

CAMPAIGN FINANCE NOTICE OF ERROR OR OMISSION

MACOMB COUNTY			
	ID#_	139637	_
LISA SINCLAIR 4 CLERK 46958 N. GRATIOT #262 CHESTERFIELD TWP., MI 48051	Date .	09/14/2018	_
Please be advised that one or more apparent errors or omissions were statement filed by your committee:	e found	I in a review of the	following
Post-Primary - 08/07/18 Election			
Statement			
A description of the apparent error(s) or omission(s) is attached. Pleas necessary corrections in an amendment to the above Statement. The athis office no later than September 28, 2018. (See office address listed below.)		w the description and nent to the Statement	
If we do not receive a response to this notice by the above due date, MC the matter to the Prosecuting Attorney.	L 169.2	216(8) requires this of	fice to refe
If you have questions, contact us immediately.			
Sincerely,			
Lotty Sith			

KATHY SMITH
MACOMB COUNTY CLERK / REGISTER OF DEEDS
32 MARKET STREET
MT. CLEMENS, MI 48043

Cover Page:

The Candidate must sign the bottom of the Cover Page; copy enclosed for your convenience.

Summary Page:

It appears Line 12a should report \$14,088.77 instead of \$13,302.77. (Sched 1E of your Pre-Prim listed \$786.00 owed to the candidate that has not been reported as either repaid or forgiven. If still outstanding, it must continue to appear on Sched 1E and be included in the amount on Line 12a). Please clarify.

Please amend your statement accordingly and forward to us by September 28, 2018.

WHEN FILING AN AMENDED CAMPAIGN STATEMENT, PLEASE INCLUDE A <u>COMPLETED COVER PAGE</u>, INDICATING THAT THE CAMPAIGN STATEMENT IS BEING AMENDED, WITH APPROPRIATE SIGNATURE(S). ONLY THOSE PAGES BEING AMENDED NEED TO BE SUBMITTED WITH THE COVER PAGE.

AMENDMENTS MAY BE FAXED TO US AT (586) 469-6927. IMPORTANT: CALL (586) 469-5209 TO CONFIRM RECEIPT OF FAX.