

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed
by the treasurer or designated record keeper3. This Statement covers From: 01/01/23 To 12/31/23

1. Committee I.D. Number

138970

2. Committee Name

Macomb Township Leadership PAC

4. Committee's Mailing Address

**Salvatore DiCaro
54712 Congaree Dr
Macomb, MI 48042-6144**Area Code and Phone (586) 405-3401If 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.

5. Treasurer's Name and Residential Address

**Lacey Ward
11181 Messmore Road
Utica, MI 48317**Area Code and Phone (586) 873-5012

6. Treasurer's Business Address

**54111 Broughton Road
Macomb, MI 48042****586-992-2900 ext. 2908**

Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated
Record Keeper)**Sharalyn Arft
52595 Sawmill Creek Dr.
Macomb, MI 48042**Area Code and Phone (586) 992-0710

8. TYPE OF STATEMENT:

APPLICABLE TO INDEPENDENT AND POLITICAL
COMMITTEES REGISTERED ON STATE LEVEL8a. QUARTERLY STATEMENTS☐ January 31☐ April 25☐ July 25☐ October 258b. ☐ SPECIAL ELECTION INDEPENDENT
EXPENDITURE REPORTAPPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON COUNTY LEVEL8c. ☒ ANNUAL STATEMENT
(2023 Coverage Year) Local
Candidates Exempted8d. ☐ PRE-ELECTION OR8e. ☐ POST-ELECTIONPre-Election or Post-Election
Statement relates to:☐ PRIMARY☐ GENERAL☐ CONVENTION☐ SCHOOL☐ SPECIAL☐ CAUCUS

Date of Election, Convention or Caucus:

☐ July 25 Quarterly☐ October 25 QuarterlyAPPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ONSTATE AND COUNTY LEVEL8f. ☐ AMENDMENT TO CAMPAIGN
STATEMENT(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
to indicate which Statement is being
amended)8g. ☐ DISSOLUTION OF COMMITTEE

Effective Date of Dissolution

By checking this item, I/We certify that
the committee has no asset or outstanding
debts, including late filing fees. Further, I
request that if the dissolution cannot be
granted, that this be considered a request for
the Reporting Waiver.**Note:** The disposition of residual funds must
be reported on Schedule 2B and the
Summary Page.9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my
knowledge and belief the contents are true, accurate and complete.Current Treasurer or Lacey Ward
Designated Record Keeper Type or Print Name

Signature

Date

01/19/24



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8)	(3a.) \$ <u>7,152.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ _____	(18.) \$ _____
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$ <u>7,152.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized (Schedule 2-IK, Column 7)	(6a.) \$ _____	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ _____	(21.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized Direct (Schedule 2B, Column 7)	(8a.) \$ <u>3,098.00</u>	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) \$ _____	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) \$ _____	
d. Unitemized (less than \$50.01 each - no Schedule)	(8d.) \$ _____	
e. Subtotal of Expenditures	(8e.) \$ _____	(22.) \$ _____
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>3,098.00</u>	(24.) \$ _____
IN-KIND EXPENDITURES		
11. In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) \$ _____	(25.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 2E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 2E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>21,914.54</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + <u>7,152.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>29,066.54</u>	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) - <u>3,098.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>25,968.54</u>	*

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Sal DiCaro
54712 Congaree Drive
Macomb, MI 48042

\$ 400

\$ _____

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

Click Here for Memo Itemization Type

Occupation Director of Parks and Recreation Employer Macomb Township Parks and Recreation

Business Address 20699 Macomb Street, Macomb, MI 48042

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Permelia Giannone
26270 Wacker Drive
Chesterfield, MI 48051

\$ 250

\$ _____

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

Click Here for Memo Itemization Type

Occupation Aquatics Supervisor Employer Macomb Township Parks and Recreation

Business Address 20699 Macomb Street, Macomb, MI 48042

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 07/31/23

Name & Address:

John Rak
49139 Squirewood Ct.
Macomb, MI 48042

\$ 400

\$ _____

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

Click Here for Memo Itemization Type

Occupation Market President Employer Teph Seal

Business Address 5615 Old Winter Garden Rd, Orlando, FL 32811

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Kevin Moore
601 Abbot Street
Detroit, MI 48226

\$ 950

\$ _____

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

Click Here for Memo Itemization Type

Occupation Director of Sales and Analytics Employer TMR Insurance Agency

Business Address 601 Abbott St, Detroit, MI 48226

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

\$ 2,000.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Josh Bocks 15960 Alpine Drive Livonia, MI 48154 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____
3. Contribution # 2 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Sara Buscaino 49377 Bulldog Dr. Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____
3. Contribution # 3 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Bill Caruso 50882 Romeo Plank Macomb, MI 48042 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>The Coney Grill</u> Business Address <u>50882 Romeo Plank, Macomb, MI 48042</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>150</u>	\$ _____
3. Contribution # 4 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Mark Behnke 27930 Roy St. St. Clair Shores, MI 48081 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired Teacher</u> Employer <u>Chippewa Valley Schools</u> Business Address <u>18300 19 Mile Rd. Clinton Twp, MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>200</u>	\$ _____

Page Subtotal **\$550.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Tanya Balcom

19946 Mt. Vernon Dr, Macomb, MI 48044

\$ 100

\$ _____

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

Click Here for Memo Itemization Type

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Edward Carey III

51404 Royal Links Court

Macomb, MI 48042

\$ 100

\$ _____

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Kristen Tassielli

633 Princess Dr

Canton, MI 48188

\$ 300

\$ _____

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

Occupation G.M./Managing Partner Employer Fitness Things/All Pro

Business Address 35539 Schoolcraft Rd, Livonia, MI 68150

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Frank Audia

32151 Rush St

Garden City, MI 48135

\$ 100

\$ _____

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

\$ 600.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Dennis Graham 19404 Autumn Ridge Dr. Northville, MI 48167 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____
3. Contribution # 2 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Linda Yudas 2783 North Lake Drive Waterford, MI 48329 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____
3. Contribution # 3 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Vicki VanDenBerg 52 Lynwood Dr Battle Creek, MI 49015 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____
3. Contribution # 4 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Susan Meisner 2603 Forest Mead Drive Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Best Vending</u> Business Address <u>2603 Forest Mead Drive, Sterling Heights, MI 48314</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>150</u>	\$ _____

Page Subtotal **\$450.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

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6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Mike Schutzler
47644 Kelston Dr.
Macomb, MI 48044

\$ 150

\$ _____

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

Occupation General Manager Employer Jet's Pizza

Business Address 21956 23 Mile Rd, Macomb, MI 48042

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization Type

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Nina Manley
15501 Metro Parkway
Clinton Township, MI 48036

\$ 150

\$ _____

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

Occupation SALES ASSOCIATE Employer Berkshire Hathaway

Business Address 15501 Metropolitan Parkway Suite 105, Clinton Township, MI, 48036

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization Type

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Frank Alspector
28960 E. King William Drive
Farmington Hills, MI 48331

\$ 100

\$ _____

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 Type

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Steve Graus
52269 Monaco Drive
Macomb Twp, MI 48042

\$ 1102

\$ _____

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

Occupation Owner Employer DC Sports

Business Address 14600 Lakeside Circle, Sterling Heights, MI 48313

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization Type

Page Subtotal

\$ 1,502.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/06/23</u> Name & Address: Peter Lucido III 16717 Fays Ct. Macomb, MI 48042 5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer <u>Lucido's Insurance Agency Inc.</u> Business Address <u>39999 Garfield Rd, Clinton Twp, MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>650</u>	\$ _____
3. Contribution # 2 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Tom McManaman 46173 Plumgrove Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired Fire Fighter</u> Employer <u>City of Detroit</u> Business Address <u>10200 Erwin Ave, Detroit, MI 48234</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>400</u>	\$ _____
3. Contribution # 3 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Alec Fell 52572 Fox Point Dr. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>KangaRoof</u> Business Address <u>44039 N. Grosebeck Hy, Clinton Twp, MI 48036</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300</u>	\$ _____
3. Contribution # 4 Is this contribution from a PAC? ☐ YES 4. Date of Receipt <u>09/09/23</u> Name & Address: Daniel Gallas 41160 Redwood Ct Clinton Twp, MI 48038 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100</u>	\$ _____

Page Subtotal **\$1,450.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 138970

2. Committee Name Macomb Township Leadership PAC

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Ed Carey Jr.
51404 Royal Links Ct.
Macomb, MI 48042

\$ 200

\$ _____

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

Click Here for Memo Itemization Type ☐

Occupation Elections Coordinator Employer Macomb Township

Business Address 5411 Broughton Rd. Macomb, MI 48042

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/09/23

Name & Address:

Dennis Koch
1209 Mohawk Ave
Royal Oak, MI 48067

\$ 400

\$ _____

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

Click Here for Memo Itemization Type ☐

Occupation Director of Alumni Relations Employer De La Salle Collegiate High School

Business Address 14600 Common Rd, Warren, MI 48088

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

Click Here for Memo Itemization Type ☐

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

Click Here for Memo Itemization Type ☐

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 600.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

\$ 7,152.00

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number **138970**
Macomb Township Leadership PAC
2. Committee Name _____

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Fern Hill Golf Club 17600 Clinton River Road Clinton Twp, MI 48038	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	09/21/23 Date	\$ 2898	\$ _____
4. Purpose: <u>Golf Outing</u>	☒ Fund Raiser ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #2 Name & Address: Dick's Sporting Goods Sterling Heights, MI 48313	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	09/07/23 Date	\$ 200	\$ _____
4. Purpose: <u>Golf Balls</u>	☒ Fund Raiser ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #3 Name & Address:	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	_____ Date	\$ _____	\$ _____
4. Purpose: _____	☐ Fund Raiser ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #4 Name & Address:	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	_____ Date	\$ _____	\$ _____
4. Purpose: _____	☐ Fund Raiser ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		

Subtotal this page **\$3,098.00**

Grand Total of all Schedules 2B
(Complete on last page of Schedule) **\$3,098.00**

Enter this total
on line 8a of the
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 2F
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number 138970
2. Committee Name Macomb Township Leadership PAC

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>01/19/24</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>46</u>	5. Type of Fund Raising Activity <u>Golf Outing</u>	6. Address and Name (If any) of the place where the activity was held <u>Fern Hill</u> <u>17600 Clinton River Road</u> <u>Clinton Twp, MI 48038</u> ☐ Private Residence
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7. Total Contributions \$7,152.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$7,152.00

10. Total Cost of Event \$3,098.00

*Includes In-Kind Contributions and All
Expenditures Made For the Event

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Direct Contributions Schedule (2A), Itemized In-Kind Contributions Schedule (2-1K), Itemized Expenditures Schedule (2B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.