

## FILED 2021 SEP 16 PM12:56 MACOMB COUNTY CLERK

## COVER PAGE

#### FOR OFFICIAL USE ONLY

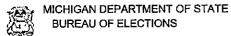
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by	3. This Statement covers From	07/40/04	0000004	· · · · · · · · · · · · · · · ·	
	andidate.	<u> </u>		to 08/23/21	M.I.	
1. Committee I.D. Number		4. Candidate Last Name Cleary	Russe	•	A	
140089		4a. Office Sought Including Dis				
2. Committee Name		Sterling Heights City Council				
Committee to Elect Russell Cleary		4b. County of Residence: WACOMB				
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address			
O Box 7023 Sterling Heights, MI, 48311		Russell Cleary 14242 Wedgewood Road				
Sterning Heighto, Mil, 40077		Sterling Heights, MI, 48312				
(E96\:719 8143						
Area Code and Phone (586) 718-8143 If the address in this box is different from the commit	itee					
mailing address on the Statement of Organization, robe sent to this address by the filing official.	nail may	Area Code & Phone (586) 7	18-8143			
7. Treasurer's Business Address		Designated Record Keeper     Designated Record Keeper)	s Name and Add	ress (if the committee has	a	
NA		NA				
Area Code and Phone (586) 718-8143		 				
	<del></del>	Area Code and Phone	9e. Dissolution	n of Candidate Committe		
9. TYPE OF STATEMENT 9a. Pre-Election OR 9b X Post-Election		VLY if candidate ballot for the	Bu charting	g this item I/We certify any	outstanding debt	
- <del></del>	current year		by the committee	e to the candidate or his on and forgiven, and no longer	r her spouse is here	
Pre-Election or Post-Election Statement relates to:	July Quan	erly	the committee.	The committee has no ou	standing assets,	
Primary			owes no lates te	es or has any oustanding	G <del>o</del> be.	
General	October C	luarterly.	Further, if the dis	ssolution cannot be grante quest for the Reporting Wa	d, that this be	
Convention			Considered a rec	forest for are trebound the	4401	
Special	9c. Annu	al Statement ()	Effort	ive date of dissolution		
School		Coverage Year	Elicu	ive date or dissolution		
Caucus		dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to				
		te which Statement is being	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
	anten	ueu./				
Date of Election, Convention or Caucus	1.					
08/03/21	:					
•					y	
10. Verification: NWe certify that all reasonable dilig	ence was used	in the preparation of this statem	ent and attached	schedules (if any) and to	the best of	
mylour knowledge and belief the contents are true.		ompiete.	DAN	7 / P		
Current Treasurer or Pussell Clear Russell Clear	У	Musel H	P(N)	Date 09/1	6/21	
Type or Print Name		Signature		22		
Russell Cleary		Sould X	400	09/1	6/21	
Candidate	<del></del>	Signature	V. C. C.	Date		
Authority granted under P.A. 388 of 1976	<u> </u>	Oig. Marie				
					•	

1. Committee I.D. Number 140089

#### **SUMMARY PAGE CANDIDATE COMMITTEE**

# 2. Committee Name Committee to Elect Russell Cleary

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 436.10	
b, Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	,
c. Subtotal of "Contributions"	(3c.) \$ \$436.10	(18.) \$ \$436.10
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$436.10	(20.) \$ \$436.10
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$93.16	(21.) \$ \$93.16
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7:) \$ _\$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$947.02	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$5.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$952.02	(23.) \$ \$952.02
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ \$568.00	
14. Amount received during reporting period	(14.)+ \$ \$436.10	_
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$1,004.01	
16. Amount expended during reporting period (Add lines 9 and 1.1)	(16.) - \$ \$952.02	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$52.08	•
(Substitute to note into to)	\ \ \	-



### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

**CANDIDATE COMMITTEE** 

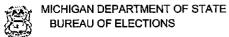
1. Committee I.D. Number \_

140089

line 3a of Summary Page.

2. Committee Name Committee to Elect Russell Cleary

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? Name & Address: Raymond Cleary 14242 Wedgewood Rd Sterling Heights, MI 48312	YES 4. Date of Receip	08/02/21	<sub>\$</sub> 95.70	<sub>\$</sub> 95.70
5. If over \$100.00 cumulative, please provi	de:		Click Here fo	r Memo Itemization
Occupation	Employer	*	<b>3</b> ,3,1,1,5,5,5,1,5	
Business Address				
Type of Contribution: Unirect	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receipt	08/06/21		·
Andrew Naumann 4912 E Indianola Phoenix, AZ 85018			§47.70_	<u>\$47.70</u>
5. If over \$100.00 cumulative, please provi	de:		Click Here for	Memo Itemization
Occupation E	Employer	- <del></del>		
Business Address		<del> </del>		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? [ Name & Address: Pete MacKool 39761 Crystal Dr Sterling Heights, MI 48310	YES 4. Date of Receip	ot <u>08/10/21</u>	<sub>\$</sub> 47.70	<sub>\$</sub> 47.70
5. If over \$100.00 cumulative, please provide	de:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? [ Name & Address  Karen Lawson  5521 Livernois Rd  Troy, MI 48098	YES 4. Date of Recei	pt <u>08/11/21</u>	<sub>\$</sub> 200	<sub>\$_</sub> 200
5. If over \$100.00 cumulative, please provi	ide:		Click Horo for	Mama Itamization
Occupation Dentistry	Employer Legacy Del		Click Here lor	Memo Itemization
Business Address 2425 E. Lincoln S	St, Birmingham, MI 48	8009		
Type of Contribution: Direct	Loan from a person	Fund Raiser	<del>,</del> '	·
		and Total of All Schedules 1A	\$391.10 \$436.10	-
	(Compl	ete on last page of Schedule)	Enter this total on	<b>⊣</b>



#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_140089

2. Committee Name Committee to Elect Russell Cleary

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 Name & Address: Michelle Smith 11461 Peyton Sterling Height	Dr	YES 4. Date of	of Recei	pt 08/20/21	<sub>\$</sub> 45	<sub>s</sub> 45
5. If over \$100.00 cu	mulative, please pr	ovide:			Click Horo fo	Nome Itemization
Occupation		Employer			Click Hele it	or Memo Itemization
Buşiness Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	of Recei	pt		
					\$	\$
5. If over \$100.00 cu	mulative, please pro	ovide:			Click Here fo	r Memo Itemization
Occupation	<u> </u>	_ Employer	_	<del></del>		
Business Address		<u></u>				
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Rece	ipt		·
					\$	\$
5. If over \$100.00 cu	mulative, please pro	ovide:			Click Here for	r Memo Itemization 🔽
Occupation		Employer				
Business Address		<del></del> .		<u></u>		
Type of Contribution:		Loan from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	of Rec	eipt		
					\$	\$
5. If over \$100.00 cu	mulative, please pr	ovide:			Click Here for	r Memo Itemization 🗐
Occupation		Employer	-			
Business Address			_			,
Type of Contribution	n: Direct	Loan from a person		Fund Raiser		·
				Page Subtotal	\$45.00	
				rand Total of All Schedules 1A	\$436.10	
			Comp	olete on last page of Schedule)	Enter this total on	<b>→</b>

 $_{\text{Page}}\underline{2}_{\text{of}}\underline{2}_{\text{}}$ 

line 3a of Summary Page.



### **ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK**

1. Committee I. D. Number <u>14</u>0089

#### CANDIDATE COMMITTEE

2. Committee to Elect Russell Cleary

CANDIDA IL COMM			
<ol> <li>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). Reportall in-kind contributions.</li> </ol>	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 PAC Receipt? Yes Name & Address: Russeli Cleary 14242 Wedgewood Rd Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Business Cards  5. Date Of Receipt: 08/22/21  6. Vendor Name & Address:		93.16
Fund Raiser Contribution	VistaPrint C 170 Data Dr Waltham, MA 02451	lick Here for Memo Ite	emization
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others  Services Purchased by Candidate or Others	\$	-
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN  Description  5. Date Of Receipt:  6. Vendor Name & Address:	ick Here for Merno Ito	emization 👻
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address:	4.		
if over \$100.00 cumulative, please provide:  Occupation:  Employer Name & Address:	Description  5. Date Of Receipt:  6. Vendor Name & Address:	lick Here for Memo It	emization 🔽
Fund Raiser Contribution		<b>T</b>	
	Page Subtot	\$93.16	\$93.16
	Grand Total of all Schedules 1- (Complete on last page of Schedul		

Enter this total on line 6 of Summary Page

Page 1 of 1



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

140089 1. Committee I. D. Number

2 Committee Name Committee to Elect Russell Cleary

2, 0	ommittee wante		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Got Print	,	08/09/21	s 440.79
<b>30</b> 00 1 11110	Pack Cards	 Date	\$ <del>440.73</del>
Address	Purpose: Rack Cards	Daig	
7651 N. San Fernando Rd	Click F	lere for Memo	Itemization Type
Burbank, CA 91505			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2		•	
Name Campaign Catalyst		08/11/21	. 500 00
Gampaigh Galaryot		——————————————————————————————————————	\$ <u>506.23</u>
Address	Purpose: Business Signs	Date	
5171 Blackbeak Drive			
Saginaw, MI 48604	Click F	lere for Memo	Itemization Type
g,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
<del></del>	statement		
Expenditure #3			
Name			
		———	\$
Address	Purpose:	Date	·
	Click H	ere for Memo I	temization Type
		ete tot Mettio	termzation Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			
			\$
Address	Durpage	Date	· ——
	Purpose:		
	Click H	ere for Memo !	temization Type
	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
			\$
Address	Purpose:	Date	· ——
	OR-L-1	lara for Maw-	Itomization Trac
	Click Here for Memo Itemization Type  Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	\$947.02
·	Grand Total of all S	Chedules 18	
·	(Complete on last page		\$947.02

Enter this total on line 8a of Summary Page