



FILED

25 JUL 2024 PM 02:49

MACOMB COUNTY CLERK  
MT. CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE  
COVER PAGE**

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: 01/01/2024 to 07/20/2024

1. Committee I.D. Number

**138533**

4. Candidate Last Name First Name M.I.

**HACKEL MARK**

2. Committee Name

**MARK HACKEL FOR COUNTY EXECUTIVE**

4a. Office Sought Including District # or Community Served (If applicable)

**COUNTY EXECUTIVE, MACOMB COUNTY**

4b. County of Residence **MACOMB COUNTY**

5. Committee's Mailing Address

**12900 HALL RD SUITE 500  
STERLING HEIGHTS, MI 48313**

Area Code and Phone (586) 254-1040  
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.

6. Treasurer's Name & Residential Address

**HAROLD J BURNS  
1460 KINNEY ROAD  
MEMPHIS, MI 48041**

Area Code & Phone (586) 206-8110

7. Treasurer's Business Address

**1460 KINNEY ROAD  
MEMPHIS, MI 48041**

Area Code and Phone (586) 206-8110

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

**APRIL WILSON  
19510 COOPER STREET  
CLINTON TOWNSHIP, MI 48038**

Area Code and Phone (989) 390-1231

**9. TYPE OF STATEMENT**

9a. ☐ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☐ Primary  
☐ General  
☐ Convention  
☐ Special  
☐ School  
☐ Caucus

Required ONLY if candidate is not on the ballot for the current year:

- ☒ July Quarterly  
☐ October Quarterly

9c. ☐ Annual Statement (2024 )  
Coverage Year

9d. ☐ Amendment to Campaign Statement  
(Complete Item 9a, 9b , 9c or 9e to indicate which Statement is being amended.)

Date of Election, Convention or Caucus  
  
\_\_\_\_\_

**9e. Dissolution of Candidate Committee**

☐ 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 lates 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

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

**07/25/2024**

Candidate

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

**07/25/2024**



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 138533

**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>152,151.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>152,151.00</u>	(18.) \$ <u>154,901.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.01</u>	(19.) \$ <u>6.38</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>152,151.01</u>	(20.) \$ <u>154,907.38</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>0.00</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>42,954.79</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>42,954.79</u>	(23.) \$ <u>70,012.38</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>490,516.11</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>152,151.01</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>642,667.12</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>42,954.79</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>599,712.33</u> *	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>02/09/2024</u>	
Name & Address: <b>BENJAMIN ALOIA</b> 54439 WHITE SPRUCE LN SHELBY TWP, MI 48315		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>ALOIA &amp; ASSOCIATES, PC</u> Business Address <u>48 S MAIN ST, STE. 3, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/09/2024</u>	
Name & Address: <b>JAMES GEORGE</b> 19634 WESTCHESTER DR CLINTON TWP, MI 48038		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/12/2024</u>	
Name & Address: <b>STEPHEN PANGORI</b> 8106 ROSEBUD LN CLARKSTON VLG, MI 48348		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>ANDERSON, ECKSTEIN &amp; WESTRICK, INC</u> Business Address <u>51301 SCHOENHERR RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/13/2024</u>	
Name & Address: <b>WILLIAM B FORREST, III</b> 630 HALF MOON RD BLOOMFIELD HILLS, MI 48301		\$ <u>666.66</u>	\$ <u>666.66</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>KIENBAUM HARDY VIVIANO PELTON &amp; FORREST PLC</u> Business Address <u>280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **5,166.66**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>02/13/2024</u> Name & Address: <b>SCOTT LOCKWOOD</b> 950 SOUTHDOWN RD BLOOMFIELD HILLS, MI 48304	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>ANDERSON, ECKSTEIN &amp; WESTRICK, INC</u> Business Address <u>51301 SCHOENHERR RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/13/2024</u> Name & Address: <b>ERIC PELTON</b> 3260 KERNWAY CT BLOOMFIELD HILLS, MI 48304	\$ <u>666.67</u>	\$ <u>666.67</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>KIENBAUM HARDY VIVIANO PELTON &amp; FORREST PLC</u> Business Address <u>280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/13/2024</u> Name & Address: <b>JOSEPH VIVIANO</b> 11826 FOREST GLEN LN SHELBY TWP, MI 48315	\$ <u>666.67</u>	\$ <u>666.67</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>KIENBAUM HARDY VIVIANO PELTON &amp; FORREST PLC</u> Business Address <u>280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/13/2024</u> Name & Address: <b>GORDON WILSON</b> 49572 COMPASS POINT DR NEW BALTIMORE, MI 48047	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>ANDERSON, ECKSTEIN &amp; WESTRICK, INC</u> Business Address <u>51301 SCHOENHERR RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal 2,333.34

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>02/14/2024</u>	
Name & Address: <b>MICHAEL VIGNERON</b> <b>8797 IRA RD</b> <b>FAIR HAVEN, MI 48023</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VP, DIRECTOR OF ENGINEERING</u> Employer <u>ANDERSON, ECKSTEIN &amp; WESTRICK, INC</u> Business Address <u>51301 SCHOENHERR RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/15/2024</u>	
Name & Address: <b>JASON ARLOW</b> <b>5709 ARNOLD RD</b> <b>MARINE CITY, MI 48039</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>ANDERSON, ECKSTEIN &amp; WESTRICK, INC</u> Business Address <u>51301 SCHOENHERR RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/15/2024</u>	
Name & Address: <b>TONY GALLO</b> <b>6303 26 MILE RD</b> <b>STE. 200</b> <b>WASHINGTON, MI 48094</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>GALLO COMPANIES</u> Business Address <u>6303 26 MILE RD, STE. 200, WASHINGTON, MI 48094</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/15/2024</u>	
Name & Address: <b>THOMAS GUASTELLO</b> <b>34120 WOODWARD AVE</b> <b>BIRMINGHAM, MI 48009</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>CENTER MANAGEMENT</u> Business Address <u>34120 WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 2,500.00

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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/15/2024</u> Name & Address: <b>STEVEN MANCINI</b> <b>37532 HIDDEN VALLEY CT</b> <b>CLINTON TWP, MI 48036</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>RIC-MAN CONSTRUCTION</u> Business Address <u>38600 VAN DYKE AVE, STE. 100, STERLING HEIGHTS, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>02/15/2024</u> Name & Address: <b>CHALDEAN CHAMBER PAC</b> <b>30095 NORTHWESTERN HWY</b> <b>FARMINGTON HILLS, MI 48334</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/16/2024</u> Name & Address: <b>MICHAEL CHIRCO</b> <b>6166 WOODBRIDGE DR</b> <b>WASHINGTON, MI 48094</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER/BUILDER</u> Employer <u>MJC HOMES</u> Business Address <u>46600 ROMEO PLANK RD, STE. 5, MACOMB, MI 48044</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/16/2024</u> Name & Address: <b>DIANE MAGNOLI</b> <b>6402 BAYPOINT</b> <b>WASHINGTON, MI 48094</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER</u> Employer <u>MICHAEL ANGELO HOMES</u> Business Address <u>59227 VAN DYKE AVE, WASHINGTON, MI 48094</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **8,000.00**

Grand Total of All Schedules 1A  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/16/2024</u>	
Name & Address: <b>ANTHONY PENNA</b> <b>37351 WILLOW LANE</b> <b>CLINTON TOWNSHIP, MI 48036</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRINCIPAL</u> Employer <u>PENNA REAL ESTATE GROUP</u> Business Address <u>38600 VAN DYKE AVE, STERLING HEIGHTS, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/16/2024</u>	
Name & Address: <b>JONATHAN UGVAL</b> <b>30 HARBOR HILL RD</b> <b>GROSSE POINTE FARMS, MI 48236</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>HOUSE ARREST</u> Business Address <u>16039 E 9 MILE RD, EASTPOINTE, MI 48021</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/19/2024</u>	
Name & Address: <b>SIMONE MAURO</b> <b>5841 CUSICK LAKE DR</b> <b>WASHINGTON, MI 48095</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>MAURO ENGINEERING</u> Business Address <u>48657 HAYES RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>02/21/2024</u>	
Name & Address: <b>MI BUILDING &amp; CONSTRUCTION TRADES LEGAL, PR AND INDUSTRY DEFENSE FUND</b> <b>1640 PORTER ST</b> <b>DETROIT, MI 48216</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **8,000.00**

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/22/2024</u>	
Name & Address: <b>NICHOLAS AIUTO</b> 41100 CONGER BAY DR HARRISON TWP, MI 48045		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>NICK'S TOWING</u> Business Address <u>42870 N WALNUT ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/22/2024</u>	
Name & Address: <b>KEVIN DENHA</b> 3916 MT VERNON DR BLOOMFIELD HILLS, MI 48301		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGING DIRECTOR</u> Employer <u>VISION INVESTMENT SERVICES</u> Business Address <u>700 N OLD WOODWARD AVE, STE. 300, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/22/2024</u>	
Name & Address: <b>ANTHONY LOMBARDO</b> 56075 KEN CHARLES DR SHELBY TWP, MI 48316		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUILDER/DEVELOPER</u> Employer <u>LOMBARDO HOMES</u> Business Address <u>13001 23 MILE RD, STE. 200, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/23/2024</u>	
Name & Address: <b>DONALD AMBOYER</b> 54367 QUEENS ROW SHELBY TWP, MI 48316		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SPECIAL PROJECT ADVISOR</u> Employer <u>MACOMB COUNTY</u> Business Address <u>1 S. MAIN ST., MOUNT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **6,400.00**

Grand Total of All Schedules 1A  
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Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>02/23/2024</u>	
Name & Address: <b>JOE BALLOR</b> 50383 HEATHERWOOD LN SHELBY TWP, MI 48317		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>JOE BALLOR TOWING INC.</u> Business Address <u>24050 28 MILE RD, RAY, MI 48096</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/23/2024</u>	
Name & Address: <b>LEONARD BUGAJEWSKI</b> 16982 STEWART CT CLINTON TWP, MI 48038		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>LEONARD'S SYRUPS</u> Business Address <u>4601 NANCY ST., HAMTRAMCK, MI 48212</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/23/2024</u>	
Name & Address: <b>KENNETH DECOCK</b> 80575 HOLMES RD ARMADA, MI 48005		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FARMER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>20555 23 MILE RD, MACOMB, MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/23/2024</u>	
Name & Address: <b>THERESA DOAN</b> 3453 SHERWOOD RD BRANDON TWP, MI 48462		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL RESPONSIBILITY DIRECTOR</u> Employer <u>GENISYS CREDIT UNION</u> Business Address <u>17498 HALL RD, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,200.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>AMANDA GOODSPEED</b> <b>39475 W 13 MILE RD</b> <b>NOVI, MI 48377</b>		\$ <u>800.00</u>	\$ <u>800.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSTRUCTION</u> Employer <u>GRANGER CONSTRUCTION</u> Business Address <u>39475 W 13 MILE RD, NOVI, MI 48377</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>AMY MCMILLAN</b> <b>13000 HIGHRIDGE DR</b> <b>BRIGHTON, MI 48114</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>HURON CLINTON METRO PARKS</u> Business Address <u>13000 HIGHRIDGE DR, BRIGHTON, MI 48114</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>JOHN JAMES</b> <b>54339 RIDGEVIEW DR</b> <b>SHELBY TWP, MI 48316</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>U.S. CONGRESSMAN (MI-10)</u> Employer <u>U.S. HOUSE OF REPRESENTATIVES</u> Business Address <u>1309 LONGWORTH HOUSE OFFICE BUILDING, WASHINGTON, DC 20515</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>JUDY PRITCHETT</b> <b>62823 TOURNAMENT DR</b> <b>WASHINGTON, MI 48094</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,200.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>DAVID ROBINSON</b> <b>2840 SEVERN LN</b> <b>BLOOMFIELD HILLS, MI 48304</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>JVIS USA</u> Business Address <u>52048 SHELBY PKWY, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>KURTIS WILDER</b> <b>25999 PETROS BLVD</b> <b>NOVI, MI 48375</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BUTZEL LONG</u> Business Address <u>150 W JEFFERSON AVE, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>DIANE YOUNG</b> <b>13250 IRVINGTON DR</b> <b>WARREN, MI 48088</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FINANCIAL PLANNER</u> Employer <u>ARROWROOT FAMILY OFFICE</u> Business Address <u>725 BARCLAY CIR, STE. 215, ROCHESTER HILLS, MI 48307</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/23/2024</u> Name & Address: <b>CHARLENE ZEAWA</b> <b>3221 W BIG BEAVER RD</b> <b>STE. 305</b> <b>TROY, MI 48084</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>SMACNA DETROIT</u> Business Address <u>3221 W BIG BEAVER RD, STE. 305, TROY, MI 48084</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,000.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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>02/23/2024</u> Name & Address: MICHIGAN LABORERS' POLITICAL LEAGUE PAC 1118 CENTENNIAL WAY STE. 100 LANSING, MI 48917 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: GEORGE BARNES 30980 WENDBROOK LN BEVERLY HILLS, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>HERITAGE VISION PLANS</u> Business Address <u>ONE WOODWARD AVE., STE. 2020, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: LISA UPTON 11303 GREENDALE DR. STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE ASSISTANT</u> Employer <u>UTICA COMMUNITY SCHOOLS</u> Business Address <u>11303 GREENDALE DR, STERLING HEIGHTS, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: THOMAS BROAD 37980 CHARTIER ST HARRISON TWP, MI 48045 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>MIDWEST STEEL INC</u> Business Address <u>2525 E GRAND BLVD, DETROIT, MI 48211</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>2,000.00</u>	\$ <u>2,000.00</u>

Page Subtotal 4,400.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>LESONIA FORTE</b> <b>1643 FRANKLIN ST</b> <b>ANN ARBOR, MI 48103</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASSOCIATE DIRECTOR, STATE OUTREACH</u> Employer <u>UNIVERSITY OF MICHIGAN, GOVERNMENT RELATIONS</u> Business Address <u>2345 RUTHVEN BUILDING, 1109 GEDDESS AVE., ANN ARBOR, MI 49109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>DONALD KOSNIK</b> <b>17414 MERGANSER DR</b> <b>CLINTON TWP, MI 48038</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CFO</u> Employer <u>COLASANTI CONSTRUCTION SERVICES</u> Business Address <u>24500 WOOD CT, MACOMB, MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>RON LAMPARTER</b> <b>12 WINDEMERE PL</b> <b>GROSSE POINTE FARMS, MI 48236</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>DENNIS MORIER</b> <b>12861 WARD ST</b> <b>SOUTHGATE, MI 48195</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR ACCOUNT MANAGER</u> Employer <u>TMR &amp; ASSOCIATES</u> Business Address <u>601 ABBOTT ST, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 3,100.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>HEATHER OBRECHT WHITE</b> <b>1752 FLAGSTONE CIR</b> <b>ROCHESTER, MI 48307</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ARCHITECT</u> Employer <u>AUGER, KLEIN, ALLER ARCHITECTS</u> Business Address <u>303 E 3RD ST, STE. 100, ROCHESTER, MI 48307</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>BRIAN PILARSKI</b> <b>1319 ALAMEDA BLVD</b> <b>TROY, MI 48085</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMERCIAL INSURANCE</u> Employer <u>KAPNICK INSURANCE</u> Business Address <u>769 CHICAGO RD, STE. 300, TROY, MI 48083</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>JAMES SAWYER</b> <b>45810 PRIVATE SHORE DR</b> <b>NEW BALTIMORE, MI 48051</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>MACOMB COMMUNITY COLLEGE</u> Business Address <u>14500 TWELVE MILE RD, WARREN, MI 48088</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/26/2024</u>	
Name & Address: <b>SUSAN SHOPINSKI</b> <b>320 CHURCH ST</b> <b>MT CLEMENS, MI 48043</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE ASSISTANT</u> Employer <u>NEW IMAGE BUILDING SERVICES</u> Business Address <u>320 CHURCH ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,000.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: <b>SCOTT SOBCZYK</b> <b>19641 HANNA ST</b> <b>MELVINDALE, MI 48122</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNT MANAGER</u> Employer <u>TMR &amp; ASSOCIATES</u> Business Address <u>601 ABBOTT ST, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: <b>CRAIG WOLANIN</b> <b>303 E 3RD ST</b> <b>STE. 300</b> <b>ROCHESTER, MI 48307</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CORPORATE DEVELOPMENT</u> Employer <u>FRANK REWOLD &amp; SONS</u> Business Address <u>303 E 3RD ST, STE. 300, ROCHESTER, MI 48307</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>02/26/2024</u> Name & Address: <b>FRIENDS OF MCLAREN PAC</b> <b>1731 BLUE GRASS RD</b> <b>LANSING, MI 48906</b>		\$ <u>600.00</u>	\$ <u>600.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/27/2024</u> Name & Address: <b>THOMAS ALONGI</b> <b>1748 LEXINGTON DR</b> <b>TROY, MI 48084</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>UHY, LLP</u> Business Address <u>12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,700.00**

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
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1. Committee I.D. Number 138533  
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>GEORGE BARNES</b> <b>30980 WENDBROOK LN</b> <b>BEVERLY HILLS, MI 48025</b>		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>HERITAGE VISION PLANS</u> Business Address <u>ONE WOODWARD AVE., STE. 2020, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>JAMES BURTON</b> <b>13368 BANBURY CT</b> <b>SHELBY TWP, MI 48315</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>HUBBELL, ROTH &amp; CLARK, INC.</u> Business Address <u>555 HULET DR, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>THOMAS CALLAN, III</b> <b>5865 LAHSER RD</b> <b>BLOOMFIELD HILLS, MI 48301</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>UHY, LLP</u> Business Address <u>27725 STANSBURY, FARMINGTON HILLS, MI 48334</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>THOMAS GUASTELLO</b> <b>34120 WOODWARD AVE</b> <b>BIRMINGHAM, MI 48009</b>		\$ <u>200.00</u>	\$ <u>1,200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>CENTER MANAGEMENT</u> Business Address <u>34120 WOODWARD AVE, BIRMINGHAM, MI 48009</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,000.00**

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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 type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: JOSHUA KIRKBRIDE 71134 OAKTREE LN BRUCE TWP, MI 48065		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>UHY, LLP</u> Business Address <u>12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: ALBERT LORENZO 37281 WOODSIDE LN CLINTON TWP, MI 48036		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY COUNTY EXECUTIVE</u> Employer <u>MACOMB COUNTY</u> Business Address <u>1 S. MAIN, 8TH FLOOR, MOUNT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: SHAUN QUINN 33563 ADDISON DR. NEW BALTIMORE, MI 48047		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRINCIPAL, VICE PRESIDENT</u> Employer <u>ZOLMAN RESTORATION</u> Business Address <u>3285 MARTIN RD, WARREN, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: JOSEPH VICARI 37523 HIDDEN VALLEY CT CLINTON TWP, MI 48036		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>ANDIAMO RESTAURANT GROUP</u> Business Address <u>7096 E 14 MILE RD, WARREN, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 4,800.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>JEFFREY WHITE</b> <b>12856 BELLE RIVER RD</b> <b>MEMPHIS, MI 48041</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHIEF</u> Employer <u>RICHMOND LENOX EMS</u> Business Address <u>34505 32 MILE RD, RICHMOND, MI 48062</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>DETROIT REGIONAL CHAMBER PAC</b> <b>1 WOODWARD AVE</b> <b>STE. 1900</b> <b>DETROIT, MI 48226</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>02/27/2024</u>	
Name & Address: <b>MITA PAC</b> <b>PO BOX 1640</b> <b>OKEMOS, MI 48805</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/28/2024</u>	
Name & Address: <b>JOSEPH GIACALONE</b> <b>39283 W ROYAL DOULTON BLVD</b> <b>CLINTON TWP, MI 48038</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>GCH MACHINERY</u> Business Address <u>13301 E 8 MILE RD, WARREN, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 5,200.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>02/28/2024</u> Name & Address: GUY RIZZO 65 MACOMB PL STE. F MT CLEMENS, MI 48043 5. If over \$100.00 cumulative, please provide: Occupation <u>BUILDER</u> Employer <u>SELF EMPLOYED</u> Business Address <u>65 MACOMB PL, STE. F, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>600.00</u>	\$ <u>600.00</u>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/28/2024</u> Name & Address: RONALD A SYME, JR. 38690 LONG ST HARRISON TWP, MI 48045 5. If over \$100.00 cumulative, please provide: Occupation <u>PROJECT ARCHITECT</u> Employer <u>WAKELY &amp; ASSOCIATES</u> Business Address <u>30500 VAN DYKE AVE, STE. 209, WARREN, MI 48093</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/28/2024</u> Name & Address: ALAN YOUNG 7310 WOODWARD AVE DETROIT, MI 48202 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 checked="" type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/29/2024</u> Name & Address: THOMAS GIACHINO 2742 RHODES DR TROY, MI 48083 5. If over \$100.00 cumulative, please provide: Occupation <u>IT</u> Employer <u>METRO TECHNOLOGIES</u> Business Address <u>59 N WALNUT ST, ST. 202, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>

Page Subtotal 2,900.00

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

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line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>02/29/2024</u>	
Name & Address: <b>GREGORY PIEPRZAK</b> <b>6201 ST CLAIR HWY</b> <b>EAST CHINA, MI 48054</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VP FIELD OPERATIONS</u> Employer <u>T R PIEPRZAK COMPANY</u> Business Address <u>6267 ST CLAIR HWY, EAST CHINA, MI 48054</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/29/2024</u>	
Name & Address: <b>STEPHEN R SAPH, JR</b> <b>68 CLINTON ST.</b> <b>MOUNT CLEMENS, MI 48043</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INSURANCE SALES</u> Employer <u>NICKEL &amp; SAPH</u> Business Address <u>44 MACOMB PL, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/29/2024</u>	
Name & Address: <b>DANA SCHMITT</b> <b>1058 E TIENKEN RD</b> <b>ROCHESTER HILLS, MI 48306</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SPORTS EXECUTIVE, ATTORNEY</u> Employer <u>GENERAL SPORTS BASEBALL, LLC</u> Business Address <u>400 WATER ST, STE. 250, ROCHESTER, MI 48307</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>02/29/2024</u>	
Name & Address: <b>ELLEN SCHREUDER</b> <b>5290 GRAYTON ST</b> <b>DETROIT, MI 48224</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MANCINI, SCHREODER, KLINE, PC</u> Business Address <u>28225 MOUND RD, WARREN, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,300.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>02/29/2024</u> Name & Address: <b>MONICA TERRACCIANO</b> <b>1900 CHRISTENBURY CT</b> <b>ROCHESTER HILLS, MI 48306</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER</u> Employer <u>ARTEVA HOMES</u> Business Address <u>425 S MAIN ST, STE. 101, ROCHESTER, MI 48307</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>02/29/2024</u> Name & Address: <b>DUSTY WELSH</b> <b>6633 18 MILE RD</b> <b>STERLING HEIGHTS, MI 48314</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EIR</u> Employer <u>VELOCITY PURCHASING</u> Business Address <u>6633 18 MILE RD, STERLING HEIGHTS, MI 48314</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/01/2024</u> Name & Address: <b>JOSEPH BUSHWAY</b> <b>36815 PUTNAM ST</b> <b>CLINTON TWP, MI 48035</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>ADAMO GROUP</u> Business Address <u>320 SEVEN MILE E, DETROIT, MI 48203</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/01/2024</u> Name & Address: <b>VINCENZO CRISPIGNANI</b> <b>529 CHASE LN</b> <b>BLOOMFIELD HILLS, MI 48304</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE DEVELOPMENT</u> Employer <u>J.V.C. DEVELOPMENT LLC</u> Business Address <u>44250 GARFIELD RD, STE. 164, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **4,400.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/01/2024</u>	
Name & Address: <b>LOUIS STRAMAGLIA</b> <b>1630 BARON CT</b> <b>ROCHESTER HILLS, MI 48307</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/01/2024</u>	
Name & Address: <b>AT&amp;T MICHIGAN PAC</b> <b>221 N WASHINGTON SQUARE</b> <b>LANSING, MI 48933</b>		\$ <u>200.00</u>	\$ <u>450.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/02/2024</u>	
Name & Address: <b>DONALD AMBOYER</b> <b>54367 QUEENS ROW</b> <b>SHELBY TWP, MI 48316</b>		\$ <u>500.00</u>	\$ <u>900.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SPECIAL PROJECT ADVISOR</u> Employer <u>MACOMB COUNTY</u> Business Address <u>1 S. MAIN ST., MOUNT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>EUGENE GARGARO</b> <b>22 RENAUD RD</b> <b>GROSSE POINTE SHORES, MI 48236</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHAIRMAN</u> Employer <u>DETROIT INSTITUTE OF ARTS</u> Business Address <u>5200 WOODWARD AVE, DETROIT, MI 48202</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,700.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>JANET IBARRA</b> 26277 WOODLAND DR NEW BALTIMORE, MI 48051		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>LEGAL ADMINISTRATOR</u> Employer <u>O'REILLY RANCILIO, P.C.</u> Business Address <u>12900 HALL RD, STE. 350, STERLING HEIGHTS, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>MICHAEL MALONE</b> 46352 CANDLEBERRY DR NEW BALTIMORE, MI 48047		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>PARTNERS IN ARCHITECTURE</u> Business Address <u>65 MARKET ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>F. SCOTT MILLER</b> 1598 STONY CREEK DR ROCHESTER, MI 48307		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>UHY, LLP</u> Business Address <u>12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>KEVIN MOORE</b> 601 ABBOTT ST DETROIT, MI 48226		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR OF SALES &amp; ANALYTICS</u> Employer <u>TMR &amp; ASSOCIATES</u> Business Address <u>601 ABBOTT ST, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 4,700.00

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>MICHAEL MUELLER</b> 1250 S OXFORD RD GROSSE POINTE WOODS, MI 48236		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>TMR &amp; ASSOCIATES</u> Business Address <u>601 ABBOTT ST, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>JACK OLIVER</b> 27333 MEADOWBROOK RD NOVI, MI 48377		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>OLIVER/HATCHER CONSTRUCTION</u> Business Address <u>27333 MEADOWBROOK RD, NOVI, MI 48377</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>CHASE ROBL</b> 24854 TROMBLEY ST HARRISON TWP, MI 48045		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FEMMININEO ATTORNEYS</u> Business Address <u>110 S MAIN ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/04/2024</u>	
Name & Address: <b>MANOJ SETHI</b> 6154 GRAEBEAR TRAIL EAST LANSING, MI 48823		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>DLZ MICHIGAN, INC.</u> Business Address <u>1425 KEYSTONE AVE, LANSING, MI 48911</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 4,900.00

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/04/2024</u> Name & Address: <b>JOSEPH SUIDA</b> <b>53248 SUMMER ELM DR</b> <b>SHELBY TWP, MI 48315</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
<b>3. Contribution #2</b> PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>03/04/2024</u> Name & Address: <b>MICHIGAN REGIONAL COUNCIL OF CARPENTERS PAC</b> <b>11687 AMERICAN ST</b> <b>STE. 200</b> <b>DETROIT, MI 48204</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/05/2024</u> Name & Address: <b>JOHN DOLAN</b> <b>22600 HALL RD</b> <b>STE. 205</b> <b>CLINTON TWP, MI 48036</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>ATTORNEY</u> Employer <u>YORK DOLAN &amp; TOMLINSON PC</u> Business Address <u>22600 HALL RD, STE. 205, CLINTON TWP, MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/05/2024</u> Name & Address: <b>S. ELIOT WEINER</b> <b>553 W FRANK ST</b> <b>BIRMINGHAM, MI 48009</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>PRESIDENT</u> Employer <u>EDW C LEVY CO</u> Business Address <u>8800 DIX AVE, DETROIT, MI 48209</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **4,400.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>RINALDO ACCIAVATTI</b> <b>6321 GRATIOT AVE</b> <b>ST CLAIR, MI 48079</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSTRUCTION</u> Employer <u>PAMAR ENTERPRISES INC</u> Business Address <u>31604 PAMAR CT, NEW HAVEN, MI 48048</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>HAROLD BURNS</b> <b>1460 KINNEY RD</b> <b>MEMPHIS, MI 48041</b>		\$ <u>1,200.00</u>	\$ <u>1,200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>UHY LLP</u> Business Address <u>12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>FAUSTO DELELLIS</b> <b>52675 TUSCANY GROVE</b> <b>SHELBY TWP, MI 48315</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>ROBERT KIRK</b> <b>19500 HALL RD</b> <b>STE. 100</b> <b>CLINTON TWP, MI 48038</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PARTNER</u> Employer <u>KIRK, HUTH, LANGE &amp; BADALAMENTI PLC</u> Business Address <u>19500 HALL RD, STE. 100, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **5,400.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>LISA UPTON</b> <b>11303 GREENDALE DR.</b> <b>STERLING HEIGHTS, MI 48312</b>		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE ASSISTANT</u> Employer <u>UTICA COMMUNITY SCHOOLS</u> Business Address <u>11303 GREENDALE DR, STERLING HEIGHTS, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/06/2024</u>	
Name & Address: <b>DETROIT AUTO DEALERS ASSOCIATION PAC</b> <b>1900 W BIG BEAVER RD</b> <b>TROY, MI 48084</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>PAUL ARAGONA</b> <b>5440 ORION RD</b> <b>ROCHESTER, MI 48306</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE INVESTOR</u> Employer <u>HOLIDAY ENTERPRISES</u> Business Address <u>37020 GARFIELD RD, T-1, CLINTON TWP, MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>MARK JOHNSTON</b> <b>1020 GREENTREE RD</b> <b>BLOOMFIELD HILLS, MI 48304</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>AJAX PAVING</u> Business Address <u>1957 CROOKS RD, STE. A, TROY, MI 48084</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **6,200.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>JIM SAFIEDINE</b> 4767 STONELEIGH RD BLOOMFIELD TWP, MI 48302		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>SAFIEDINE OIL COMPANY</u> Business Address <u>30401 UTICA RD, ROSEVILLE, MI 48066</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>LEONARD SALVAGGIO</b> 625 LAKE SHORE RD GROSSE POINTE SHORES, MI 48236		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>NINO SALVAGGIO MARKETS</u> Business Address <u>27900 HARPER AVE, SAINT CLAIR SHORES, MI 48080</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>BRICKLAYERS LOCAL NO 1 MICHIGAN PAC</b> 21301 RYAN RD WARREN, MI 48091		\$ <u>400.00</u>	\$ <u>400.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/07/2024</u>	
Name & Address: <b>HNTB HOLDINGS LTD PAC</b> 715 KIRK DR KANSAS CITY, MO 64105		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **4,600.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>JOE FERRO</b> 5082 SEVEN LAKES DR S WASHINGTON, MI 48095		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MEMBER</u> Employer <u>F&amp;M EXCAVATING, LLC</u> Business Address <u>2201 HAMLIN RD, SHELBY TWP, MI 48317</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>EDDIE JAWAD</b> 19040 24 MILE RD MACOMB, MI 48042		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>JAWAD GROUP INVESTMENT</u> Business Address <u>46820 NORTH AVE, MACOMB, MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>ANGELO LANNI</b> 7040 VALLEY GREEN WASHINGTON, MI 48094		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>FLORENCE CEMENT COMPANY</u> Business Address <u>51515 CORRIDOR, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>RAYMOND LOPE</b> 8459 HALL RD UTICA, MI 48317		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FUNERAL DIRECTOR</u> Employer <u>WM SULLIVAN &amp; SON FUNERAL HOME</u> Business Address <u>8459 HALL RD, UTICA, MI 48317</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 3,700.00

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>PATRICK ROUSE</b> <b>8313 MILL POINTE CT</b> <b>GOODRICH, MI 48438</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>MACOMB COMMUNITY COLLEGE</u> Business Address <u>14500 TWELVE MILE RD, WARREN, MI 48088</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>ANTHONY SOAVE</b> <b>423 LAKE SHORE RD</b> <b>GROSSE POINTE FARMS, MI 48236</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>SOAVE ENTERPRISES</u> Business Address <u>3400 E LAFAYETTE ST, DETROIT, MI 48207</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/08/2024</u>	
Name & Address: <b>WASTE MANAGEMENT EMPLOYEES BETTER GOV'T FUND OF MI</b> <b>48797 ALPHA DR</b> <b>WIXOM, MI 48393</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/09/2024</u>	
Name & Address: <b>PLUMBERS LOCAL 98 PAC</b> <b>700 TOWER DR</b> <b>STE. 300</b> <b>TROY, MI 48098</b>		\$ <u>400.00</u>	\$ <u>400.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,100.00**

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/11/2024</u>	
Name & Address: <b>MARK JANSEN</b> 16015 HARVEST SPRING LN MACOMB, MI 48042		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>FIRST STATE BANK</u> Business Address <u>24300 LITTLE MACK AVE, ST CLAIR SHORES, MI 48080</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/11/2024</u>	
Name & Address: <b>PLUNKETT COONEY PAC</b> 38505 WOODWARD AVE STE. 2000 BLOOMFIELD HILLS, MI 48304		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/12/2024</u>	
Name & Address: <b>GREGORY IACOBELLI</b> 53639 CHRISTY DR NEW BALTIMORE, MI 48051		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER</u> Employer <u>ACADIA HOMES</u> Business Address <u>55110 WOLVERINE DR, MACOMB, MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/12/2024</u>	
Name & Address: <b>JOHN KAPOUSIS</b> 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AUTO RECYCLER</u> Employer <u>G&amp;T AUTO PARTS</u> Business Address <u>54525 GRATIOT AVE, NEW BALTIMORE, MI 48047</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,400.00**

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>03/12/2024</u> Name & Address: <b>STEPHEN RABAUT</b> <b>53281 PONDVIEW DR</b> <b>SHELBY TWP, MI 48315</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u> Business Address <u>16931 19 MILE RD, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/12/2024</u> Name & Address: <b>JEFFREY SCHRODER</b> <b>1592 E LINCOLN ST</b> <b>BIRMINGHAM, MI 48009</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PLUNKETT COONEY</u> Business Address <u>28505 WOODWARD AVE., BLOOMFIELD HILLS, MI 48304</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/12/2024</u> Name & Address: <b>DANIEL STYS</b> <b>55231 BRETON WOODS DR</b> <b>MACOMB, MI 48042</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSIONAL ENGINEER</u> Employer <u>PEA GROUP</u> Business Address <u>58105 VAN DYKE AVE, WASHINGTON, MI 48094</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>03/12/2024</u> Name & Address: <b>SHEET METAL WORKERS LOCAL 80 PAC</b> <b>17100 W 12 MILE RD</b> <b>SOUTHFIELD, MI 48076</b>		\$ <u>600.00</u>	\$ <u>600.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 2,000.00

Grand Total of All Schedules 1A  
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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>DAVID CLARK</b> <b>418 MONTCLAIR WAY</b> <b>MILFORD TWP, MI 48381</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONCERT PROMOTER</u> Employer <u>LIVE NATION</u> Business Address <u>27995 HALSTED RD, FARMINGTON HILLS, MI 48331</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>ANDY FOUNTAIN</b> <b>5937 OAKLAND VALLEY</b> <b>ROCHESTER, MI 48306</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR VICE PRESIDENT</u> Employer <u>PLANT MORAN REALPOINT</u> Business Address <u>3000 TOWN CENTER, STE. 100, SOUTHFIELD, MI 48075</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>PHIL GILCHRIST</b> <b>1130 WELLESLEY DR</b> <b>MT CLEMENS, MI 48043</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>ADVANCING MACOMB</u> Business Address <u>25 N MAIN ST, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>HARRY KURTZ</b> <b>2120 AUTUMN HILL DR</b> <b>ANN ARBOR, MI 48103</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 5,200.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>ANTHONY LENTINE</b> <b>61629 COTSWOLD DR</b> <b>WASHINGTON, MI 48094</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INSURANCE</u> Employer <u>COMPASS CAPITAL</u> Business Address <u>61629 COTSWOLD DR, WASHINGTON, MI 48094</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>CHARLES MANCINI</b> <b>28225 MOUND RD</b> <b>WARREN, MI 48092</b>		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MANCINI, SCHREUDER &amp; KLINE PC</u> Business Address <u>28225 MOUND RD, WARREN, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>PATRICK SIMASKO</b> <b>31204 JEFFERSON AVE</b> <b>ST CLAIR SHORES, MI 48082</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SIMASKO LAW</u> Business Address <u>319 NORTHBOUND GRATIOT AVE, MT CLEMENS, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: <b>ELIEZER TORGOW</b> <b>25311 CURTIS CT</b> <b>OAK PARK, MI 48237</b>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>STERLING GROUP</u> Business Address <u>333 W FORT ST, STE. 1350, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **6,000.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: JACOB TORGOW 333 W FORT ST STE. 1350 DETROIT, MI 48226		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHIEF OPERATING OFFICER</u> Employer <u>STERLING GROUP</u> Business Address <u>333 W FORT ST, STE. 1350, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: MANNY TORGOW 333 W FORT ST STE. 1350 DETROIT, MI 48226		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>STERLING GROUP</u> Business Address <u>333 W FORT ST, STE. 1350, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: YONAH TORGOW 25431 KAREN ST OAK PARK, MI 48237		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE CHAIRMAN</u> Employer <u>STERLING GROUP</u> Business Address <u>333 W FORT ST, STE. 1350, DETROIT, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/13/2024</u>	
Name & Address: LISA WOJNO 32025 MARGARET CT WARREN, MI 48093		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHIEF OPERATING OFFICER</u> Employer <u>NORTHWOOD INC.</u> Business Address <u>25790 COMMERCE DR, MADISON HEIGHTS, MI 48071</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 1,700.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES      4. Date of Receipt <u>03/13/2024</u> Name & Address: <b>KIM ELWARD</b> <b>46658 SAWYER LN</b> <b>MACOMB, MI 48044</b>		\$ <u>1.00</u>	\$ <u>1.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/14/2024</u> Name & Address: <b>PAUL BEMIS</b> <b>54222 RIDGEVIEW DR</b> <b>SHELBY TWP, MI 48316</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS DEVELOPMENT</u> Employer <u>CLARK CONSTRUCTION</u> Business Address <u>2660 SUPERIOR CT, AUBURN HILLS, MI 48326</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/14/2024</u> Name & Address: <b>BRIAN CARROLL</b> <b>18254 MACKAY DR</b> <b>MACOMB, MI 48042</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>BRIAN CARROLL AUTOMOTIVE GROUP</u> Business Address <u>18254 MACKAY DR, MACOMB, MI 48042</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>03/14/2024</u> Name & Address: <b>P. EUGENE D'AGOSTINI</b> <b>38700 VAN DYKE AVE</b> <b>STE. 200</b> <b>STERLING HEIGHTS, MI 48312</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPER</u> Employer <u>D'AGOSTINI LAND COMPANY</u> Business Address <u>38700 VAN DYKE AVE, STE. 200, STERLING HEIGHTS, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **2,401.00**

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

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line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>MICHAEL DEVAULT</b> <b>7910 WALTERS RD</b> <b>LAINGSBURG, MI 48848</b>		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPERINTENDENT</u> Employer <u>MACOMB INTERMEDIATE SCHOOL DISTRICT</u> Business Address <u>44001 GARFIELD RD, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>SALVATORE DIMERCURIO</b> <b>5540 BROOKSIDE LN</b> <b>WASHINGTON, MI 48094</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUILDER</u> Employer <u>GOLDEN HOMES</u> Business Address <u>48661 HAYES RD, SHELBY TWP, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>DAWN DORSCH</b> <b>6743 CRYSTAL CREEK CT</b> <b>WASHINGTON, MI 48094</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE VICE PRESIDENT</u> Employer <u>DENCAPI DENTAL PLANS</u> Business Address <u>45 E MILWAUKEE AVE, DETROIT, MI 48202</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>JAMES GALLOWAY</b> <b>61624 BUNKER HILL DR</b> <b>WASHINGTON, MI 48094</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>JET'S PIZZA</u> Business Address <u>37501 MOUND RD, STERLING HEIGHTS, MI 48310</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 1,700.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>BRANDON GRYSKO</b> <b>31705 W CHICAGO</b> <b>LIVONIA, MI 48150</b>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>FASONE &amp; GRYSKO PLC</u> Business Address <u>41700 SIX MILE RD, NORTHVILLE, MI 48168</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>JOE ORAM</b> <b>P.O. BOX 252755</b> <b>WEST BLOOMFIELD, MI 48325</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADVERTISING</u> Employer <u>5 STAR OUTDOOR</u> Business Address <u>4585 ARLINE DR, WEST BLOOMFIELD, MI 48325</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>SALVATORE RANDAZZO</b> <b>37180 WILLOW LANE</b> <b>CLINTON TOWNSHIP, MI 48036</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>RANDAZZO FRESH MARKETS</u> Business Address <u>49800 HAYES RD, MACOMB, MI 48044</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>ANTHONY RUBINO</b> <b>19857 EMERALD LN N</b> <b>CLINTON TWP, MI 48038</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMERCIAL REAL ESTATE</u> Employer <u>PILOT PROPERTY GROUP</u> Business Address <u>44400 VAN DYKE AVE, STE. 101, STERLING HEIGHTS, MI 48314</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **4,350.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>MICHAEL TORRES</b> <b>5865 JACKELYN CT</b> <b>WASHINGTON, MI 48094</b>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUILDER</u> Employer <u>TORCH DEVELOPMENT GROUP</u> Business Address <u>43900 GARFIELD RD, CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/14/2024</u>	
Name & Address: <b>HENRY FORD HEALTH SYSTEM GOVERNMENT AFFAIRS PAC</b> <b>1414 E MAPLE RD</b> <b>TROY, MI 48083</b>		\$ <u>600.00</u>	\$ <u>600.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/15/2024</u>	
Name & Address: <b>OPERATING ENGINEERS LOCAL 324 PAC</b> <b>500 HULET DR</b> <b>BLOOMFIELD TWP, MI 48302</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/20/2024</u>	
Name & Address: <b>P.O.A.M. - LEGISLATIVE FUND</b> <b>27056 JOY RD</b> <b>REDFORD TWP, MI 48239</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **3,850.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>03/26/2024</u>	
Name & Address: <b>PAUL GLANTZ</b> <b>303 GRAY WOODS LANE</b> <b>LAKE ANGELUS, MI 48326</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>303 MANAGEMENT, INC.</u> Business Address <u>303 GRAY WOODS LANE, LAKE ANGELUS, MI 48326</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/26/2024</u>	
Name & Address: <b>LOCAL 58, IBEW REGISTRARS PAC</b> <b>1358 ABBOTT ST</b> <b>DETROIT, MI 48216</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>03/28/2024</u>	
Name & Address: <b>UAW MICHIGAN V-PAC</b> <b>8000 E JEFFERSON AVE</b> <b>DETROIT, MI 48214</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>03/29/2024</u>	
Name & Address: <b>MATT BAFFO</b> <b>6373 SHADYDALE DR</b> <b>SHELBY TWP, MI 48316</b>		\$ <u>800.00</u>	\$ <u>800.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>FIRST STATE BANK</u> Business Address <u>24300 LITTLE MACK AVE, ST CLAIR SHORES, MI 48080</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 5,050.00

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>04/04/2024</u>	
Name & Address: <b>FRANK TORRE</b> <b>1450 QUARTON RD</b> <b>BLOOMFIELD HILLS, MI 48304</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>SIGNAL RESTORATION SERVICES</u> Business Address <u>2490 INDUSTRIAL ROW DR, TROY, MI 48084</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/29/2024</u>	
Name & Address: <b>FH EVENT CENTER INC DBA FREEDOM HILL BANQUET AND EVENT CENTER</b> <b>42875 GRAND RIVER AVE</b> <b>#201</b> <b>NOVI, MI 48375</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/14/2024</u>	
Name & Address: <b>MATTHEW MOROUN</b> <b>956 LAKE SHORE RD</b> <b>GROSSE POINTE SHORES, MI 48236</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>CENTRAL TRANSPORT</u> Business Address <u>12225 STEPHENS RD, WARREN, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>05/22/2024</u>	
Name & Address: <b>MISSION FIRST PEOPLE ALWAYS PAC (STATE)</b> <b>PO BOX 585</b> <b>SAINT CLAIR SHORES, MI 48080</b>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
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 checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **8,000.00**

Grand Total of All Schedules 1A  
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Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138533  
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 type="checkbox"/> YES	4. Date of Receipt <u>06/17/2024</u>	
Name & Address: <b>ROBERT A HINDMAN</b> <b>49522 KEYCOVE ST</b> <b>NEW BALTIMORE, MI 48047</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide:			
Occupation <u>SALES</u>		Employer <u>AMERICAN GRAPHICS PRINTING CO.</u>	
Business Address <u>34895 GROESBECK HWY, CLINTON TWP, MI 48035</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
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			
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			
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			

Page Subtotal **200.00**

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

**152,151.00**

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line 3a of Summary  
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**ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number **138533**  
2. Committee Name **MARK HACKEL FOR COUNTY EXECUTIVE**

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <b>HUNTINGTON BANK PO BOX 1558 EA1W37 COLUMBUS, OH 43216</b>	Date of Receipt <b>02/29/2024</b>	<input type="checkbox"/> Loan from a Lending Institution <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ <b>0.01</b>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Page Subtotal			<b>0.01</b>
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			<b>0.01</b>

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line 4 of Summary  
Page



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

1. Committee I. D. Number **138533**  
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 <b>MACOMB COUNTY MINISTERIAL ALLIANCE</b>  Address <b>30330 GRATIOT AVE PO BOX 73 ROSEVILLE, MI 48066</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>TABLE AT 2024 MLK CELEBRATION BREAKFAST</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/02/2024</u> Date	\$ <u>475.00</u>
Expenditure #2 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <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>01/02/2024</u> Date	\$ <u>24.00</u>
Expenditure #3 Name <b>VERIZON</b>  Address <b>P.O. BOX 553 WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>CANDIDATE CELL PHONE</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/10/2024</u> Date	\$ <u>273.63</u>
Expenditure #4 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <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>01/16/2024</u> Date	\$ <u>52.00</u>
Expenditure #5 Name <b>MAD HABIT CREATIVE, LLC</b>  Address <b>46793 TWIN CITY TRAIL MACOMB, MI 48044</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>WEBSITE MAINTENANCE JULY-DEC 2023</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/01/2024</u> Date	\$ <u>1,200.00</u>

Subtotal this page **2,024.63**

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

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on line 8a of  
Summary Page



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

1. Committee I. D. Number **138533**  
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 <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <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>02/02/2024</u> Date	\$ <u>24.00</u>
Expenditure #2 Name <b>VERIZON</b>  Address <b>P.O. BOX 553</b> <b>WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>CANDIDATE CELL PHONE</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/14/2024</u> Date	\$ <u>273.67</u>
Expenditure #3 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <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>02/16/2024</u> Date	\$ <u>52.00</u>
Expenditure #4 Name <b>AURTHUR MURRAY STERLING</b>  Address <b>35836 VAN DYKE AVE</b> <b>STERLING HEIGHTS, MI 48312</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>DANCE LESSONS FOR STEPPING OUT WITH THE STARS GAL</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/22/2024</u> Date	\$ <u>2,376.00</u>
Expenditure #5 Name <b>US POSTAL SERVICE</b>  Address <b>155 S MAIN ST</b> <b>MT CLEMENS, MI 48043</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>PO BOX RENEWAL - 1 YEAR</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/26/2024</u> Date	\$ <u>216.00</u>

Subtotal this page **2,941.67**

Grand Total of all Schedules 1B  
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**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **138533**  
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 <b>US POSTAL SERVICE</b>  Address <b>155 S MAIN ST</b> <b>MT CLEMENS, MI 48043</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>POSTAGE FOR EVENT INVITES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>02/26/2024</b> Date	\$ <b>253.20</b>
Expenditure #2 Name <b>US POSTAL SERVICE</b>  Address <b>155 S MAIN ST</b> <b>MT CLEMENS, MI 48043</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>POSTAGE FOR EVENT INVITES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>02/28/2024</b> Date	\$ <b>68.00</b>
Expenditure #3 Name <b>UPS STORE</b>  Address <b>46958 GRATIOT AVE</b> <b>CHESTERFIELD, MI 48051</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>COLOR COPIES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>02/28/2024</b> Date	\$ <b>61.95</b>
Expenditure #4 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>GOOGLE WORKSPACE SUBSCRIPTION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>03/04/2024</b> Date	\$ <b>24.15</b>
Expenditure #5 Name <b>ZETTLE BY PAYPAL</b>  Address <b>ONLINE APPLICATION</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>CREDIT CARD PROCESSOR</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>03/04/2024</b> Date	\$ <b>97.68</b>

Subtotal this page **504.98**

Grand Total of all Schedules 1B  
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**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **138533**  
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 <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>EMAIL MARKETING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>03/18/2024</b> Date	\$ <b>76.00</b>
Expenditure #2 Name <b>VERIZON</b>  Address <b>P.O. BOX 553</b> <b>WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CANDIDATE CELL PHONE</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>03/20/2024</b> Date	\$ <b>280.67</b>
Expenditure #3 Name <b>PAYPAL</b>  Address <b>ONLINE APPLICATION</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>CREDIT CARD TRANSACTION FEES</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>03/27/2024</b> Date	\$ <b>1,583.66</b>
Expenditure #4 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>GOOGLE WORKSPACE SUBSCRIPTION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>04/02/2024</b> Date	\$ <b>21.60</b>
Expenditure #5 Name <b>AMERICAN GRAPHICS PRINTING CO.</b>  Address <b>34895 GROESBECK HWY</b> <b>CLINTON TWP, MI 48035</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>INVITES, ENVELOPES AND MAILING FOR BREAKFAST EVENT</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>04/04/2024</b> Date	\$ <b>3,153.88</b>

Subtotal this page **5,115.81**

Grand Total of all Schedules 1B  
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Summary Page



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

1. Committee I. D. Number **138533**  
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 <b>PRINTING BY JOHNSON</b>  Address <b>21222 CASS AVE CLINTON TWP, MI 48036</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>SIGNS &amp; SPONSOR BOARDS FOR BREAKFAST EVENT</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/04/2024</u> Date	\$ <u>837.00</u>
Expenditure #2 Name <b>PENNA'S OF STERLING</b>  Address <b>38400 VAN DYKE AVE STERLING HEIGHTS, MI 48312</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>VENUE &amp; FOOD FOR 3/14/24 BREAKFAST EVENT</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/04/2024</u> Date	\$ <u>21,330.00</u>
Expenditure #3 Name <b>TURNING POINT</b>  Address <b>76 S MAIN ST MT CLEMENS, MI 48043</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>STEPPING OUT WITH THE STARS GALA - SPONSORSHIP</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/15/2024</u> Date	\$ <u>2,250.00</u>
Expenditure #4 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <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>04/16/2024</u> Date	\$ <u>76.00</u>
Expenditure #5 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <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>05/02/2024</u> Date	\$ <u>21.60</u>

Subtotal this page **24,514.60**

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

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Summary Page





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

1. Committee I. D. Number **138533**  
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 <b>VERIZON</b>  Address <b>P.O. BOX 553</b> <b>WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CANDIDATE CELL PHONE</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>05/08/2024</b> Date	\$ <b>660.33</b>
Expenditure #2 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>EMAIL MARKETING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>05/16/2024</b> Date	\$ <b>76.00</b>
Expenditure #3 Name <b>FOPA LODGE #112</b>  Address <b>33845 24 MILE RD</b> <b>NEW BALTIMORE, MI 48047</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>2024 ANNUAL GOLF OUTING FOURSOME</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>05/31/2024</b> Date	\$ <b>500.00</b>
Expenditure #4 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>GOOGLE WORKSPACE SUBSCRIPTION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/03/2024</b> Date	\$ <b>21.60</b>
Expenditure #5 Name <b>VERIZON</b>  Address <b>P.O. BOX 553</b> <b>WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CANDIDATE CELL PHONE</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/05/2024</b> Date	\$ <b>269.79</b>

Subtotal this page **1,527.72**

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

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

1. Committee I. D. Number **138533**  
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 <b>JOHN JAMES FOR CONGRESS</b>  Address <b>PO BOX 585</b> <b>SAINT CLAIR SHORES, MI 48080</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>CONTRIBUTION REFUND</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/10/2024</u> Date	\$ <u>2,000.00</u>
Expenditure #2 Name <b>MAD HABIT CREATIVE, LLC</b>  Address <b>46793 TWIN CITY TRAIL</b> <b>MACOMB, MI 48044</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>WEBSITE MAINTENANCE</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/10/2024</u> Date	\$ <u>1,462.00</u>
Expenditure #3 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <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>06/17/2024</u> Date	\$ <u>76.00</u>
Expenditure #4 Name <b>UHY ADVISORS MI, INC.</b>  Address <b>12900 HALL RD</b> <b>STE. 500</b> <b>STERLING HEIGHTS, MI 48313</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>ACCOUNTING SERVICES THROUGH 2/15/24</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/21/2024</u> Date	\$ <u>480.00</u>
Expenditure #5 Name <b>GOOGLE</b>  Address <b>ONLINE APPLICATION</b>  <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>07/02/2024</u> Date	\$ <u>21.60</u>

Subtotal this page **4,039.60**

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

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Summary Page



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

1. Committee I. D. Number **138533**  
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 <b>VERIZON</b>  Address <b>P.O. BOX 553</b> <b>WARRENDALE, PA 15086</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CANDIDATE CELL PHONE</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/04/2024</b> Date	\$ <b>199.78</b>
Expenditure #2 Name <b>CONSTANT CONTACT</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>EMAIL MARKETING</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/16/2024</b> Date	\$ <b>76.00</b>
Expenditure #3 Name <b>CALENDAR BRIDGE</b>  Address <b>ONLINE APPLICATION</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>CALENDAR SYNCING SUBSCRIPTION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/19/2024</b> Date	\$ <b>10.00</b>
Expenditure #4 Name <b>FH EVENT CENTER INC DBA FREEDOM HILL BANQUET AND EVENT CENTER</b>  Address <b>42875 GRAND RIVER AVE</b> <b>#201</b> <b>NOVI, MI 48375</b> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>REFUND OF CORPORATE CONTRIBUTION</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/20/2024</b> Date	\$ <b>2,000.00</b>
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 **2,285.78**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **42,954.79**

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**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number **138533**  
2. Committee Name **MARK HACKEL FOR COUNTY EXECUTIVE**

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <b>03/14/2024</b>	4. Number of Individuals Attending or Participating (whichever is greater)  <b>770</b>	5. Type of Fund Raising Activity  <b>BREAKFAST</b>	6. Address and Name (If any) of the place where the activity was held. <b>PENNA'S OF STERLING 38400 VAN DYKE AVE STERLING HEIGHTS, MI 48312</b> <input type="checkbox"/> Private Residence
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7. Total Contributions **150,151.00**  
8. Other Receipts **0.00**  
9. Gross Receipts (Add lines 7 and 8) **150,151.00**  
10. Total Cost of Event **31,385.37**  
(Total Cost 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 Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.