

## CAMPAIGN FINANCE NOTICE OF ERROR OR OMISSION

## MACOMB COUNTY

ID#	140076
Date	03/31/2021

CTE CHARLES JEFFERSON MAYOR OF STERLING HEIGHTS 13286 WESTMINISTER STERLING HEIGHTS, MI 48313

Please be advised that one or more apparent errors or omissions were found in a review of the following statement filed by your committee:

Statement of Organization (Amended)
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A description of the apparent error(s) or omission(s) is attached. Please review the description and make the necessary corrections in an amendment to the above Statement. The amendment to the Statement is due in this office no later than April 14, 2021. (See office address listed below.)

If we do not receive a response to this notice by the above due date, MCL 169.216(8) requires this office to refer the matter to the Prosecuting Attorney.

If you have questions, contact us immediately.

Sincerely,

ANTHONY G. FORLINI

MACOMB COUNTY CLERK / REGISTER OF DEEDS

32 MARKET STREET

MT. CLEMENS, MI 48043

## **Errors / Omissions:**

You have provided a formation date of 3/4/2021, but your committee's formation date should be no later than 2/13/2021, based on the date you became a candidate (2/3/21). Per MCL 169.221(1) of the Michigan Campaign Finance Act (copy enclosed) a candidate, within 10 days of becoming a candidate, shall form a candidate committee.

Please provide a complete address for both the Treasurer and Record Keeper.

A blank Statement of Organization form is enclosed that may be used to amend the formation date and provide Treasurer and Record Keeper addresses; simply complete the highlighted items and return it by the due date below.

Please amend your statement accordingly and forward to us by April 14, 2021.

WHEN FILING AN AMENDED CAMPAIGN STATEMENT, PLEASE INCLUDE A <u>COMPLETED COVER</u>
<u>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.