



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: 10/21/2017 to 12/31/2017

1. Committee I.D. Number
013853-3

2. Committee Name
Mark Hackel for County Executive

4. Candidate Last Name **Hackel** First Name **Mark** M.I. **A.**

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 586-254-1040
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 586-206-8110

7. Treasurer's Business Address
**12900 Hall Rd.
Suite 500
Sterling Heights, MI 48313**

Area Code and Phone 586-254-1040

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

Area Code and Phone _____

9. TYPE OF STATEMENT

9a. ☐ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Required ONLY if candidate is not on the ballot for the current year:

☐ July Quarterly
☐ October Quarterly

9c. ☒ Annual Statement (2017) Coverage Year

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

9e. Dissolution of Candidate Committee

☐ 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.

Date of Election, Convention or Caucus _____

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

Harold J. Burns Date 1/30/18
Signature

Candidate Mark A. Hackel
Type or Print Name

Mark A. Hackel Date 1/30/18
Signature



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>100.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>100.00</u>	(18.) \$ <u>257,966.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>792.06</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>100.00</u>	(20.) \$ <u>258,758.06</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0.00</u>	(21.) \$ <u>0.00</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>6,249.83</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>6,249.83</u>	(23.) \$ <u>251,270.44</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>53,014.40</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>100.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>53,114.40</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>6,249.83</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>46,864.57</u>	*



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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>10/27/17</u> Name & Address: Grace M. Shore 17305 Averhill Blvd. Macomb, MI 48042-4138		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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 #2 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	
3. Contribution # 3 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	
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 **\$100.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **\$100.00**

Enter this total on
line 3a 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 Catalyst Services, LLC Address 253 McMillan Grosse Pointe Farms, MI 48236 <input type="checkbox"/> Fund Raiser	Purpose: <u>November Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/31/2017</u> Date	<u>\$ 700.00</u>
Expenditure #2 Name Verizon Wireless Address P.O. Box 553 Warrendale, PA 15086 <input type="checkbox"/> Fund Raiser	Purpose: <u>Candidate Cell Phone 9/19-10/18/2017</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2/2017</u> Date	<u>\$ 386.83</u>
Expenditure #3 Name Frank Taylor Group, Inc. Address 55618 Stewart Dr. Macomb MI 48042 <input type="checkbox"/> Fund Raiser	Purpose: <u>Managing Campaign Office (Oct.)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2/2017</u> Date	<u>\$ 2,000.00</u>
Expenditure #4 Name Comcast Address P.O. Box 3005 Southeastern PA 19398-3005 <input type="checkbox"/> Fund Raiser	Purpose: <u>Phone, internet, cable</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/10/2017</u> Date	<u>\$ 254.63</u>
Expenditure #5 Name Constant Contact Address Online Application <input type="checkbox"/> Fund Raiser	Purpose: <u>Email marketing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/13/2017</u> Date	<u>\$ 65.00</u>
Subtotal this page			3,406.46
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 <u>Verizon Wireless</u> Address <u>P.O. Box 553</u> <u>Warrendale, PA 15086</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Candidate Cell Phone 10/19-11/18/2017</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/1/2017</u> Date	<u>\$ 338.71</u>
Expenditure #2 Name <u>UHY Advisors MI, Inc.</u> Address <u>12900 Hall Road, Ste. 500</u> <u>Sterling Heights, MI 48313</u> <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>12/7/2017</u> Date	<u>\$ 2,185.00</u>
Expenditure #3 Name <u>Comcast</u> Address <u>P.O. Box 3005</u> <u>Southeastern PA 19398-3005</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Phone, internet, cable</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/11/2017</u> Date	<u>\$ 254.66</u>
Expenditure #4 Name <u>Constant Contact</u> Address <u>Online Application</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Email marketing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/11/2017</u> Date	<u>\$ 65.00</u>
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 2,843.37

Grand Total of all Schedules 1B
(Complete on last page of Schedule) \$6,249.83

Enter this total
on line 8a of
Summary Page