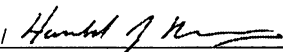



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONSCANDIDATE COMMITTEE  
COVER PAGE

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: 10/01/23 to 12/31/23

1. Committee I.D. Number <b>013853-3</b>		4. Candidate Last Name <b>Hackel</b> First Name <b>Mark</b> M.I. <b>A.</b>	
2. Committee Name <b>Mark Hackel for County Executive</b>		4a. Office Sought Including District # or Community Served (If applicable) <b>County Executive 12</b>	
5. Committee's Mailing Address <b>12900 Hall Rd. Suite 500 Sterling Heights, MI 48313</b>  Area Code and Phone <u>586-254-1040</u> 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.		4b. County of Residence <b>MACOMB</b>	
6. Treasurer's Name & Residential Address <b>Harold J. Burns 1460 Kinney Rd. Memphis, MI 48041</b>  Area Code & Phone <u>586-206-8110</u>		6. Treasurer's Name & Residential Address <b>Harold J. Burns 1460 Kinney Rd. Memphis, MI 48041</b>  Area Code & Phone <u>586-206-8110</u>	
7. Treasurer's Business Address <b>12900 Hall Rd. Suite 500 Sterling Heights, MI 48313</b>  Area Code and Phone <u>586-254-1040</u>		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)    Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input checked="" type="checkbox"/> Annual Statement ( <u>2023</u> ) Coverage Year  9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
9e. Dissolution of Candidate Committee <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.  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 <b>Harold J. Burns</b> Type or Print Name		Signature  Date <u>1/31/2024</u>	
Candidate <b>Mark A. Hackel</b> Type or Print Name		Signature  Date <u>1/31/2024</u>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 013853-3

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Mark Hackel for County Executive

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>250.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$250.00</u>	(18.) \$ <u>\$2,750.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$6.37</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$0.00</u>	(20.) \$ <u>\$2,756.37</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>0</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$3,313.16</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$3,313.16</u>	(23.) \$ <u>\$27,057.59</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed <b>by</b> the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed <b>to</b> the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$493,579.27</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$250.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$493,829.27</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$3,313.16</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$490,516.11</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 013853-3

2. Committee Name Mark Hackel for County Executive

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 checked="" type="checkbox"/> YES      4. Date of Receipt <u>12/12/23</u> Name & Address: AT&T Michigan PAC 221 N. Washington Square, Flr 1 Lansing MI 48933		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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 \$250.00

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

\$250.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3  
2. Committee Name Mark Hackel for County Executive

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>Google</u>  Address Online Application  <input type="checkbox"/> Fund Raiser	Purpose: <u>Google Workspace Subscription</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/02/23</u> Date	<u>\$ 24.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #2</b> Name <u>Macomb NAACP</u>  Address 51194 Romeo Plank Road #246 Macomb, MI 48042  <input type="checkbox"/> Fund Raiser	Purpose: <u>8 Tickets to Veterans Day Spaghetti Dinner</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/09/23</u> Date	<u>\$ 100.08</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #3</b> Name <u>Mt. Clemens Goodfellows</u>  Address PO Box 421 Mt. Clemens, MI 48046  <input type="checkbox"/> Fund Raiser	Purpose: <u>Full Page Ad - Razzberry Paper</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/14/23</u> Date	<u>\$ 300.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #4</b> Name <u>Verizon Wireless</u>  Address P.O. Box 553 Warrendale, PA 15086  <input type="checkbox"/> Fund Raiser	Purpose: <u>Candidate Cell Phone 9/19-10/18/2023</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/15/23</u> Date	<u>\$ 280.39</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #5</b> Name <u>Baro Mini Storage</u>  Address 34464 Kelly Road Clinton Twp., MI 48035  <input type="checkbox"/> Fund Raiser	Purpose: <u>Storage Unit April-Dec 2023</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/15/23</u> Date	<u>\$ 630.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,334.47**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3  
2. Committee Name Mark Hackel for County Executive

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>Michigan Thanksgiving Parade Foundation</u>  Address <u>9500 Mt. Elliott, Studio A</u> <u>Detroit, MI 48211</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Hob Nobble Gobble Tickets</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/15/23</u> Date	\$ <u>1,000.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #2</b> Name <u>Constant Contact</u>  Address <u>Online Application</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Email marketing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/16/23</u> Date	\$ <u>52.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #3</b> Name <u>Verizon Wireless</u>  Address <u>P.O. Box 553</u> <u>Warrendale, PA 15086</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Candidate Cell Phone 10/19-11/18/2023</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/01/23</u> Date	\$ <u>280.69</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #4</b> Name <u>Google</u>  Address <u>Online Application</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Google Workspace Subscription</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/04/23</u> Date	\$ <u>24.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #5</b> Name <u>Constant Contact</u>  Address <u>Online Application</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Email marketing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/18/23</u> Date	\$ <u>52.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$1,408.69**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 013853-3  
2. Committee Name Mark Hackel for County Executive

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>UHY Advisors MI, Inc.</u>  Address <u>12900 Hall Road, Suite 500</u> <u>Sterling Hgts, MI 48313</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Accounting services through April 2023</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/27/23</u> Date	\$ <u>570.00</u>
Expenditure #2 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____  Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page	\$570.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	\$3,313.16

Enter this total  
on line 8a of  
Summary Page