

CANDIDATE COMMITTEE COVER PAGE

FILED 25 JUL 2024 PM 02:49

MACOMB COUNTY CLERK MT. CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

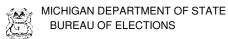
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	¹¹ 01/01/2024 to	07/20/2024	
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.	
138533		HACKEL	MARK		
2. Committee Name		4a. Office Sought Including Dis	•	(If applicable)	
		COUNTY EXECUTIVE,	MACOMB COUNTY		
MARK HACKEL FOR COUNTY EXE	CUTIVE	4b. County of Residence MA	COMB COUNTY		
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address		
12900 HALL RD SUITE 500		HAROLD J BURNS			
STERLING HEIGHTS, MI 48313		1460 KINNEY ROAD			
- · - · · - · · · · · · · · · · · · · ·		MEMPHIS, MI 4804			
Area Code and Phone (586) 254-1040		,			
If the address in this box is different from the comm	ittee				
mailing address on the Statement of Organization, be sent to this address by the filing official.	maii may	Area Code & Phone (586)	206-8110		
7. Treasurer's Business Address		8. Designated Record keeper Designated Record keeper)	s Name and Mailing Address	(If the committee has a	
1460 KINNEY ROAD		APRIL WILSON			
MEMPHIS, MI 48041		19510 COOPER ST	REET		
		CLINTON TOWNSH			
			,		
Area Code and Phone (586) 206-8110		Area Code and Phone (98)	9) 390-1231		
9. TYPE OF STATEMENT		Area Code and Frione	9e. Dissolution of Candid	date Committee	
9a. Pre-Election OR 9b. Post-Election		NLY if candidate ballot for the	By checking this item I	/We certify any outstanding debt	
	current year		by the committee to the car	ndidate or his or her spouse is here	
Pre-Election or Post-Election Statement relates to:	■ July Quar	terly		, and no longer collectible from ittee has no oustanding assets,	
Primary		City	owes no lates fees or has a		
General	October C	Quarterly	Further if the dissolution ca	annot be granted, that this be	
Convention			considered a request for the		
Special	9c.	al Statement (<u>2</u> 024)			
School	Аппа	Coverage Year	Effective date of	dissolution	
	9d. Amen	dment to Campaign Statement			
Caucus	(Comp	plete Item 9a, 9b , 9c or 9e to te which Statement is being	Note: The disposition of res	sidual funds must be reported on	
	amend		Schedule 1B and the Sumr		
Date of Election, Convention or Caucus					
	ence was used	in the preparation of this statem	ent and attached schedules	(if any) and to the best of	
my\our knowledge and belief the contents are true,	accurate and c	omplete.	on and altaoned somedates	in any) and to the best of	
Current Treasurer or		1	Submitted electronically, signature on file	07/25/2024	
Designated Record keeper Type or Print Name		/ Signature	Date	OTTESTES E	
,		<u>-</u>	Submitted electronically,	07/05/0004	
Candidate		1	signature on file Date	07/25/2024	
Type or Print Name		Signature			

1. Committee I.D. Number 138533

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Sumulative tille dicetteri eyele
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 152,151.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 152,151.00	(18.) \$ 154,901.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _0.01	(19.) \$ 6.38
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _152,151.01	(20.) \$ 154,907.38
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 0.00	(21.) \$ 0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0.00	(22.) \$ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 42,954.79	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 42,954.79	(23.) \$ 70,012.38
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligationsa. Owed by the Committee (Schedule 1E)	(12a.) \$ 0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	BALANCE STATEMENT (13.) \$ 490,516.11 (14.) + \$ 152,151.01 (15.) = \$ 642,667.12 (16.) - \$ 42,954.79 (17.) \$ 599,712.33	



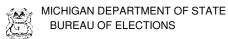
CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 02/09/2024 Name & Address: BENJAMIN ALOIA 54439 WHITE SPRUCE LN SHELBY TWP, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer ALOIA & ASSOCIATES, PC Business Address 48 S MAIN ST, STE. 3, MT CLEMENS, MI 48043	\$2,000.00	_{\$} 2,000.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/09/2024 Name & Address JAMES GEORGE 19634 WESTCHESTER DR CLINTON TWP, MI 48038 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/12/2024 STEPHEN PANGORI 8106 ROSEBUD LN CLARKSTON VLG, MI 48348 5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer ANDERSON, ECKSTEIN & WESTRICK, INC	\$ 500.00	_{\$} 500.00
Occupation PRESIDENT Employer ANDERSON, ECKSTEIN & WESTRICK, INC Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/13/2024 Name & Address WILLIAM B FORREST, III 630 HALF MOON RD BLOOMFIELD HILLS, MI 48301	_{\$} 666.66	_{\$} 666.66
5. If over \$100.00 cumulative, please provide:		
Occupation PARTNER Employer KIENBAUM HARDY VIVIANO PELTON & FORREST PLC		
Business Address 280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	5,166.66	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of 40	Enter this total on line 3a of Summary Page.	



138533 1. Committee I.D. Number

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/13/2024 Name & Address: SCOTT LOCKWOOD 950 SOUTHDOWN RD BLOOMFIELD HILLS, MI 48304 5. If over \$100.00 cumulative, please provide: VICE PRESIDENT ANDERSON ECKSTEIN & WESTBICK INC.	_{\$} 500.00	_{\$} 500.00
Occupation VICE PRESIDENT Business Address Type of Contribution: Direct Direct ANDERSON, ECKSTEIN & WESTRICK, INC ANDERSON, ECKSTEIN & WESTRICK, INC Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/13/2024 Name & Address ERIC PELTON 3260 KERNWAY CT BLOOMFIELD HILLS, MI 48304	_{\$} 666.67	_{\$} 666.67
5. If over \$100.00 cumulative, please provide: Occupation PARTNER Employer KIENBAUM HARDY VIVIANO PELTON & FORREST PLC		
Business Address 280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/13/2024 Name & Address: JOSEPH VIVIANO 11826 FOREST GLEN LN SHELBY TWP, MI 48315	_{\$} 666.67	_{\$} 666.67
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer KIENBAUM HARDY VIVIANO PELTON & FORREST PLC Business Address 280 N OLD WOODWARD AVE, STE. 400, BIRMINGHAM, MI 48009 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/13/2024 Name & Address GORDON WILSON 49572 COMPASS POINT DR NEW BALTIMORE, MI 48047	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation VICE PRESIDENT Employer ANDERSON, ECKSTEIN & WESTRICK, INC		
Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,333.34	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of40	Enter this total on line 3a of Summary Page.	_



138533 1. Committee I.D. Number

Page.

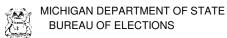
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/14/2024 Name & Address: MICHAEL VIGNERON 8797 IRA RD		data di recesipi,
FAIR HAVEN, MI 48023	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:	·	
Occupation VP, DIRECTOR OF ENGINEERING Employer ANDERSON, ECKSTEIN & WESTRICK, INC		
Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/15/2024 Name & Address		
JASON ARLOW		
5709 ARNOLD RD	\$ 250.00	_{\$} 250.00
MARINE CITY, MI 48039	Ψ	φ
5. If over \$100.00 cumulative, please provide:		
Occupation VICE PRESIDENT Employer ANDERSON, ECKSTEIN & WESTRICK, INC		
Business Address 51301 SCHOENHERR RD, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/15/2024		
Name & Address:		
6303 26 MILE RD	\$ 1,000.00	_{\$} 1,000.00
STE. 200 WASHINGTON, MI 48094		Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT Employer GALLO COMPANIES		
Business Address 6303 26 MILE RD, STE. 200, WASHINGTON, MI 48094		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/15/2024 Name & Address		
THOMAS GUASTELLO		
34120 WOODWARD AVE	_{\$} 1,000.00	1,000.00
BIRMINGHAM, MI 48009	\$ 1,000100	\$_1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT Employer CENTER MANAGEMENT		
Business Address 34120 WOODWARD AVE, BIRMINGHAM, MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,500.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	_1
-, 411	ine sa or Summary	

Page 3 of 40



CANDIDATE COMMITTEE

138533 1. Committee I.D. Number

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/15/2024 Name & Address: STEVEN MANCINI 37532 HIDDEN VALLEY CT CLINTON TWP, MI 48036 5. If over \$100.00 cumulative, please provide: Occupation CEO Employer RIC-MAN CONSTRUCTION	_{\$} 2,000.00	_{\$} 2,000.00
Business Address Type of Contribution: Direct Direc		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/15/2024 Name & Address CHALDEAN CHAMBER PAC 30095 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/16/2024 Name & Address: MICHAEL CHIRCO 6166 WOODBRIDGE DR WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER/BUILDER Employer MJC HOMES	_{\$} 2,000.00	_{\$} 2,000.00
Business Address 46600 ROMEO PLANK RD, STE. 5, MACOMB, MI 48044		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/16/2024 Name & Address DIANE MAGNOLI 6402 BAYPOINT WASHINGTON, MI 48094	\$2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation DEVELOPER Employer MICHAEL ANGELO HOMES		
Business Address 59227 VAN DYKE AVE, WASHINGTON, MI 48094 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	8,000.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 4 of 40	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 02/16/2024 Name & Address: ANTHONY PENNA 37351 WILLOW LANE CLINTON TOWNSHIP, MI 48036	\$2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRINCIPAL Employer PENNA REAL ESTATE GROUP		
Business Address 38600 VAN DYKE AVE, STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/16/2024 Name & Address		
JONATHAN UGVAL	0.000.00	0.000.00
30 HARBOR HILL RD	_{\$} 2,000.00	_{\$} 2,000.00
GROSSE POINTE FARMS, MI 48236		
5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR Employer HOUSE ARREST		
Business Address 16039 E 9 MILE RD, EASTPOINTE, MI 48021		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/19/2024 Name & Address: SIMONE MAURO 5841 CUSICK LAKE DR WASHINGTON, MI 48095 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation OWNER Employer MAURO ENGINEERING		
Business Address 48657 HAYES RD, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/21/2024 Name & Address		
MI BUILDING & CONSTRUCTION TRADES LEGAL, PR AND INDUSTRY DEFENSE FUND 1640 PORTER ST	_{\$} 2,000.00	_{\$} 2,000.00
DETROIT, MI 48216 5. If over \$100.00 cumulative, please provide:		
3. Il over \$100.00 cumulative, please provide.		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	8,000.00	_
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	-

Page 5 of 40



1. Committee I.D. Number 138

138533

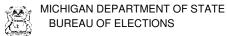
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/22/2024 Name & Address: NICHOLAS AIUTO 41100 CONGER BAY DR HARRISON TWP, MI 48045	\$2,000.00	
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer NICK'S TOWING Business Address 42870 N WALNUT ST, MT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/22/2024 Name & Address KEVIN DENHA 3916 MT VERNON DR BLOOMFIELD HILLS, MI 48301	\$2,000.00	_{\$} _2,000.00
5. If over \$100.00 cumulative, please provide: Occupation MANAGING DIRECTOR Employer VISION INVESTMENT SERVICES		
Business Address 700 N OLD WOODWARD AVE, STE. 300, BIRMINGHAM, MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/22/2024 Name & Address: ANTHONY LOMBARDO 56075 KEN CHARLES DR SHELBY TWP, MI 48316	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation BUILDER/DEVELOPER Employer LOMBARDO HOMES		
Business Address 13001 23 MILE RD, STE. 200, SHELBY TWP, MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address DONALD AMBOYER 54367 QUEENS ROW SHELBY TWP, MI 48316	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide:		
Occupation SPECIAL PROJECT ADVISOR Employer MACOMB COUNTY		
Business Address 1 S. MAIN ST., MOUNT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	6 400 00	1
Grand Total of All Schedules 1A	6,400.00	-
(Complete on last page of Schedule)	Enter this total on	J

Page 6 of 40



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address: JOE BALLOR 50383 HEATHERWOOD LN SHELBY TWP, MI 48317	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer JOE BALLOR TOWING INC. Business Address 24050 28 MILE RD, RAY, MI 48096 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address LEONARD BUGAJEWSKI 16982 STEWART CT CLINTON TWP, MI 48038	\$ 400.00	<u>\$ 400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer LEONARD'S SYRUPS Business Address 4601 NANCY ST., HAMTRAMCK, MI 48212 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address: KENNETH DECOCK 80575 HOLMES RD ARMADA, MI 48005	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation FARMER Employer SELF EMPLOYED Business Address 20555 23 MILE RD, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address THERESA DOAN 3453 SHERWOOD RD BRANDON TWP, MI 48462	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation SOCIAL RESPONSIBILITY DIRECTOR Employer GENISYS CREDIT UNION		
Business Address 17498 HALL RD, CLINTON TWP, MI 48038 Type of Contribution: Direct Loan from a person Fund Raiser	1.000.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,200.00	

Page 7 of 40



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address: AMANDA GOODSPEED 39475 W 13 MILE RD NOVI, MI 48377	\$800.00	_{\$} 800.00
5. If over \$100.00 cumulative, please provide: Occupation CONSTRUCTION Employer GRANGER CONSTRUCTION Business Address 39475 W 13 MILE RD, NOVI, MI 48377 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address AMY MCMILLAN 13000 HIGHRIDGE DR BRIGHTON, MI 48114	\$200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR Employer HURON CLINTON METRO PARKS Business Address 13000 HIGHRIDGE DR, BRIGHTON, MI 48114 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address: JOHN JAMES 54339 RIDGEVIEW DR SHELBY TWP, MI 48316	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation U.S. CONGRESSMAN (MI-10) Employer U.S. HOUSE OF REPRESENTATIVES Business Address 1309 LONGWORTH HOUSE OFFICE BUILDING, WASHINGTON, DC 20515 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address JUDY PRITCHETT 62823 TOURNAMENT DR WASHINGTON, MI 48094	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page Subtotal	3,200.00 Enter this total on line 3a of Summary Page.	-



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 02/23/2024 Name & Address: DAVID ROBINSON 2840 SEVERN LN BLOOMFIELD HILLS, MI 48304	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer JVIS USA		
Business Address 52048 SHELBY PKWY, SHELBY TWP, MI 48315 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address		
KURTIS WILDER 25999 PETROS BLVD NOVI, MI 48375	_{\$} 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer BUTZEL LONG		
Business Address 150 W JEFFERSON AVE, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/23/2024		
Name & Address: DIANE YOUNG 13250 IRVINGTON DR WARREN, MI 48088	<u>\$</u> 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation FINANCIAL PLANNER Employer ARROWROOT FAMILY OFFICE		
Business Address 725 BARCLAY CIR, STE. 215, ROCHESTER HILLS, MI 48307		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? Types 4 Date of Receipt 02/23/2024		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address CHARLENE ZEZAWA 3221 W BIG BEAVER RD STE. 305 TROY, MI 48084 5. If over \$100.00 cumulative, please provide:	_{\$} 400.00	_{\$} 400.00
Occupation ADMINISTRATOR Employer SMACNA DETROIT		
Business Address 3221 W BIG BEAVER RD, STE. 305, TROY, MI 48084		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,000.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 9 of 40	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/23/2024 Name & Address: MICHIGAN LABORERS' POLITICAL LEAGUE PAC 1118 CENTENNIAL WAY STE. 100 LANSING, MI 48917 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address GEORGE BARNES 30980 WENDBROOK LN BEVERLY HILLS, MI 48025	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer HERITAGE VISION PLANS Business Address ONE WOODWARD AVE., STE. 2020, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address: LISA UPTON 11303 GREENDALE DR. STERLING HEIGHTS, MI 48312	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE ASSISTANT Employer UTICA COMMUNITY SCHOOLS Business Address 11303 GREENDALE DR, STERLING HEIGHTS, MI 48312 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address THOMAS BROAD 37980 CHARTIER ST HARRISON TWP, MI 48045	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation CEO Employer MIDWEST STEEL INC		
Business Address 2525 E GRAND BLVD, DETROIT, MI 48211		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	4 400 00	<u> </u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,400.00 Enter this total on	
10 40	line 3a of Summary	

Page 10 of 40



138533 1. Committee I.D. Number

Page.

CANDIDATE COMMITTEE

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.	6. Amount	7. Cumulative for
middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	o. Amount	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address:	·	data 0.1.550.pt/
LESONIA FORTE 1643 FRANKLIN ST		
ANN ARBOR, MI 48103	, 200.00	, 200.00
5. If over \$100.00 cumulative, please provide:	<u>\$</u>	\$
Occupation ASSOCIATE DIRECTOR, STATE OUTREACH Employer UNIVERSITY OF MICHIGAN, GOVERNMENT RELATIONS		
Business Address 2345 RUTHVEN BUILDING, 1109 GEDDESS AVE., ANN ARBOR, MI 49109		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address		
DONALD KOSNIK		
17414 MERGANSER DR	, 2,000.00	_{\$} 2,000.00
CLINTON TWP, MI 48038	Φ	\$,00000
5. If over \$100.00 cumulative, please provide:		
Occupation CFO Employer COLASANTI CONSTRUCTION SERVICES		
Business Address 24500 WOOD CT, MACOMB, MI 48042		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/26/2024		
Name & Address:		
12 WINDEMERE PL	_{\$} 400.00	_{\$} 400.00
GROSSE POINTE FARMS, MI 48236	*	\$ 100100
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address Direct		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address		
DENNIS MORIER		
12861 WARD ST	§ 500.00	\$ 500.00
SOUTHGATE, MI 48195	\$000.00	\$_000.00
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR ACCOUNT MANAGER Employer TMR & ASSOCIATES		
Business Address 601 ABBOTT ST, DETROIT, MI 48226		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	3,100.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	-

Page 11 of 40



1. Committee I.D. Number

138533

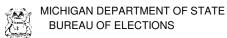
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address: HEATHER OBRECHT WHITE 1752 FLAGSTONE CIR ROCHESTER, MI 48307 5. If over \$100.00 cumulative, please provide: Occupation ARCHITECT Employer AUGER, KLEIN, ALLER ARCHITECTS	_{\$} 200.00	_{\$} 200.00
Occupation ARCHITECT Business Address Type of Contribution: Direct Direct Direct Direct AUGER, KLEIN, ALLER ARCHITECTS AUGER, KLEIN, ALLER ARCHITECTS AUGER, KLEIN, ALLER ARCHITECTS Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address BRIAN PILARSKI 1319 ALAMEDA BLVD TROY, MI 48085	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation COMMERCIAL INSURANCE Employer KAPNICK INSURANCE Business Address 769 CHICAGO RD, STE. 300, TROY, MI 48083 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address: JAMES SAWYER 45810 PRIVATE SHORE DR NEW BALTIMORE, MI 48051	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer MACOMB COMMUNITY COLLEGE Business Address 14500 TWELVE MILE RD, WARREN, MI 48088 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address SUSAN SHOPINSKI 320 CHURCH ST MT CLEMENS, MI 48043	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE ASSISTANT Employer NEW IMAGE BUILDING SERVICES Business Address 320 CHURCH ST, MT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,000.00 Enter this total on line 3a of Summary	-

Page 12 of 40



1. Committee I.D. Number

138533

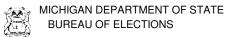
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address: SCOTT SOBCZYK 19641 HANNA ST MELVINDALE, MI 48122	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER Employer TMR & ASSOCIATES Business Address 601 ABBOTT ST, DETROIT, MI 48226		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address CRAIG WOLANIN 303 E 3RD ST STE. 300 ROCHESTER, MI 48307 5. If over \$100.00 cumulative, please provide:	\$ <u>400.00</u>	<u>\$ 400.00</u>
Occupation CORPORATE DEVELOPMENT Employer FRANK REWOLD & SONS		
Occupation Strict Stric		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/26/2024 Name & Address: FRIENDS OF MCLAREN PAC 1731 BLUE GRASS RD LANSING, MI 48906 5. If over \$100.00 cumulative, please provide:	_{\$} 600.00	_{\$} 600.00
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address THOMAS ALONGI 1748 LEXINGTON DR TROY, MI 48084	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA Employer UHY, LLP		
Business Address 12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 13 of 40



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

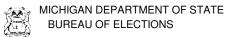
1. Committee I.D. Number ____138533

MADIZ I.I

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? YES 4. Date of Receipt 02/27/2024 Name & Address: GEORGE BARNES 30980 WENDBROOK LN BEVERLY HILLS, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer HERITAGE VISION PLANS Business Address ONE WOODWARD AVE., STE. 2020, DETROIT, MI 48226	_{\$} 200.00	_{\$} 400.00
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address JAMES BURTON 13368 BANBURY CT SHELBY TWP, MI 48315	\$ 400.00	<u>\$ 400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation ENGINEER Employer HUBBELL, ROTH & CLARK, INC. Business Address 555 HULET DR, BLOOMFIELD HILLS, MI 48302 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address: THOMAS CALLAN, III 5865 LAHSER RD BLOOMFIELD HILLS, MI 48301	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation CPA Employer UHY, LLP Business Address 27725 STANSBURY, FARMINGTON HILLS, MI 48334 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address THOMAS GUASTELLO 34120 WOODWARD AVE BIRMINGHAM, MI 48009	_{\$} 200.00	_{\$_} 1,200.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer CENTER MANAGEMENT Business Address 34120 WOODWARD AVE, BIRMINGHAM, MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 14 of 40	1,000.00 Enter this total on line 3a of Summary Page.	-



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

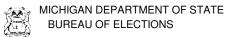
138533 1. Committee I.D. Number

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? YES 4. Date of Receipt 02/27/2024 Name & Address: JOSHUA KIRKBRIDE 71134 OAKTREE LN BRUCE TWP, MI 48065	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA Employer UHY, LLP		
Business Address 12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address		
ALBERT LORENZO		
37281 WOODSIDE LN	_{\$} 600.00	_{\$} 600.00
CLINTON TWP, MI 48036		
5. If over \$100.00 cumulative, please provide:		
Occupation DEPUTY COUNTY EXECUTIVE Employer MACOMB COUNTY		
Business Address 1 S. MAIN, 8TH FLOOR, MOUNT CLEMENS, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/27/2024		
Name & Address:		
33563 ADDISON DR.	\$2,000.00	_{\$} 2,000.00
NEW BALTIMORE, MI 48047		Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation PRINCIPAL, VICE PRESIDENT Employer ZOLMAN RESTORATION		
Business Address 3285 MARTIN RD, WARREN, MI 48092		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address		
JOSEPH VICARI		
37523 HIDDEN VALLEY CT	, 2,000.00	, 2,000.00
CLINTON TWP, MI 48036	\$ _,000.00	\$_2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer ANDIAMO RESTAURANT GROUP		
Business Address 7096 E 14 MILE RD, WARREN, MI 48092		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	4,800.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	.l
15 10	line 3a of Summary	

Page 15 of 40



1. Committee I.D. Number 1385

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 02/27/2024 Name & Address: JEFFREY WHITE 12856 BELLE RIVER RD MEMPHIS, MI 48041	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation CHIEF Employer RICHMOND LENOX EMS Business Address 34505 32 MILE RD, RICHMOND, MI 48062 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? ✓ YES 4. Date of Receipt 02/27/2024 Name & Address DETROIT REGIONAL CHAMBER PAC 1 WOODWARD AVE STE. 1900 DETROIT, MI 48226 5. If over \$100.00 cumulative, please provide:	\$_2,000.00	_{\$} 2,000.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/27/2024 Name & Address: MITA PAC PO BOX 1640 OKEMOS, MI 48805 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/28/2024 Name & Address JOSEPH GIACALONE 39283 W ROYAL DOULTON BLVD CLINTON TWP, MI 48038	_{\$} 1,000.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer GCH MACHINERY		
Business Address 13301 E 8 MILE RD, WARREN, MI 48089		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	5,200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Scriedule)	Enter this total on	=

 $_{\text{Page}}\underline{16}_{\text{ of }}\underline{40}$



1. Committee I.D. Number ____

138533

Page.

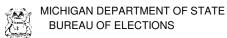
CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 02/28/2024 Name & Address: GUY RIZZO		
65 MACOMB PL	000 00	000 00
STE. F	_{\$} 600.00	_{\$} 600.00
MT CLEMENS, MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation BUILDER Employer SELF EMPLOYED		
Business Address 65 MACOMB PL, STE. F, MT CLEMENS, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/28/2024 Name & Address		
RONALD A SYME, JR.		
38690 LONG ST	200.00	_{\$} 200.00
HARRISON TWP, MI 48045	<u>\$</u> 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation PROJECT ARCHITECT Employer WAKELY & ASSOCIATES		
Business Address 30500 VAN DYKE AVE, STE. 209, WARREN, MI 48093		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/28/2024 Name & Address:		
ALAN YOUNG	400.00	
7310 WOODWARD AVE	_{\$} 100.00	_{\$} 100.00
DETROIT, MI 48202	· · · · · · · · · · · · · · · · · · ·	φ
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/29/2024		
Name & Address ———————————————————————————————————		
2742 RHODES DR	0 000 00	0 000 00
TROY, MI 48083	_{\$} 2,000.00	_{\$_} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation IT Employer METRO TECHNOLOGIES		
Business Address 59 N WALNUT ST, ST. 202, MT CLEMENS, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,900.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
17 40	line 3a of Summary	

Page 17 of 40



1. Committee I.D. Number

138533

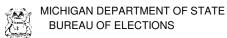
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address: GREGORY PIEPRZAK 6201 ST CLAIR HWY EAST CHINA, MI 48054	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation VP FIELD OPERATIONS Employer T R PIEPRZAK COMPANY Business Address 6267 ST CLAIR HWY, EAST CHINA, MI 48054 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address STEPHEN R SAPH, JR 68 CLINTON ST. MOUNT CLEMENS, MI 48043	\$_2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation INSURANCE SALES Employer NICKEL & SAPH Business Address 44 MACOMB PL, MT CLEMENS, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address: DANA SCHMITT 1058 E TIENKEN RD ROCHESTER HILLS, MI 48306	§ 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide:		
Occupation SPORTS EXECUTIVE, ATTORNEY Employer GENERAL SPORTS BASEBALL, LLC		
Business Address 400 WATER ST, STE. 250, ROCHESTER, MI 48307 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address ELLEN SCHREUDER 5290 GRAYTON ST DETROIT, MI 48224	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer MANCINI, SCHREODER, KLINE, PC		
Business Address 28225 MOUND RD, WARREN, MI 48092		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	3,300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
4.0	line On of Comments	

Page 18 of 40



1. Committee I.D. Number

138533

Page.

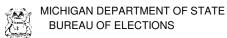
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address: MONICA TERRACCIANO 1900 CHRISTENBURY CT ROCHESTER HILLS, MI 48306	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER ARTEVA HOMES		
Business Address 425 S MAIN ST, STE. 101, ROCHESTER, MI 48307 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/29/2024 Name & Address DUSTY WELSH 6633 18 MILE RD STERLING HEIGHTS, MI 48314	\$200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EIR Employer VELOCITY PURCHASING Business Address 6633 18 MILE RD, STERLING HEIGHTS, MI 48314 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/01/2024 JOSEPH BUSHWAY 36815 PUTNAM ST CLINTON TWP, MI 48035	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation CONTRACTOR Employer ADAMO GROUP Business Address 320 SEVEN MILE E, DETROIT, MI 48203 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/01/2024 Name & Address VINCENZO CRISPIGNANI 529 CHASE LN BLOOMFIELD HILLS, MI 48304	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation REAL ESTATE DEVELOPMENT Employer J.V.C. DEVELOPMENT LLC		
Business Address 44250 GARFIELD RD, STE. 164, CLINTON TWP, MI 48038 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ 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 19 of 40



SCHEDULE 1A

CANDIDATE COMMITTEE

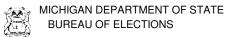
1. Committee I.D. Number ____138533

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/01/2024 Name & Address: LOUIS STRAMAGLIA 1630 BARON CT ROCHESTER HILLS, MI 48307	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? FYES 4. Date of Receipt 03/01/2024 Name & Address AT&T MICHIGAN PAC 221 N WASHINGTON SQUARE LANSING, MI 48933	_{\$} 200.00	_{\$} 450.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/02/2024 Name & Address: DONALD AMBOYER 54367 QUEENS ROW SHELBY TWP, MI 48316 5. If over \$100.00 cumulative, please provide:	\$ 500.00	_{\$} 900.00
Occupation SPECIAL PROJECT ADVISOR Employer MACOMB COUNTY		
Business Address 1 S. MAIN ST., MOUNT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address EUGENE GARGARO 22 RENAUD RD GROSSE POINTE SHORES, MI 48236	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation CHAIRMAN Employer DETROIT INSTITUTE OF ARTS		
Business Address 5200 WOODWARD AVE, DETROIT, MI 48202 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

 $_{\text{Page}}\underline{20}_{\text{ of }}\underline{40}$



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

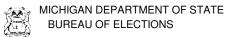
138533 1. Committee I.D. Number

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? YES 4. Date of Receipt 03/04/2024 Name & Address: JANET IBARRA 26277 WOODLAND DR	0.000.00	2 000 00
NEW BALTIMORE, MI 48051	_{\$} 2,000.00	\$ 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation LEGAL ADMINISTRATOR Employer O'REILLY RANCILIO, P.C.		
Business Address 12900 HALL RD, STE. 350, STERLING HEIGHTS, MI 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address		
MICHAEL MALONE 46352 CANDLEBERRY DR NEW BALTIMORE, MI 48047	\$ <u>2,000.00</u>	\$ 2,000.00
5. If over \$100.00 cumulative, please provide: PARTNERS IN ARCHITECTURE		
Occupation PRESIDENT Employer PARTNERS IN ARCHITECTURE		
Business Address 65 MARKET ST, MT CLEMENS, MI 48043		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address: F. SCOTT MILLER 1598 STONY CREEK DR ROCHESTER, MI 48307	\$ 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA Employer UHY, LLP		
Business Address 12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address KEVIN MOORE 601 ABBOTT ST DETROIT, MI 48226	_{\$} 500.00	_{\$} _500.00
5. If over \$100.00 cumulative, please provide:		
Occupation DIRECTOR OF SALES & ANALYTICS Employer TMR & ASSOCIATES		
Business Address 601 ABBOTT ST, DETROIT, MI 48226		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	4,700.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
\ 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		

Page 21 of 40



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address: MICHAEL MUELLER 1250 S OXFORD RD GROSSE POINTE WOODS, MI 48236	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation VICE PRESIDENT Employer TMR & ASSOCIATES Business Address 601 ABBOTT ST, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address JACK OLIVER 27333 MEADOWBROOK RD NOVI, MI 48377	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR Employer OLIVER/HATCHER CONSTRUCTION Business Address 27333 MEADOWBROOK RD, NOVI, MI 48377 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address: CHASE ROBL 24854 TROMBLEY ST HARRISON TWP, MI 48045	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer FEMMININEO ATTORNEYS Business Address 110 S MAIN ST, MT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address MANOJ SETHI 6154 GRAEBEAR TRAIL EAST LANSING, MI 48823	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation ENGINEER Employer DLZ MICHIGAN, INC. Business Address 1425 KEYSTONE AVE, LANSING, MI 48911 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,900.00 Enter this total on	

Page 22 of 40

line 3a of Summary Page.



138533 1. Committee I.D. Number

CANDIDATE COMMITTEE

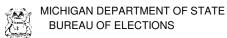
2. Committee Name

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? YES 4. Date of Receipt 03/04/2024 Name & Address: JOSEPH SUIDA 53248 SUMMER ELM DR SHELBY TWP, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer	_{\$} 200.00	_{\$} 200.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/04/2024 Name & Address MICHIGAN REGIONAL COUNCIL OF CARPENTERS PAC 11687 AMERICAN ST STE. 200 DETROIT, MI 48204 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$2,000.00	_{\$} 2,000.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/05/2024 Name & Address: JOHN DOLAN 22600 HALL RD STE. 205 CLINTON TWP, MI 48036 5. If over \$100.00 cumulative, please provide:	_{\$} 200.00	_{\$} 200.00
Occupation ATTORNEY Business Address 22600 HALL RD, STE. 205, CLINTON TWP, MI 48036 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/05/2024 Name & Address S. ELIOT WEINER 553 W FRANK ST BIRMINGHAM, MI 48009 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation PRESIDENT Employer EDW C LEVY CO		
Business Address 8800 DIX AVE, DETROIT, MI 48209 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,400.00 Enter this total on	

Page 23 of 40

line 3a of Summary Page.



1. Committee I.D. Number

138533

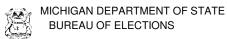
CANDIDATE COMMITTEE

2. Committee Name

MARK HACKEL FOR COUNTY EXECUTIVE

		7.0 1 :: (
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? YES 4. Date of Receipt 03/06/2024	·	
Name & Address:		
6321 GRATIOT AVE		
ST CLAIR, MI 48079	2,000.00	_{\$} 2,000.00
	<u>*</u>	Φ
5. If over \$100.00 cumulative, please provide: Occupation CONSTRUCTION Employer PAMAR ENTERPRISES INC		
Business Address 31604 PAMAR CT, NEW HAVEN, MI 48048		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/06/2024 Name & Address		
HAROLD BURNS		
1460 KINNEY RD	£ 1,200.00	_{\$} 1,200.00
MEMPHIS, MI 48041	\$ <u>'</u>	\$ 1,200.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA Employer UHY LLP		
Business Address 12900 HALL RD, STE. 500, STERLING HEIGHTS, MI 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/06/2024 Name & Address:		
FAUSTO DELELLIS	200 00	000.00
52675 TUSCANY GROVE	_{\$} 200.00	_{\$} 200.00
SHELBY TWP, MI 48315		·
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer_		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/06/2024		
Name & Address ROBERT KIRK		
19500 HALL RD		
STE. 100	_{\$} 2,000.00	_{\$} 2,000.00
CLINTON TWP, MI 48038		Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation PARTNER Employer KIRK, HUTH, LANGE & BADALAMENTI PLC		
Business Address 19500 HALL RD, STE. 100, CLINTON TWP, MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	5,400.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	_1
04 40	line 3a of Summary	

Page 24 of 40



SCHEDULE 1A

1. Committee I.D. Number 138

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 03/06/2024 Name & Address: LISA UPTON 11303 GREENDALE DR. STERLING HEIGHTS, MI 48312	_{\$} 200.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE ASSISTANT Employer UTICA COMMUNITY SCHOOLS Business Address 11303 GREENDALE DR, STERLING HEIGHTS, MI 48312 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/06/2024 Name & Address DETROIT AUTO DEALERS ASSOCIATION PAC 1900 W BIG BEAVER RD TROY, MI 48084	\$ 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/07/2024 PAUL ARAGONA 5440 ORION RD ROCHESTER, MI 48306	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation REAL ESTATE INVESTOR Employer HOLIDAY ENTERPRISES Business Address 37020 GARFIELD RD, T-1, CLINTON TWP, MI 48036 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/07/2024 Name & Address MARK JOHNSTON 1020 GREENTREE RD BLOOMFIELD HILLS, MI 48304	_{\$} 2,000.00	_{\$_} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer AJAX PAVING Business Address 1957 CROOKS RD, STE. A, TROY, MI 48084		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	6,200.00	
Grand Total of All Schedules 1A		•

 $_{\text{Page}}\underline{25}_{\text{of}}\underline{40}$

dule) Enter ti line 3a



1. Committee I.D. Number 138

138533

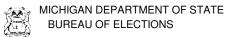
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/07/2024 Name & Address: JIM SAFIEDINE 4767 STONELEIGH RD BLOOMFIELD TWP, MI 48302	\$2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer SAFIEDINE OIL COMPANY Business Address 30401 UTICA RD, ROSEVILLE, MI 48066 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/07/2024 Name & Address LEONARD SALVAGGIO 625 LAKE SHORE RD GROSSE POINTE SHORES, MI 48236	\$ 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer NINO SALVAGGIO MARKETS Business Address 27900 HARPER AVE, SAINT CLAIR SHORES, MI 48080 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/07/2024 BRICKLAYERS LOCAL NO 1 MICHIGAN PAC 21301 RYAN RD WARREN, MI 48091 5. If over \$100.00 cumulative, please provide:	\$ 400.00	_{\$} 400.00
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? VES 4. Date of Receipt 03/07/2024 Name & Address HNTB HOLDINGS LTD PAC 715 KIRK DR KANSAS CITY, MO 64105	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,600.00 Enter this total on	

 $_{\text{Page}}\underline{26}_{\text{ of }}\underline{40}$



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/08/2024 Name & Address: JOE FERRO 5082 SEVEN LAKES DR S WASHINGTON, MI 48095	_{\$} 300.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide: Occupation MEMBER Employer F&M EXCAVATING, LLC Business Address 2201 HAMLIN RD, SHELBY TWP, MI 48317 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/08/2024 Name & Address EDDIE JAWAD 19040 24 MILE RD MACOMB, MI 48042	\$ 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer JAWAD GROUP INVESTMENT Business Address 46820 NORTH AVE, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/08/2024 ANGELO LANNI 7040 VALLEY GREEN WASHINGTON, MI 48094	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer FLORENCE CEMENT COMPANY Business Address 51515 CORRIDOR, SHELBY TWP, MI 48315 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/08/2024 Name & Address RAYMOND LOPE 8459 HALL RD UTICA, MI 48317	_{\$} 400.00	_{\$} 400.00
5. If over \$100.00 cumulative, please provide: Occupation FUNERAL DIRECTOR Employer WM SULLIVAN & SON FUNERAL HOME Business Address 8459 HALL RD, UTICA, MI 48317 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	3,700.00 Enter this total on	

 $_{\text{Page}}\underline{27}_{\text{of}}\underline{40}$

line 3a of Summary Page.



1. Committee I.D. Number 1385

138533

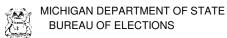
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/08/2024 Name & Address: PATRICK ROUSE 8313 MILL POINTE CT GOODRICH, MI 48438	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR Employer MACOMB COMMUNITY COLLEGE Business Address 14500 TWELVE MILE RD, WARREN, MI 48088 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/08/2024 Name & Address ANTHONY SOAVE 423 LAKE SHORE RD GROSSE POINTE FARMS, MI 48236	_{\$} 500.00	§ 500.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer SOAVE ENTERPRISES Business Address 3400 E LAFAYETTE ST, DETROIT, MI 48207 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? VES 4. Date of Receipt 03/08/2024 WASTE MANAGEMENT EMPLOYEES BETTER GOV'T FUND OF MI 48797 ALPHA DR WIXOM, MI 48393	\$2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/09/2024 Name & Address PLUMBERS LOCAL 98 PAC 700 TOWER DR STE. 300 TROY, MI 48098 5. If over \$100.00 cumulative, please provide: Occupation Employer	§400.00	_{\$} 400.00
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	3,100.00 Enter this total on	

 $_{\text{Page}}\underline{28}_{\text{of}}\underline{40}$



SCHEDULE 1A

1. Committee I.D. Number 1385

138533

CANDIDATE COMMITTEE

Committee Name

MARK HACKEL FOR COUNTY EXECUTIVE

Enter contribution: and address. It confirmations is from an individual, enter last name, tirist name, from the middle initial. Check box to indicate in contributions in part contributions from an individual, enter last name, tirist name, from the middle initial. Check box to indicate in contributions in part contributions of an analysis of amount. A contribution 1		1 - 1	
Name & Address Name & Address		6. Amount	Contributor (Through
Occupation CEO Employer FIRST STATE BANK Business Address 24300 LITTLE MACK AVE, ST CLAIR SHORES, MI 48080 Type of Contribution: Direct Loan from a person V Fund Raiser 3. Contribution #2 PAC Receipt? VYES 4. Date of Receipt 03/11/2024 Name & Address PLUNKETT COONEY PAC 38565 WOODWARD AVE STE. 2000 BLOOMFIELD HILLS, MI 48304 5. If voer \$100.00 cumulative, please provide: Occupation Employer Employer Employer Loan from a person V Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address GREGORY IACOBELLI \$2,000.00 \$2,000.	Name & Address: MARK JANSEN 16015 HARVEST SPRING LN	_{\$} 200.00	_{\$} 200.00
Business Address Type of Contribution:			
Type of Contribution: □ Direct □ Loan from a person ▼ Fund Raiser 3. Contribution #2 PAC Receipt? ▼YES			
3. Contribution #2 PAC Receipt? VES 4. Date of Receipt 03/11/2024 Name & Address PLUNKETT COONEY PAC 38505 WOODWARD AVE STE. 2000 BLOOMFIELD HILLS, MI 48304 5. If over \$100.00 cumulative, please provide: Occupation Family Pack Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address Type of Contribution: Direct Loan from a person Verund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Sagage CHRISTY DR NEW BALTIMORE, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER Employer ACADIA HOMES Business Address 55110 WOLVERINE DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Verund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Verund Raiser Page Subtotal (Grand Total of Schedule) Oracle on Isst page of Schedule) Oracle on Isst page of Schedule)			
Name & Address PLUNKETT COONEY PAC 38505 WOODWARD AVE STE. 2000 BLOOMFIELD HILLS, MI 48304 5. If your \$100.00 cumulative, please provide: CocupationEmployer	2 Court work a person		
38505 WOODWARD AVE STE. 2000 STE. 2000 SLOOMFIELD HILLS, MI 48304 5. If over \$100.00 cumulative, please provide: Cocupation			
Business Address Type of Contribution: Direct Loan from a person	38505 WOODWARD AVE STE. 2000 BLOOMFIELD HILLS, MI 48304	\$ 1,000.00	_{\$} 1,000.00
Type of Contribution: Direct Loan from a person V Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/2024 SARING & Address: GREGORY IACOBELLI 53639 CHRISTY DR NEW BALTIMORE, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER Employer ACADIA HOMES Business Address 55110 WOLVERINE DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person V Fund Raiser 3. Contribution # PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person V Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	Occupation Employer		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Same & Address: GREGORY IACOBELLI 53639 CHRISTY DR NEW BALTIMORE, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER Employer ACADIA HOMES Business Address 55110 WOLVERINE DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	Business Address		
Name & Address: GREGORY IACOBELLI 53639 CHRISTY DR NEW BALTIMORE, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation DEVELOPER Employer ACADIA HOMES Business Address 55110 WOLVERINE DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal (Complete on last page of Schedule) A 13,400.00	Type of Contribution: Direct Loan from a person Fund Raiser		
Occupation DEVELOPER Employer ACADIA HOMES Business Address 55110 WOLVERINE DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal (Grand Total of All Schedules 1A (Complete on last page of Schedule)	Name & Address: GREGORY IACOBELLI 53639 CHRISTY DR	_{\$} 2,000.00	_{\$} 2,000.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	5. If over \$100.00 cumulative, please provide:		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	Occupation DEVELOPER Employer ACADIA HOMES		
3. Contribution # 4 Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)			
Name & Address JOHN KAPOUSIS 4893 CRYSTAL CREEK LN WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal (Complete on last page of Schedule) Grand Total of All Schedules 1A (Complete on last page of Schedule)	Type of Contribution: Direct Loan from a person Fund Raiser		
Occupation AUTO RECYCLER Employer G&T AUTO PARTS Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	JOHN KAPOUSIS 4893 CRYSTAL CREEK LN	_{\$} 200.00	_{\$} 200.00
Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047 Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	5. If over \$100.00 cumulative, please provide:		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	Occupation AUTO RECYCLER Employer G&T AUTO PARTS		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 3,400.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)	Business Address 54525 GRATIOT AVE, NEW BALTIMORE, MI 48047		
Grand Total of All Schedules 1A (Complete on last page of Schedule)			
(Complete on last page of Schedule)	Page Subtotal	3,400.00	
		Enterolleia ()	

Page 29 of 40



138533 1. Committee I.D. Number

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address: STEPHEN RABAUT 53281 PONDVIEW DR SHELBY TWP, MI 48315	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer SELF EMPLOYED Business Address 16931 19 MILE RD, CLINTON TWP, MI 48038 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address JEFFREY SCHRODER 1592 E LINCOLN ST BIRMINGHAM, MI 48009	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer PLUNKETT COONEY Business Address 28505 WOODWARD AVE., BLOOMFIELD HILLS, MI 48304 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/12/2024 Name & Address: DANIEL STYS 55231 BRETON WOODS DR MACOMB, MI 48042	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation PROFESSIONAL ENGINEER Employer PEA GROUP Business Address 58105 VAN DYKE AVE, WASHINGTON, MI 48094 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? VES 4. Date of Receipt 03/12/2024 Name & Address SHEET METAL WORKERS LOCAL 80 PAC 17100 W 12 MILE RD SOUTHFIELD, MI 48076	_{\$} 600.00	_{\$} 600.00
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	2,000.00 Enter this total on	

 $_{\text{Page}}\underline{30}_{\text{ of }}\underline{40}$

line 3a of Summary Page.



1. Committee I.D. Number

138533

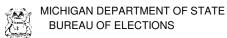
CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 03/13/2024 Name & Address: DAVID CLARK		
418 MONTCLAIR WAY MILFORD TWP, MI 48381	, 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:	Ψ	•
Occupation CONCERT PROMOTER Employer LIVE NATION		
Business Address 27995 HALSTED RD, FARMINGTON HILLS, MI 48331		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address		
ANDY FOUNTAIN	0 000 00	0.000.00
5937 OAKLAND VALLEY ROCHESTER, MI 48306	\$ 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR VICE PRESIDENT Employer PLANT MORAN REALPOINT		
Business Address 3000 TOWN CENTER, STE. 100, SOUTHFIELD, MI 48075		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/13/2024		
Name & Address: PHIL GILCHRIST		
1130 WELLESLEY DR	_{\$} 200.00	_{\$} 200.00
MT CLEMENS, MI 48043	· 	φ
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE DIRECTOR Employer ADVANCING MACOMB		
Business Address 25 N MAIN ST, MT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address		
HARRY KURTZ 2120 AUTUMN HILL DR	4 000 00	4 000 00
ANN ARBOR, MI 48103	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person 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	_1

Page 31 of 40



CANDIDATE COMMITTEE

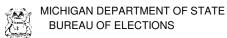
138533 1. Committee I.D. Number

MARK HACKEL FOR COUNTY EXECUTIVE 2. Committee Name

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? YES 4. Date of Receipt 03/13/2024 Name & Address: ANTHONY LENTINE 61629 COTSWOLD DR WASHINGTON, MI 48094	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation INSURANCE Employer COMPASS CAPITAL		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address CHARLES MANCINI 28225 MOUND RD WARREN, MI 48092	_{\$} 1,500.00	_{\$} 1,500.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer MANCINI, SCHREUDER & KLINE PC Business Address 28225 MOUND RD, WARREN, MI 48092		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address: PATRICK SIMASKO 31204 JEFFERSON AVE ST CLAIR SHORES, MI 48082	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer SIMASKO LAW Business Address 319 NORTHBOUND GRATIOT AVE, MT CLEMENS, MI 48043 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address ELIEZER TORGOW 25311 CURTIS CT OAK PARK, MI 48237	_{\$} 500.00	_{\$} _500.00
5. If over \$100.00 cumulative, please provide:		
Occupation CEO Employer STERLING GROUP		
Business Address 333 W FORT ST, STE. 1350, DETROIT, MI 48226		
Type of Contribution: Direct Loan from a person Fund Raiser	Γ	
Page Subtotal	6,000.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Forton della total	_

 $_{\text{Page}}\underline{32}_{\text{of}}\underline{40}$

Enter this total on line 3a of Summary



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address: JACOB TORGOW 333 W FORT ST STE. 1350 DETROIT, MI 48226 5. If over \$100.00 cumulative, please provide: Occupation CHIEF OPERATING OFFICER Employer STERLING GROUP Business Address 333 W FORT ST, STE. 1350, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser	_{\$} 500.00	_{\$} 500.00
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address MANNY TORGOW 333 W FORT ST STE. 1350 DETROIT, MI 48226 5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer STERLING GROUP	\$ 500.00	_{\$} 500.00
Business Address 333 W FORT ST, STE. 1350, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address: YONAH TORGOW 25431 KAREN ST OAK PARK, MI 48237	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE CHAIRMAN Employer STERLING GROUP Business Address 333 W FORT ST, STE. 1350, DETROIT, MI 48226 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address LISA WOJNO 32025 MARGARET CT WARREN, MI 48093	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation CHIEF OPERATING OFFICER Employer NORTHWOOD INC. Business Address 25790 COMMERCE DR, MADISON HEIGHTS, MI 48071 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,700.00 Enter this total on	-

 $_{\text{Page}}\underline{33}_{\text{ of }}\underline{40}$

line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

138533 1. Committee I.D. Number

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/13/2024 Name & Address: KIM ELWARD 46658 SAWYER LN MACOMB, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 1.00	_{\$} 1.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address PAUL BEMIS 54222 RIDGEVIEW DR SHELBY TWP, MI 48316	\$ 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation BUSINESS DEVELOPMENT Employer CLARK CONSTRUCTION Business Address 2660 SUPERIOR CT, AUBURN HILLS, MI 48326 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/14/2024 BRIAN CARROLL 18254 MACKAY DR MACOMB, MI 48042	\$200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer BRIAN CARROLL AUTOMOTIVE GROUP Business Address 18254 MACKAY DR, MACOMB, MI 48042 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address P. EUGENE D'AGOSTINI 38700 VAN DYKE AVE STE. 200 STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation DEVELOPER Employer D'AGOSTINI LAND COMPANY Business Address 38700 VAN DYKE AVE, STE. 200, STERLING HEIGHTS, MI 48312 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	2,401.00 Enter this total on line 3a of Summary	

Page 34 of 40



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 03/14/2024 Name & Address: MICHAEL DEVAULT 7910 WALTERS RD LAINGSBURG, MI 48848 5. If over \$100.00 cumulative, please provide: Occupation SUPERINTENDENT Employer MACOMB INTERMEDIATE SCHOOL DISTRICT	_{\$} 300.00	_{\$} 300.00
Business Address 44001 GARFIELD RD, CLINTON TWP, MI 48038 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address SALVATORE DIMERCURIO 5540 BROOKSIDE LN WASHINGTON, MI 48094	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation BUILDER Employer GOLDEN HOMES Business Address 48661 HAYES RD, SHELBY TWP, MI 48315 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address: DAWN DORSCH 6743 CRYSTAL CREEK CT WASHINGTON, MI 48094	<u>\$</u> 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE VICE PRESIDENT Employer DENCAP DENTAL PLANS Business Address 45 E MILWAUKEE AVE, DETROIT, MI 48202 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address JAMES GALLOWAY 61624 BUNKER HILL DR WASHINGTON, MI 48094	_{\$} 1,000.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer JET'S PIZZA		
Business Address 37501 MOUND RD, STERLING HEIGHTS, MI 48310 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,700.00	

Page 35 of 40



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 03/14/2024 Name & Address: BRANDON GRYSKO 31705 W CHICAGO LIVONIA, MI 48150	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation LAWYER Employer FASONE & GRYSKO PLC Business Address 41700 SIX MILE RD, NORTHVILLE, MI 48168 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address JOE ORAM P.O. BOX 252755 WEST BLOOMFIELD, MI 48325	\$2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation ADVERTISING Employer 5 STAR OUTDOOR Business Address 4585 ARLINE DR, WEST BLOOMFIELD, MI 48325 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address: SALVATORE RANDAZZO 37180 WILLOW LANE CLINTON TOWNSHIP, MI 48036	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer RANDAZZO FRESH MARKETS Business Address 49800 HAYES RD, MACOMB, MI 48044 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/14/2024 Name & Address ANTHONY RUBINO 19857 EMERALD LN N CLINTON TWP, MI 48038	_{\$} 200.00	_{\$} _200.00
5. If over \$100.00 cumulative, please provide: Occupation COMMERCIAL REAL ESTATE Employer PILOT PROPERTY GROUP Business Address 44400 VAN DYKE AVE, STE. 101, STERLING HEIGHTS, MI 48314 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,350.00 Enter this total on	-

 $_{\text{Page}}\underline{36}_{\text{ of }}\underline{40}$



SCHEDULE 1A

1. Committee I.D. Number

138533

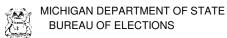
CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 03/14/2024 Name & Address: MICHAEL TORRES 5865 JACKELYN CT WASHINGTON, MI 48094	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation BUILDER Employer TORCH DEVELOPMENT GROUP Business Address 43900 GARFIELD RD, CLINTON TWP, MI 48038 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? VES 4. Date of Receipt 03/14/2024 Name & Address HENRY FORD HEALTH SYSTEM GOVERNMENT AFFAIRS PAC 1414 E MAPLE RD TROY, MI 48083	\$ 600.00	<u>\$ 600.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? VES 4. Date of Receipt 03/15/2024 Name & Address: OPERATING ENGINEERS LOCAL 324 PAC 500 HULET DR BLOOMFIELD TWP, MI 48302	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/20/2024 Name & Address P.O.A.M LEGISLATIVE FUND 27056 JOY RD REDFORD TWP, MI 48239	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	3,850.00	
Grand Total of All Schedules 1A	0,000.00	-
(Complete on last page of Schedule)	Enter this total on	J

Page 37 of 40



SCHEDULE 1A

1. Committee I.D. Number 1385

138533

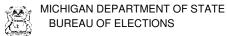
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/26/2024 Name & Address: PAUL GLANTZ 303 GRAY WOODS LANE LAKE ANGELUS, MI 48326	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer 303 MANAGEMENT, INC. Business Address 303 GRAY WOODS LANE, LAKE ANGELUS, MI 48326 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? VES 4. Date of Receipt 03/26/2024 Name & Address LOCAL 58, IBEW REGISTRARS PAC 1358 ABBOTT ST DETROIT, MI 48216 5. If over \$100.00 cumulative, please provide:	\$ 2,000.00	_{\$} 2,000.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 03/28/2024 UAW MICHIGAN V-PAC 8000 E JEFFERSON AVE DETROIT, MI 48214	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/29/2024 Name & Address MATT BAFFO 6373 SHADYDALE DR SHELBY TWP, MI 48316	\$800.00	_{\$} 800.00
5. If over \$100.00 cumulative, please provide:		
Occupation VICE PRESIDENT FIRST STATE BANK		
Business Address 24300 LITTLE MACK AVE, ST CLAIR SHORES, MI 48080		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	5,050.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

 $_{\text{Page}}\underline{38}_{\text{ of }}\underline{40}$



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 04/04/2024 Name & Address: FRANK TORRE 1450 QUARTON RD BLOOMFIELD HILLS, MI 48304	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer SIGNAL RESTORATION SERVICES Business Address 2490 INDUSTRIAL ROW DR, TROY, MI 48084 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/29/2024 Name & Address FH EVENT CENTER INC DBA FREEDOM HILL BANQUET AND EVENT CENTER 42875 GRAND RIVER AVE #201 NOVI, MI 48375 5. If over \$100.00 cumulative, please provide:	_{\$} 2,000.00	_{\$} 2,000.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/14/2024 Name & Address: MATTHEW MOROUN 956 LAKE SHORE RD GROSSE POINTE SHORES, MI 48236	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer CENTRAL TRANSPORT Business Address 12225 STEPHENS RD, WARREN, MI 48089 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/22/2024 Name & Address MISSION FIRST PEOPLE ALWAYS PAC (STATE) PO BOX 585 SAINT CLAIR SHORES, MI 48080	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	8,000.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	8,000.00	-

 $_{\text{Page}}\underline{39}_{\text{ of }}\underline{40}$



1. Committee I.D. Number

138533

CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/17/2024 Name & Address: ROBERT A HINDMAN 49522 KEYCOVE ST NEW BALTIMORE, MI 48047	_{\$} 200.00	° 200.00
5. If over \$100.00 cumulative, please provide: Occupation SALES Employer AMERICAN GRAPHICS PRINTING CO.	\$ <u></u>	\$
Business Address 34895 GROESBECK HWY, CLINTON TWP, MI 48035		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	-	
	\$	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization
,		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	000.00	
Page Subtotal	200.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)	152,151.00 Enter this total on	

 $_{\text{Page}}\underline{40}_{\text{ of }}\underline{40}$



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	2. Committee Name 5. Type of Receipt	6. Amount
Receipt #1	Date of Receipt 02/29/2024	Loan from a Lending Institution	
Name & Address: HUNTINGTON BANK		Interest	\$ <u>0.01</u>
PO BOX 1558 EA1W37 COLUMBUS, OH 43216		Refund \Rebate	
	Fund Raiser	Other (Specify)	
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest	\$
		Refund \Rebate Click	for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #3 Name & Address:	Date of Receipt	_ Loan from a Lending Institution	
		Interest	\$
		Refund \Rebate Click	for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest	\$
			for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #5 I	Date of Receipt	Loan from a Lending Institution	
Name & Address.		Interest	\$
		Refund \Rebate Click	for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #6 Da Name & Address:	te of Receipt	Loan from a Lending Institution	
		Interest	\$
		Refund \Rebate Click	for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #7 Da Name & Address:	tte of Receipt	Loan from a Lending Institution	•
		Interest	\$
		Refund \Rebate	for Memo Itemization Type
	Fund Raiser	Other (Specify)	
		Page	Subtotal 0.01
		Grand Total of All Schedule (Complete on last page of Sc	

Enter this total on line 4 of Summary Page

Page 1 of 1



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		1	
Name MACOMB COUNTY MINISTERIAL ALLIANCE		01/02/2024	\$ 475.00
Address	TABLE AT 2024 MLK CELEBRATION BREAKFAST Purpose:	Date	<u> 170.00</u>
30330 GRATIOT AVE	- Tarposo.		
PO BOX 73			
ROSEVILLE, MI 48066	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name GOOGLE		01/02/2024	\$ 24.00
Address	GOOGLE WORKSPACE SUBSCRIPTION Purpose:	Date	
ONLINE APPLICATION			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name VERIZON		01/10/2024	. 070.00
Address	Purpose: CANDIDATE CELL PHONE	Date	\$ <u>273.63</u>
P.O. BOX 553	Purpose:		
WARRENDALE, PA 15086			
_	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name CONSTANT CONTACT		01/16/2024	50.00
Address	Purpose: EMAIL MARKETING	Date	\$ <u>52.00</u>
ONLINE APPLICATION	Purpose:		
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name MAD HABIT CREATIVE, LLC		00/04/0004	
·		02/01/2024	\$ 1,200.00
Address 46793 TWIN CITY TRAIL	Purpose: WEBSITE MAINTENANCE JULY-DEC 2023	Date	
MACOMB, MI 48044			
<u> </u>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	<u>.</u>	
	Subto	tal this page	2,024.63
	Grand Total of all S	Schedules 1B	
	(Complete on last page		



1. Committee I. D. Number

138533

2. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GOOGLE Address ONLINE APPLICATION	Purpose: GOOGLE WORKSPACE SUBSCRIPTION	02/02/2024 Date	\$ <u>24.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name VERIZON Address P.O. BOX 553	Purpose: CANDIDATE CELL PHONE	02/14/2024 Date	\$ <u>273.67</u>
WARRENDALE, PA 15086 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name CONSTANT CONTACT Address ONLINE APPLICATION	Purpose: EMAIL MARKETING	02/16/2024 Date	\$ <u>52.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name AURTHUR MURRAY STERLING Address 35836 VAN DYKE AVE	Purpose:	02/22/2024 Date	\$ 2,376.00
STERLING HEIGHTS, MI 48312	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name US POSTAL SERVICE Address 155 S MAIN ST MT CLEMENS, MI 48043	Purpose: PO BOX RENEWAL - 1 YEAR	02/26/2024 Date	\$ <u>216.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	tol this	0.044.07
		tal this page	2,941.67
	Grand Total of all S (Complete on last page		



1. Committee I. D. Number

138533

Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name US POSTAL SERVICE		02/26/2024	\$ <u>253.20</u>
Address 155 S MAIN ST	Purpose: POSTAGE FOR EVENT INVITES	Date	
MT CLEMENS, MI 48043			
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name US POSTAL SERVICE		02/28/2024	\$ 68.00
Addross	Purpose: POSTAGE FOR EVENT INVITES	Date	
Address 155 S MAIN ST	Fulpose.		
MT CLEMENS, MI 48043			
Find Driver	Check box if this expenditure is payment of debt or obligation reported on previous		
✓ Fund Raiser	statement		
Expenditure #3			
Name UPS STORE		02/28/2024	\$ 61.95
Address	Purpose: COLOR COPIES	Date	
46958 GRATIOT AVE	Т игросс.		
CHESTERFIELD, MI 48051			
· · · · · · · · · · · · · · · · · · ·	Check box if this expenditure is payment of		
□- ·- ·	debt or obligation reported on previous		
✓ Fund Raiser	statement		
Expenditure #4			
Name GOOGLE			
GOOGLE		03/04/2024	\$ 24.15
Address	Purpose:	Date	Ψ <u>ZT.13</u>
ONLINE APPLICATION	Purpose:		
ONLINE ALL LIGATION			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Statement		
Expenditure #5			
Name ZETTLE BY PAYPAL		03/04/2024	
	Purpose: CREDIT CARD PROCESSOR		\$ 97.68
Address ONLINE ADDITION	Purpose:	Date	· -
ONLINE APPLICATION			
	Chack have if this averaged in the constant of		
_	Check box if this expenditure is payment of debt or obligation reported on previous		
✓ Fund Raiser	statement		
	Subtat	tal this page	E04.00
	Subtot	L. IIIIO Page	504.98
	Grand Total of all S	Schedules 1B	
	(Complete on last page	of Schedule)	



1. Committee I. D. Number

138533

. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CONSTANT CONTACT Address ONLINE APPLICATION	Purpose: EMAIL MARKETING	03/18/2024 Date	\$ 76.00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name VERIZON Address P.O. BOX 553	Purpose: CANDIDATE CELL PHONE	03/20/2024 Date	\$ <u>280.67</u>
WARRENDALE, PA 15086 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name PAYPAL Address ONLINE APPLICATION	Purpose: CREDIT CARD TRANSACTION FEES	03/27/2024 Date	\$ <u>1,583.66</u>
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name GOOGLE Address ONLINE APPLICATION	Purpose: GOOGLE WORKSPACE SUBSCRIPTION	04/02/2024 Date	\$ <u>21.60</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name AMERICAN GRAPHICS PRINTING CO. Address 34895 GROESBECK HWY CLINTON TWP, MI 48035	Purpose:	04/04/2024 Date	\$ <u>3,153.88</u>
✓ Fund Raiser	debt or obligation reported on previous statement	tal this page	E 11E 01
	Grand Total of all S (Complete on last page	Schedules 1B	5,115.81



1. Committee I. D. Number

138533

2. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name PRINTING BY JOHNSON	SIGNS & SPONSOR BOARDS FOR BREAKFAST EVENT	04/04/2024 Date	\$ <u>837.00</u>
Address 21222 CASS AVE CLINTON TWP, MI 48036	Purpose:		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name PENNA'S OF STERLING		04/04/2024 Date	\$ <u>21,330.00</u>
Address 38400 VAN DYKE AVE STERLING HEIGHTS, MI 48312	Purpose: VENUE & FOOD FOR 3/14/24 BREAKFAST EVENT	Date	
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name TURNING POINT		04/15/2024	\$ 2,250.00
Address 76 S MAIN ST MT CLEMENS ML48042	Purpose: STEPPING OUT WITH THE STARS GALA - SPONSORSHIP	Date	
MT CLEMENS, MI 48043			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name CONSTANT CONTACT		04/16/2024	\$ 76.00
Address ONLINE APPLICATION	Purpose: EMAIL MARKETING	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name GOOGLE		05/02/2024	
Address ONLINE APPLICATION	Purpose: GOOGLE WORKSPACE SUBSCRIPTION	Date	\$ <u>21.60</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	24,514.60
	Grand Total of all 9 (Complete on last page		



1. Committee I. D. Number

138533

. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name VERIZON		05/08/2024	
VERTIZON			\$ <u>660.33</u>
Address	Purpose: CANDIDATE CELL PHONE	Date	
P.O. BOX 553	,		
WARRENDALE, PA 15086			
,	Check box if this expenditure is payment of		
Drugg Patron	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name CONSTANT CONTACT		05/16/2024	70.00
OCNOTANT OCNTACT			\$ 76.00
Address	Purpose: EMAIL MARKETING	Date	
ONLINE APPLICATION			
ONLINE AT LIGHTION			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name FOPA LODGE #112		05/31/2024	\$ 500.00
	2024 ANNUAL GOLF OUTING FOURSOME	Date	\$ <u>300.00</u>
Address 33845 24 MILE RD	Purpose:	Bato	
NEW BALTIMORE, MI 48047			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name GOOGLE			
GOOGLE		06/03/2024	\$ 21.60
Address	Purpose:	Date	Ψ <u>Z 1.00</u>
ONLINE APPLICATION	Purpose:		
ONLINE ALL EIGATION			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Statement		
Expenditure #5			
Name VERIZON		06/05/2024	
• • •	Purpose: CANDIDATE CELL PHONE		\$ 269.79
Address P.O. BOX 553	Purpose:	Date	
WARRENDALE, PA 15086	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subtot	al this page	1,527.72
		13 -	1,561.16
	Grand Total of all S		
	(Complete on last page	of Schedule)	



1. Committee I. D. Number

138533

. Committee Name MARK HACKEL FOR COUNTY EXECUTIVE

CANDIDATE COMMINITTEE 2. C	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name JOHN JAMES FOR CONGRESS		06/10/2024	\$ 2,000.00
Address PO BOX 585	Purpose: CONTRIBUTION REFUND	Date	<u> </u>
SAINT CLAIR SHORES, MI 48080			
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name MAD HABIT CREATIVE, LLC		06/10/2024	\$ 1,462.00
Address 46793 TWIN CITY TRAIL MACOMB, MI 48044	Purpose: WEBSITE MAINTENANCE	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name CONSTANT CONTACT		06/17/2024	\$ 76.00
Address ONLINE APPLICATION	Purpose: EMAIL MARKETING	Date	<u> </u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name UHY ADVISORS MI, INC.		06/21/2024	\$ 480.00
Address 12900 HALL RD STE. 500	Purpose: ACCOUNTING SERVICES THROUGH 2/15/24	Date	100.00
STERLING HEIGHTS, MI 48313	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name GOOGLE			
Address ONLINE APPLICATION	Purpose: GOOGLE WORKSPACE SUBSCRIPTION	07/02/2024 Date	\$ <u>21.60</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	4,039.60
Grand Total of all Schedules 1B (Complete on last page of Schedule)			



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 VERIZON Address P.O. BOX 553 WARRENDALE, PA 15086	Purpose: CANDIDATE CELL PHONE	07/04/2024 Date	\$ <u>199.7</u> 8
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name CONSTANT CONTACT Address ONLINE APPLICATION	Purpose: EMAIL MARKETING	07/16/2024 Date	\$ <u>76.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name CALENDAR BRIDGE Address ONLINE APPLICATION	Purpose: CALENDAR SYNCING SUBSCRIPTION	07/19/2024 Date	\$ <u>10.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name	Purpose:REFUND OF CORPORATE CONTRIBUTION	07/20/2024 Date	\$ 2,000.00
#201 NOVI, MI 48375 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name			\$
Address Fund Raiser	Purpose: Click F Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	temization Type
	Subto	tal this page	2,285.78

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

42,954.79



Page 1 of 1

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 138533

2 Committee Name

MARK HACKEL FOR COUNTY EXECUTIVE

	2. 00111	mittee Name	
	- USE A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. PENNA'S OF STERLING
03/14/2024	770	BREAKFAST	38400 VAN DYKE AVE STERLING HEIGHTS, MI 483 Private Residence
. Total Contributions	150,151.00)	
. Other Receipts	0.00		
. Gross Receipts (Add lines	7 and 8) $150,151.00$)	
0. Total Cost of Event Fotal Cost includes In-Kind (31,385.37 Contributions and All Expenditures	Made For the Event)	
1. Check if event was a	joint fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)
_	_		
	_		
period covered by the Receipts and expend Schedule (1A), Itemiz Summary Page.	uired to file a separate Fund Raise e Campaign Statement. litures listed on a Fund Raiser Sch zed In-Kind Contributions Schedul participated in a joint fund raiser r	nedule must also be reported one (1-IK), Itemized Expenditure	on the Itemized Contributions s Schedule (1B) and the