



Michigan Department of State
Bureau of Elections

**CAMPAIGN FINANCE
NOTICE OF ERROR OR OMISSION**

MACOMB COUNTY

ID # 140089

Date 12/06/2021

CTE RUSSELL CLEARY
P O BOX 7023
STERLING HEIGHTS, MI 48311

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

Post-General - 11/02/21 Election

Statement

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 December 20, 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**

Summary Page:

The Beginning and Ending balances reported on this statement cannot be verified until your 2021 Pre General amendment in response to our Notice of Error or Omission dated 11/29/21 has been filed with our office. Please respond to it by the due date below.

Schedule 1A - Itemized Contributions:

Based on the Type of Contribution checked for Contribution #3 - Russell Cleary, it appears a fundraiser took place. Schedule 1F is required to be filed with your statement detailing that event. If a fundraiser was not held, the Type of Contribution should be something other than 'Fund Raiser'. Please clarify.

Please amend your statement accordingly and forward to us by December 20, 2021.

WHEN FILING AN AMENDED CAMPAIGN STATEMENT, PLEASE INCLUDE A COMPLETED COVER PAGE, 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.*