



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: 4-2-21 to 7-18-21

1. Committee I.D. Number

140085

2. Committee Name

Committee to Elect
DAVID J. RUBELLO

5. Committee's Mailing Address

3000 7 MAISON
ST. CLAIR STONES

Area Code and Phone

48082 586 489-8117
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.

4. Candidate Last Name

First Name

M.I.

Rubello DAVID J.
4a. Office Sought Including District # or Community Served (If applicable)
City Council ST. CLAIR STONES

4b. County of Residence

6. Treasurer's Name & Residential Address

Same

Area Code & Phone

7. Treasurer's Business Address

SAME

Area Code and Phone

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

SAME

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

Date of Election, Convention or Caucus

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

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement (_____) 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 hereby 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 DAVID J. RUBELLO

Type or Print Name

Signature

Date

7-23/21

Candidate

DAVID J. RUBELLO

Type or Print Name

Signature

Date

7-23/21



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140085

2. Committee Name Committee to elect DAVID R. RUBIO

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ \$770

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ \$770

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$ \$770

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$ 2221.00

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 2221.00

b. Owed to the Committee (Schedule 1E)

(12b.) \$

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)

(13.) \$

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$ 770

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ \$770

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$

17. ENDING BALANCE

(Subtract line 16 from line 15)

(17.) \$ \$770 *

Column I
This Period

Column II
Cumulative this election cycle

(18.) \$

(19.) \$

(20.) \$

(21.) \$

(22.) \$

(23.) \$

(24.) \$



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

140085

2. Committee Name

Committee to Elect David J. Rubello

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 all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1

PAC Receipt? ☐ YES

4. Date of Receipt

5-27-21

Name & Address:

GINA CARPINEAU
50238 JIM DRIVE CHESTERFIELD MI 48047

\$ 500

\$

5. If over \$100.00 cumulative, please provide:

Occupation

HAIR SELF Employed

Employer

Business Address

25835 JEFFERSON

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

6-28-21

Name & Address

MARK McFITT
21213 TANGLEWOOD
SCS MI 48082

\$ 200

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Home IMP SELF Employed

Employer

Business Address

21213 Tanglewood

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt

6-15-21

Name & Address:

MIKE Boyle
22441 COURTVILLE SCS 48081

\$ 20

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt

6-21-21

Name & Address

PHIL Thomas
22308 YALE
SCS 48081

\$ 50

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

\$770

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 140085
2. Committee Name Committee to Elect David Rubello

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: ~~DAVID RUBELLO~~ <u>DAVID Rubello</u> If over \$100.00 cumulative, please provide: Occupation: <u>SALESPERSON</u> Employer Name & Business Address: <u>C&G NEWSPAPERS</u> <u>13650 11 mile Rd</u> <u>WARREN, MI 48089</u> ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☒ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description: <u>Signs</u> 5. Date Of Receipt: <u>7/12/21</u> 6. Vendor Name & Address: <u>SAWICKI & SONS</u> <u>1521 W. LAFAYETTE DR</u> <u>DET, MI 48216</u>	\$ <u>1150¹⁰</u>	
Contribution #2 Name & Address: <u>SAME AS ABOVE</u> If over \$100.00 cumulative, please provide: Occupation: <u>SALES</u> Employer Name & Address: <u>C&G NEWSPAPERS</u> <u>13650 11 mile RD</u> <u>WARREN, MI 48089</u> ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description: <u>AD</u> 5. Date Of Receipt: <u>6-29-21</u> 6. Vendor Name & Address: <u>C&G NEWSPAPERS</u> <u>13650 11 mile RD</u> <u>WARREN, MI 48089</u>	\$ <u>613.80</u>	
Contribution #3 Name & Address: <u>SAME</u> If over \$100.00 cumulative, please provide: Occupation: <u>SAME</u> Employer Name & Address: <u>SAME</u> ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description: <u>AD</u> 5. Date Of Receipt: <u>7.14.21</u> 6. Vendor Name & Address: <u>C&G NEWSPAPERS</u> <u>13650 11 mile Rd</u> <u>WARREN, MI 48089</u>	\$ <u>457.10</u>	

Page Subtotal

2221 00 00

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

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

140085

2. Committee Name

Committee to Elect David J. Rubel

This Schedule itemizes:

- a. ☐ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.

Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.

4. Type of Obligation (Description)

5. Indicate date debt was incurred

6. Indicate original amount of debt

7. Date and amount of each payment

8. Cumulative payment to date on debt

9. Outstanding Balance at close of this period (Item 6 minus Item 8)

Debt #1 Corp? ☐ Yes
Owed to or by:

DAVID J. Rubel

4. Type: SIGNS

5. Date Debt Was Incurred:

7-12-21

6. Original Amount of Debt:

\$ 1150.10

\$

\$

\$

\$

\$

\$

\$ 1150.10

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #2 Corp? ☐ Yes
Owed to or by:

DAVID J. Rubel

4. Type: AD

5. Date Debt Was Incurred:

6-29-21

6. Original Amount of Debt:

\$ 613.80

\$

\$

\$

\$

\$

\$

\$ 613.80

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #3 Corp? ☐ Yes
Owed to or by:

DAVID J. Rubel

4. Type: AD

5. Date Debt Was Incurred:

7/14/21

6. Original Amount of Debt:

\$ 457.10

\$

\$

\$

\$

\$

\$

\$ 457.10

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Page Subtotal (Outstanding debt)

2221.00

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page