



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

FILED 2022 OCT 26 PM 1:39  
MACOMB COUNTY CLERK

**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.

|                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3. This Statement covers From:</b> <u>07/21/2022</u> to <u>10/23/2022</u>                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>1. Committee I.D. Number</b><br><b>140216</b>                                                                                                                                                                                                                                                                                         | <b>4. Candidate Last Name</b> <u>Fitzpatrick</u> <b>First Name</b> <u>Machelle</u> <b>M.I.</b> <u>M</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>2. Committee Name</b><br><br>CTE Machelle Fitzpatrick Utica Community Schools School Board                                                                                                                                                                                                                                            | <b>4a. Office Sought Including District # or Community Served (If applicable)</b><br><b>Board Member - Local</b> <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>5. Committee's Mailing Address</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br><br>Area Code and Phone <u>(586) 212-5653</u><br>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.   | <b>4b. County of Residence</b> <b>MACOMB</b> <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>6. Treasurer's Name &amp; Residential Address</b><br><b>Machelle Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br><br>Area Code & Phone <u>(586) 212-5653</u>                                                                                                                                | <b>7. Treasurer's Business Address</b><br><b>Machelle Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br><br>Area Code and Phone <u>(586) 212-5653</u>                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</b><br><b>Machelle Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br><br>Area Code and Phone <u>(586) 212-5653</u>                                                                           | <b>9. TYPE OF STATEMENT</b><br><b>9a.</b> <input checked="" type="checkbox"/> Pre-Election <b>OR</b> <b>9b.</b> <input type="checkbox"/> Post-Election<br><br>Pre-Election or Post-Election Statement relates to:<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Convention<br><input type="checkbox"/> Special<br><input type="checkbox"/> School<br><input type="checkbox"/> Caucus<br><br>Date of Election, Convention or Caucus<br><u>11/08/2022</u>                                                                                                       |
| <b>9c.</b> <input type="checkbox"/> July Quarterly<br><input type="checkbox"/> October Quarterly<br><br><b>9c.</b> <input type="checkbox"/> Annual Statement ( ) Coverage Year<br><br><b>9d.</b> <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) | <b>9e. Dissolution of Candidate Committee</b><br><input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by 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.<br><br>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.<br><br>Effective date of dissolution<br><br>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. |
| <b>10. Verification:</b> 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.                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Current Treasurer or Designated Record keeper</b> <u>Machelle Fitzpatrick</u><br>Type or Print Name                                                                                                                                                                                                                                   | <u>Machelle Fitzpatrick</u> <u>10/26/2022</u><br>Signature Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Candidate</b> <u>Machelle Fitzpatrick</u><br>Type or Print Name                                                                                                                                                                                                                                                                       | <u>Machelle Fitzpatrick</u> <u>10/26/2022</u><br>Signature Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 140216

2. Committee Name CTE Machele Fitzpatrick Utica Community Schools School Board

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

| RECEIPTS                                                                                        | Column I<br>This Period        | Column II<br>Cumulative this election cycle |
|-------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------|
| 3. Contributions                                                                                |                                |                                             |
| a. Itemized (Schedule 1A - Column 6)                                                            | (3a.) \$ <u>160.00</u>         |                                             |
| b. Unitemized (less than \$20.01 each - no Schedule)                                            | (3b.) \$ <u>NOT APPLICABLE</u> |                                             |
| c. Subtotal of "Contributions"                                                                  | (3c.) \$ <u>\$160.00</u>       | (18.) \$ _____                              |
| 4. Other Receipts (Schedule 1A -1, Column 6)                                                    | (4.) \$ <u>\$0.00</u>          | (19.) \$ _____                              |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS<br>(Add Line 3c + Line 4)                             | (5.) \$ <u>\$160.00</u>        | (20.) \$ _____                              |
| <b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>                                                 |                                |                                             |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7)                                              | (6.) \$ <u>\$983.56</u>        | (21.) \$ _____                              |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6)                                              | (7.) \$ <u>\$0.00</u>          | (22.) \$ _____                              |
| <b>EXPENDITURES</b>                                                                             |                                |                                             |
| 8. Expenditures                                                                                 |                                |                                             |
| a. Itemized (Schedule 1B, Column 6)                                                             | (8a.) \$ <u>\$0.00</u>         |                                             |
| 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.) \$ <u>\$0.00</u>          | (23.) \$ _____                              |
| <b>INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(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<br>(Add Line 10a + Line 10b)                         | (11.) \$ _____                 | (24.) \$ _____                              |
| <b>DEBTS AND OBLIGATIONS</b>                                                                    |                                |                                             |
| 12. Debts and Obligations                                                                       |                                |                                             |
| a. Owed by the Committee (Schedule 1E)                                                          | (12a.) \$ _____                |                                             |
| b. Owed to the Committee (Schedule 1E)                                                          | (12b.) \$ _____                |                                             |
| <b>BALANCE STATEMENT</b>                                                                        |                                |                                             |
| 13. Ending Balance of last report filed<br>(Enter zero if no previous reports have been filed.) | (13.) \$ <u>\$0.00</u>         |                                             |
| 14. Amount received during reporting period<br>(Line 5, Total Contributions & Other Receipts)   | (14.) + \$ <u>\$160.00</u>     |                                             |
| 15. SUBTOTAL Add lines 13 and 14                                                                | (15.) = \$ <u>\$160.00</u>     |                                             |
| 16. Amount expended during reporting period<br>(Add lines 9 and 11)                             | (16.) - \$ <u>\$0.00</u>       |                                             |
| 17. ENDING BALANCE<br>(Subtract line 16 from line 15)                                           | (17.) \$ <u>\$160.00</u>       |                                             |



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 140216  
2. Committee Name CTE Machele Fitzpatrick Utice Community Schools School Board

| 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 <u>all</u> contributions regardless of amount.                                                                                                                                                                                                                        | 6. Amount        | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------|
| 3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/14/2022</u><br>Name & Address:<br><b>Charles Stemple</b><br><b>50191 Cedargrove</b><br><b>Shelby Township, MI 48317</b><br><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser            | \$ <u>100.00</u> | <a href="#">Click Here for Memo Itemization</a>                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/03/2022</u><br>Name & Address:<br><b>Matthew Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | \$ <u>10.00</u>  | <a href="#">Click Here for Memo Itemization</a>                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/03/2022</u><br>Name & Address:<br><b>Kristen Carson</b><br><b>39351 Lakeshore Drive</b><br><b>Harrison Township, MI 48045</b><br><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser      | \$ <u>50.00</u>  | <a href="#">Click Here for Memo Itemization</a>                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____<br>Name & Address:<br><br><br><br>5. If over \$100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                         | \$ _____         | <a href="#">Click Here for Memo Itemization</a>                                 |

Page Subtotal \$160.00

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

\$160.00

Enter this total on  
line 3a of Summary  
Page.



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 140216

2. Committee Name CTE Machelle Fitzpatrick Utica Community Schools School Board

### CANDIDATE COMMITTEE

| 3. Name and Address from whom received<br>If contribution is from an individual, enter last<br>name first. Check box to indicate if contribution<br>is from a Political Committee or an Independent<br>Committee (Both are commonly called PACs).<br>Report <u>all</u> in-kind contributions.                                                           | 4. Type of In-Kind Contribution (Check applicable box)<br>5. Date of Receipt<br>6. Name & Address of Vendor from whom goods or services were<br>purchased                                                                                                                                                                                                                                                                                                                                                                                                                       | 7. Amount or<br>Fair Market<br>Value | 8. Cumulative<br>for Election<br>Cycle (Through<br>date in Item 5) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------|
| Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes<br>Name & Address:<br><b>Say it with Swag</b><br><b>16282 Sassafras Lane</b><br><b>Macomb, MI 48044</b><br>If over \$100.00 cumulative, please provide:<br>Occupation:<br>Employer Name & Business Address:                                                                             | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description <u>T-Shirts</u><br>5. Date Of Receipt: <u>09/23/2022</u><br>6. Vendor Name & Address:<br><b>Say it with Swag</b><br><b>16282 Sassafras Lane</b><br><b>Macomb, MI 48044</b>                                        | \$ <u>90.00</u> \$                   | <input type="button" value="Click for Memo Itemization Type"/>     |
| <input type="checkbox"/> Fund Raiser Contribution                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                    |
| Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes<br>Name & Address:<br><b>John Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br>If over \$100.00 cumulative, please provide:<br>Occupation: <b>Engineer</b><br>Employer Name & Address:<br><b>RCO Engineering</b><br><b>Roseville, MI 48066</b> | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description <u>Campaign Literature - Signs &amp; Cards</u><br>5. Date Of Receipt: <u>08/20/2022</u><br>6. Vendor Name & Address:<br><b>Younique Cards.com</b><br><b>42816 Willsharon</b><br><b>Sterling Heights, MI 48314</b> | \$ <u>340.00</u> \$                  | <input type="button" value="Click Here for Memo Itemization"/>     |
| <input type="checkbox"/> Fund Raiser Contribution                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                    |
| Contribution #3      PAC Receipt? <input type="checkbox"/> Yes<br>Name & Address:<br><b>John Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br>If over \$100.00 cumulative, please provide:<br>Occupation: <b>Engineer</b><br>Employer Name & Address:<br><b>RCO Engineering</b><br><b>Roseville, MI 48066</b>  | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description <u>Campaign Literature - Cards</u><br>5. Date Of Receipt: _____<br>6. Vendor Name & Address:<br><b>Younique Cards.com</b><br><b>42816 Willsharon</b><br><b>Sterling Heights, MI 48314</b>                         | \$ <u>190.00</u> \$                  | <input type="button" value="Click Here for Memo Itemization"/>     |
| <input type="checkbox"/> Fund Raiser Contribution                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                    |

Page Subtotal **\$620.00**

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 140216

2. Committee Name CTE Mechelle Fitzpatrick Utica Community Schools School Board

### CANDIDATE COMMITTEE

| 3. Name and Address from whom received<br>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)<br>5. Date of Receipt<br>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? <input type="checkbox"/> Yes<br>Name & Address:<br><b>John Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br>If over \$100.00 cumulative, please provide:<br>Occupation: <b>Engineer</b><br>Employer Name & Business Address:<br><b>RCO Engineering</b><br><b>Roseville, MI 48066</b><br><input type="checkbox"/> Fund Raiser Contribution | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description <u>Campaign Literature - Buttons</u><br>5. Date Of Receipt: _____<br>6. Vendor Name & Address:<br><b>Say it with Swag</b><br><b>16282 Sassafras Lane</b><br><b>Macomb, MI 48044</b><br>Click Here for Memo Itemization <input type="button" value="v"/>                   | \$ 263.56                      |                                                           |
| Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes<br>Name & Address:<br><b>John Fitzpatrick</b><br><b>8622 Carriage Hill Drive</b><br><b>Shelby Township, MI 48317</b><br>If over \$100.00 cumulative, please provide:<br>Occupation: <b>Engineer</b><br>Employer Name & Address:<br><b>RCO Engineering</b><br><b>Roseville, MI 48066</b><br><input type="checkbox"/> Fund Raiser Contribution          | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description <u>Campaign Bank Account Start Up</u><br>5. Date Of Receipt: <u>09/26/2022</u><br>6. Vendor Name & Address:<br><b>Flagstar Bank</b><br><b>50891 Sabrina Drive</b><br><b>Shelby Township, MI 48315</b><br>Click Here for Memo Itemization <input type="button" value="v"/> | \$ 100.00                      |                                                           |
| Contribution #3 PAC Receipt? <input type="checkbox"/> Yes<br>Name & Address:<br>_____<br>If over \$100.00 cumulative, please provide:<br>Occupation:<br>Employer Name & Address:<br>_____<br><input type="checkbox"/> Fund Raiser Contribution                                                                                                                                                                   | 4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan<br><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others<br><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN<br>Description _____<br>5. Date Of Receipt: _____<br>6. Vendor Name & Address:<br>_____<br>Click Here for Memo Itemization <input type="button" value="v"/>                                                                                                                                         |                                |                                                           |

Page Subtotal **\$363.56**

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

**\$983.56**

Enter this total  
on line 6 of Summary  
Page