438 John R. Rd. Troy MI 48083-2585 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Nancy Licata 1825 South Channel Dr. Harsens Island MI 48028 | | \$ <u>40.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Anthony Lombardo 56075 Ken Charles Shelby Twp. MI 48316 | | \$ <u>50.00</u> | \$ <u>425.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder/Developer</u> Employer <u>Lombardo Companies</u> Business Address <u>51237 Danview Technology Ct. Shelby Twp. MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Christopher Loria 34051 Northwood Ct. Sterling Heights MI 48312 | | \$ <u>50.00</u> | \$ <u>125.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Educator</u> Employer <u>Lake Shore Public Schools</u> Business Address <u>28850 Harper Ave. St. Clair Shores MI 48081</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$190.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Kelly Lovati 7938 Alexandria Fair Haven MI 48023 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Henry Luks 18738 Rockport St. Roseville MI 48066 | | \$ <u>25.00</u> | \$ <u>125.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Controller Security Systems</u> Business Address <u>21363 Gratiot Ave. Eastpointe MI 48021</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Joseph Mangano 45880 Private Shore Dr. Chesterfield MI 48047 | | \$ <u>20.00</u> | \$ <u>220.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Frank Marcella 35979 Carlisle St. Clinton Twp. MI 48035 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$145.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: Maria Martinez 21001 E. 11 Mile Road St. Clair Shores MI 48081-1551 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Robert Mattler 5283 Provincial Bloomfield Hills MI 48302 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: James Mcrail 42314 Toddmark Clinton Twp. MI 48038 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Martin Mileski 17830 Cedarlawn Clinton Twp. MI 48035 | | \$ <u>20.00</u> | \$ <u>45.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$140.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Richard Mitchell 32829 Crooks Chesterfield MI 48047 | | \$ <u>20.00</u> | \$ <u>95.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Bill Morelli 16226 Pine Ridge Dr. Fraser MI 48026 | | \$ <u>50.00</u> | \$ <u>125.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: John Nitz 57477 Willow Way Ct. Washington Twp. MI 48094 | | \$ <u>20.00</u> | \$ <u>720.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Reilly Rancilio, P.C.</u> Business Address <u>12900 Hall Road, Ste 350 Sterling Heights MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Donald O'Dell 31810 N River Rd. Harrison Twp. MI 48045 | | \$ <u>20.00</u> | \$ <u>45.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$110.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Paul Puchovan W 8189 County Rd. 388 Fathorn MI 49892 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Diana Rascano 29634 Jefferson St. Clair Shores MI 48082 | | \$ <u>40.00</u> | \$ <u>90.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Steve Remias 52503 Royal Forest Shelby Twp. MI 48315 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/14</u> Name & Address: Seka Ristic 47885 Sandy Ridge Dr. Macomb MI 48044-5921 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$160.00

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

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Steven Rizzo 8705 Inverness Washington Twp. MI 48095 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Roy Rose 55620 Woodridge Dr. Shelby Twp. MI 48316 | | \$ <u>50.00</u> | \$ <u>525.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Civil Engineer</u> Employer <u>Anderson, Eckstein & Westrick</u> Business Address <u>51301 Schoenherr Shelby Twp. MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/14</u> | |
| Name & Address: Melissa Roy 1408 Joliet Pl. Detroit MI 48207-2801 | | \$ <u>50.00</u> | \$ <u>400.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Assistant County Executive</u> Employer <u>Macomb County</u> Business Address <u>1 South Main, 8th Floor Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: James Scanlon 339 Cox St. Clair MI 48079 | | \$ <u>50.00</u> | \$ <u>125.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$200.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 Name & Address: Lawrence Scott 38447 Huron Place Harrison Twp. MI | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> | \$ <u>20.00</u> | \$ <u>95.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 Name & Address: Maria Sedki 41698 Brownstone Dr. Novi MI 48377 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 Name & Address: Victoria Selva 55555 Broughton Rd. Macomb MI 48042 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> | \$ <u>20.00</u> | \$ <u>120.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Selva Strategies, LLC</u> Business Address <u>55555 Broughton Rd. Macomb MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 Name & Address: Angela Sheker 32727 Greenwood Chesterfield MI 48047 | PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$140.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---------------------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Grace Shore 17305 Averhill Blvd. Macomb MI 48042 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Chris Sieradzki 41455 Production Dr. Harrison Twp. MI 48045 | | \$ <u>100.00</u> | \$ <u>500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Land Development</u> Employer <u>Traffic Light</u> Business Address <u>24500 Henry B. Joy Blvd. Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Gordon Snaverly 3240 Pine Lake Rd. Orchard Lake Rd. MI 48324 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Clarice Squillace 14816 Mayview Ct. Shelby Twp. MI 48315 | | \$ <u>90.00</u> | \$ <u>90.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$230.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Vito Strollis 19874 Westchester Dr. Clinton Twp. MI 48038 | | \$ <u>100.00</u> | \$ <u>1,400.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Ruehles Towing</u> Business Address <u>205 Northbound Gratiot Ave. Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Stephen Swetech 43868 Scoter Ln. Clinton Twp. MI 48038 | | \$ <u>20.00</u> | \$ <u>445.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Beaumont Health Group</u> Business Address <u>43600 Garfield Clinton Twp. MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Ron Syme 38690 Long Harrison Twp. MI 48045 | | \$ <u>50.00</u> | \$ <u>400.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Wakely Associates, Inc.</u> Business Address <u>30500 Van Dyke Suite M-7 Warren MI 48093</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Robert Taylor 18303 Hazelwood St Roseville MI 48066 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$190.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Ronald Thayer 4725 Pickering Rd. Bloomfield Hills MI 48301 | | \$ <u>\$20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Paul Thoen 42850 Garfield #101 Clinton Twp. MI 48038 | | \$ <u>\$20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/29/14</u> | |
| Name & Address: Mary Ann Thoma 43234 Aspen Dr. Sterling Heights MI 48313-2102 | | \$ <u>\$20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Tim Tomlinson 38272 Trillium Pl. Harrison Twp. MI 48045 | | \$ <u>50.00</u> | \$ <u>625.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>York, Dolan & Tomlinson, P.C.</u> Business Address <u>42850 Garfield Rd., Ste. 101 Clinton Twp MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$110.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---|------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Thomas Valentine 1142 Forrest Bay Dr. Waterford MI 48328 | | \$ <u>100.00</u> | \$ <u>500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Creative Solutions Group</u> Business Address <u>1250 N Crooks Clawson MI 48017</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Karen L. Vaughn 1051 Country Club Dr. St. Clair Shores MI 48082 | | \$ <u>20.00</u> | \$ <u>520.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>American Ink USA Printing & Graphics</u> Business Address <u>33812 Groesbeck Hwy Clinton Twp MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Dorie Vazquez-Nolan 49226 Willowood Dr. Macomb MI 48044 | | \$ <u>40.00</u> | \$ <u>190.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>Care House</u> Business Address <u>131 Market St. Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Katheryn Vetrano 14402 Fruitwood Washington Twp. MI 48094 | | \$ <u>25.00</u> | \$ <u>25.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$185.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Gail Warde 250 Washington Rd. Grosse Pointe MI 48230 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Robert Watson 59539 Romeo Plank Ray MI 48096 | | \$ <u>40.00</u> | \$ <u>840.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Big R Farms</u> Business Address <u>59539 Romeo Plank Road Ray MI 48096</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Charles Welton 2742 Rhodes Dr. Troy MI 48083 | | \$ <u>20.00</u> | \$ <u>620.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Metro Technology Services</u> Business Address <u>59 N. Walnut #202 Mt. Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Gordon Wilson 14350 Fruitwood Washington Twp. MI 48094 | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Civil Engineer</u> Employer <u>Anderson Eckstein & Westrick</u> Business Address <u>51301 Schoenherr Shelby Twp. MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$210.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: Thomas Zampardo 290 Kerby Rd. Detroit MI 48236 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 | PAC Receipt? <input checked="" type="checkbox"/> YES | 4. Date of Receipt <u>08/01/14</u> | |
| Name & Address: Detroit Regional Chamber PAC One Woodward Ave. Ste. 1900 Detroit MI 48232 | | \$ <u>1,000.00</u> | \$ <u>1,500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 | PAC Receipt? <input checked="" type="checkbox"/> YES | 4. Date of Receipt <u>08/01/14</u> | |
| Name & Address: Ford Motor Company Civic Action Fund PAC The American Road Dearborn MI 48121 | | \$ <u>1,000.00</u> | \$ <u>2,750.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 | PAC Receipt? <input checked="" type="checkbox"/> YES | 4. Date of Receipt <u>08/11/14</u> | |
| Name & Address: MEA Local 1 PAC 38550 Garfield Suite B Clinton Twp. MI 48038 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$2,300.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|--|---|---|
| 3. Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Plunkett Cooney PAC 38505 Woodward Ste. 2000 Bloomfield Hills MI 48304 | | \$ <u>60.00</u> | \$ <u>135.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>08/11/14</u> Name & Address: Registrars PAC, IBEW Local 58 1358 Abbott Detroit MI 48226 | | \$ <u>500.00</u> | \$ <u>1,700.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/14</u> Name & Address: Conrad C. Maday II 61275 Pinehurst Dr. Washington MI 48094 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer <u>Farm Bureau Insurance</u> Business Address <u>54780 Mound Road Shelby Twp. MI 48316</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ | | \$ _____ | \$ _____ |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | Click Here for Memo Itemization | |

Page Subtotal \$810.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$9,525.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1**

CANDIDATE COMMITTEE

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

| 3. Name & Address From Whom Received | 4. Date of Receipt | 5. Type of Receipt | 6. Amount |
|--|--------------------------------------|---|----------------|
| Receipt #1 Name & Address: Huntington National Bank PO Box 1558 EA1W37 Columbus, OH 43216-1558 | Date of Receipt <u>07/31/14</u> | <input type="checkbox"/> Loan from a Lending Institution <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ <u>0.07</u> |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #2 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #3 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #4 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #5 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #6 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |
| Receipt #7 Name & Address: | Date of Receipt _____ | <input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____ | \$ _____ |
| | <input type="checkbox"/> Fund Raiser | | |

Page Subtotal \$0.07

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

\$0.07

Enter this total on
line 4 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|-------------------------|--------------------|
| Expenditure #1 Name Frank Taylor Group, Inc. Address 55618 Stewart Dr. Macomb MI 48042 <input type="checkbox"/> Fund Raiser | Purpose: <u>Expense Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/01/14</u> Date | \$ <u>164.80</u> |
| Expenditure #2 Name Office Max Address 18493 Hall Road Macomb MI 48042 <input type="checkbox"/> Fund Raiser | Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/01/14</u> Date | \$ <u>-164.80</u> |
| Expenditure #3 Name American Graphics Printing Address 34895 Groesbeck Clinton Twp., MI 48035 <input type="checkbox"/> Fund Raiser | Purpose: <u>Support Letter</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/01/14</u> Date | \$ <u>45.90</u> |
| Expenditure #4 Name The Macomb Township Historical Commission Address 54111 Broughton Rd. Macomb Twp., MI 48042 <input type="checkbox"/> Fund Raiser | Purpose: <u>General Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/04/14</u> Date | \$ <u>225.00</u> |
| Expenditure #5 Name Thayer and Associates Address 4725 Pickering Road Bloomfield Hills, MI 48301 <input type="checkbox"/> Fund Raiser | Purpose: <u>Public Relations Consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/06/14</u> Date | \$ <u>4,500.00</u> |

Subtotal this page **\$4,935.70**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|--|---|--|
| Expenditure #1 Name Families Against Narcotics Address 33000 Garfield Road Fraser, MI 48026 <input type="checkbox"/> Fund Raiser | Purpose: <u>General Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/11/14</u> Date | <u>\$ 500.00</u> Click Here for Memo Itemization Type |
| Expenditure #2 Name Mary Solomon Address 49056 Deerfield Macomb, MI 48044 <input type="checkbox"/> Fund Raiser | Purpose: <u>Expense Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/11/14</u> Date | <u>\$ 18.47</u> Memo Itemization Below |
| Expenditure #3 Name Kroger Address 21555 21 Mile Road Macomb, MI 48044 <input type="checkbox"/> Fund Raiser | Purpose: <u>Primary Election Party Meeting Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/05/14</u> Date (Memo Itemization) | <u>\$ -18.47</u> |
| Expenditure #4 Name Melissa Roy Address 1408 Joliet Pl. Detroit MI 48207-2801 <input type="checkbox"/> Fund Raiser | Purpose: <u>Expense Reimbursement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/11/14</u> Date | <u>\$ 213.56</u> Memo Itemization Below |
| Expenditure #5 Name Meijer Address 40445 S. Groesbeck Hwy. Clinton Twp., MI 48036 <input type="checkbox"/> Fund Raiser | Purpose: <u>Primary Election Party Food & drinks</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/05/14</u> Date | <u>\$ -133.30</u> (Memo Itemization) |

| | |
|--|-----------------|
| Subtotal this page | \$732.03 |
| Grand Total of all Schedules 1B (Complete on last page of Schedule) | |

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|--|-------------------------|--------------------|
| Expenditure #1 Name Jets Pizza Address 39101 Garfield Rd. Clinton Twp., Mi 48038 <input type="checkbox"/> Fund Raiser | Purpose: <u>Primary Election party Meeting Food</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>06/30/14</u> Date | \$ <u>-38.98</u> |
| Expenditure #2 Name Jets Pizza Address 39101 Garfield Rd. Clinton Twp., Mi 48038 <input type="checkbox"/> Fund Raiser | Purpose: <u>Primary Election Party Food & drinks</u> (Memo Itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/05/14</u> Date | \$ <u>-41.28</u> |
| Expenditure #3 Name C.J. Barrymores Address 21750 Hail Road Clinton Twp., MI 48038-1541 <input checked="" type="checkbox"/> Fund Raiser | Purpose: <u>Summer Kick Off Party</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/12/14</u> Date | \$ <u>600.00</u> |
| Expenditure #4 Name Fraser First Booster Club, Inc. Address 33079 Garfield Rd. PMB #120 Fraser, MI 48026 <input type="checkbox"/> Fund Raiser | Purpose: <u>It's 5 O'Clock Somewhere Event</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/12/14</u> Date | \$ <u>100.00</u> |
| Expenditure #5 Name C & G Newspapers Address 13650 11 Mile Road Warren, MI 48089 <input type="checkbox"/> Fund Raiser | Purpose: <u>Ads in C & G Newspaper</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/29/14</u> Date | \$ <u>2,975.00</u> |

| | |
|--|------------|
| Subtotal this page | \$3,675.00 |
| Grand Total of all Schedules 1B (Complete on last page of Schedule) | |
| Enter this total on line 8a of Summary Page | |



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|--|-------------------------|--------------------|
| Expenditure #1 Name UHY Advisors, Inc. Address 12900 Hall Road, Suite 500 Sterling Heights, MI 48313 <input type="checkbox"/> Fund Raiser | Purpose: <u>Accounting services</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/31/14</u> Date | \$ <u>1,865.00</u> |
| Expenditure #2 Name Spider Control, Inc. Address P.O. Box 370 Mt. Clemens, MI 48046 <input type="checkbox"/> Fund Raiser | Purpose: <u>Spray for spiders, etc. at campaign office</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/25/14</u> Date | \$ <u>185.00</u> |
| Expenditure #3 Name Comcast Address P.O. Box 3005 Southeastern PA 19398-3005 <input type="checkbox"/> Fund Raiser | Purpose: <u>Cable, phone, internet</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/31/14</u> Date | \$ <u>461.48</u> |
| Expenditure #4 Name Verizon Wireless Address P.O. Box 553 Warrendale, PA 15086 <input type="checkbox"/> Fund Raiser | Purpose: <u>Candidate cell phone 6/19/14-7/18/14</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/31/14</u> Date | \$ <u>137.57</u> |
| Expenditure #5 Name American Graphics Printing Address 34895 Groesbeck Clinton Twp., MI 48035 <input type="checkbox"/> Fund Raiser | Purpose: <u>Letterhead, New Logo Setup</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/15/14</u> Date | \$ <u>74.31</u> |
| Subtotal this page | | | \$ 2,723.36 |
| Grand Total of all Schedules 1B (Complete on last page of Schedule) | | | |

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|--|-------------------------|---|
| Expenditure #1 Name Caravan 261 Address 2574 Wexford Troy, MI 48084 <input type="checkbox"/> Fund Raiser | Purpose: <u>Member Dues 2013-2014</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/15/14</u> Date | <u>\$ 104.00</u> Click Here for Memo Itemization Type |
| Expenditure #2 Name Leukemia & Lymphoma Society Address C/O 1 South Main Street Mt. Clemens, MI 48043 <input type="checkbox"/> Fund Raiser | Purpose: <u>Hole Sponsor for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/19/14</u> Date | <u>\$ 100.00</u> Click Here for Memo Itemization Type |
| Expenditure #3 Name Michigan Democratic Party Address 606 Townsend Lansing, MI 48933 <input type="checkbox"/> Fund Raiser | Purpose: <u>Democratic Party Membership</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/24/14</u> Date | <u>\$ 125.00</u> Click Here for Memo Itemization Type |
| Expenditure #4 Name Sawicki & Son Address 1521 W. Lafayette Detroit, MI 48216 <input type="checkbox"/> Fund Raiser | Purpose: <u>Yard signs & stickers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/31/14</u> Date | <u>\$ 1892.10</u> Click Here for Memo Itemization Type |
| Expenditure #5 Name Bankcard Merchant Fees Address 1750 Old Meadow Rd., Ste. 300 Mclean, VA 22102-4304 <input type="checkbox"/> Fund Raiser | Purpose: <u>Merchant fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/04/14</u> Date | <u>\$ 25.11</u> Click Here for Memo Itemization Type |

Subtotal this page **\$2,246.21**

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|-------------------------|--|
| Expenditure #1 Name Frank Taylor Group, Inc. Address 55618 Stewart Dr. Macomb MI 48042 <input type="checkbox"/> Fund Raiser | Purpose: <u>Managing Campaign office 8/1/14-8/29/14</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/14/14</u> Date | <u>\$ 1,000.00</u> Click Here for Memo Itemization Type |
| Expenditure #2 Name Frank Taylor Group, Inc. Address 55618 Stewart Dr. Macomb MI 48042 <input type="checkbox"/> Fund Raiser | Purpose: <u>Managing Campaign office 7/1/14-7/30/14</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/12/14</u> Date | <u>\$ 1,000.00</u> Click Here for Memo Itemization Type |
| Expenditure #3 Name Cynthia Schroeder Address 26665 Christy Dr. Chesterfield, MI 48051 <input type="checkbox"/> Fund Raiser | Purpose: <u>Administrative Work 5/5/14-7/15/14</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/13/14</u> Date | <u>\$ 210.00</u> Click Here for Memo Itemization Type |
| Expenditure #4 Name 2002 Oakland Junior Grizzlies Address 54077 Mound Road Shelby Twp., MI 48316 <input type="checkbox"/> Fund Raiser | Purpose: <u>Golf Outing - Family Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/13/14</u> Date | <u>\$ 250.00</u> Click Here for Memo Itemization Type |
| Expenditure #5 Name Wigs 4 Kids Address 30126 Harper Avenue St. Clair Shores, MI 48082 <input type="checkbox"/> Fund Raiser | Purpose: <u>Gala tickets 101-110</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>08/13/14</u> Date | <u>\$ 900.00</u> Click Here for Memo Itemization Type |

Subtotal this page **\$3,360.00**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **013853-3**
2. Committee Name **Mark Hackel for County Executive**

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|-------------------------|-----------------|
| Expenditure #1 Name Constant Contact Address Online Application <input type="checkbox"/> Fund Raiser | Purpose: Email marketing <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 08/20/14 Date | \$ 35.00 |
| Expenditure #2 Name Address <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |

Subtotal this page

\$35.00

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

\$17,707.30

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3
2. Committee Name Mark Hackel for County Executive

- USE A SEPARATE SHEET FOR EACH EVENT -

| | | | |
|---|--|---|---|
| 3. Date Event Was Held <u>07/29/14</u> | 4. Number of Individuals Attending or Participating (whichever is greater) <u>222</u> | 5. Type of Fund Raising Activity <u>Dinner</u> | 6. Address and Name (If any) of the place where the activity was held. C.J. Barrymores 21750 Hall Road Clinton Twp., MI 48038 <input type="checkbox"/> Private Residence |
|---|--|---|---|

7. Total Contributions \$9,275.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$9,275.00

10. Total Cost of Event \$600.00

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

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

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

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.