



FILED

25 JUL 2024 PM 01:52

OAKLAND COUNTY CLERK
PONTIAC, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 04/22/2024 to 07/21/2024

1. Committee I.D. Number

98456

2. Committee Name

ELECT BARB PALLOTTA FOR COUNTY CLERK

5. Committee's Mailing Address

**P.O. BOX 7036
NOVI, MI 48376**

Area Code and Phone (248) 561-5055
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

4. Candidate Last Name

PALLOTTA

First Name

BARBARA

M.I.

A

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

COUNTY CLERK/REGISTER OF DEEDS, OAKLAND COUNTY

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

6. Treasurer's Name & Residential Address

**DAVID STAUDT
43155 MAIN STREET
STE. 2210 E.
NOVI, MI 48375**

Area Code & Phone (248) 561-5055

7. Treasurer's Business Address

**43155 MAIN STREET
STE. 2210 E.
NOVI, MI 48375**

Area Code and Phone (248) 561-5055

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

Area Code and Phone () -

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

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

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

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement ()
Coverage Year

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

Date of Election, Convention or Caucus

08/06/2024

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/25/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/25/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 98456

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>13,130.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>13,130.00</u>	(18.) \$ <u>13,130.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>13,130.00</u>	(20.) \$ <u>13,130.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,038.10</u>	(21.) \$ <u>1,038.10</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>5,962.27</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>4.10</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>5,966.37</u>	(23.) \$ <u>5,966.37</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>10,567.69</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>13,130.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>13,130.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>5,966.37</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>7,163.63</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>05/10/2024</u>	
Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348		\$ <u>6,000.00</u>	\$ <u>6,370.46</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/22/2024</u>	
Name & Address: DEBRA OESTREICH 33621 ARGONNE RD FARMINGTON HILLS, MI 48335		\$ <u>100.00</u>	\$ <u>100.00</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? ☐ YES	4. Date of Receipt <u>05/26/2024</u>	
Name & Address: DAVID STAUDT 23715 NILAN DR NOVI, MI 48375		\$ <u>100.00</u>	\$ <u>100.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2024</u>	
Name & Address: AMY UTYCH 3624 DUKESHIRE HWY ROYAL OAK, MI 48073		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **6,300.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>05/31/2024</u> Name & Address: ETHAN UTYCH 3624 DUKESHIRE HWY ROYAL OAK, MI 48073		\$ <u>100.00</u>	\$ <u>100.00</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 #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/10/2024</u> Name & Address: SANDRA CAROLAN 1161 HARBOR COVE NOVI, MI 48377		\$ <u>15.00</u>	\$ <u>15.00</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? ☐ YES 4. Date of Receipt <u>06/10/2024</u> Name & Address: CAOLYN KIRIN 7430 MACEDAY LAKE RD WATERFORD TWP, MI 48329		\$ <u>20.00</u>	\$ <u>20.00</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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/10/2024</u> Name & Address: ROBERT UTYCH 3624 DUKESHIRE HWY ROYAL OAK, MI 48073		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **235.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>06/12/2024</u>	
Name & Address: KATHLEEN KUBIK 3420 BUSS DR COMMERCE TWP, MI 48390		\$ <u>25.00</u>	\$ <u>25.00</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 #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/12/2024</u>	
Name & Address: LINDA SZEHOWYCZ 23471 HILLVIEW CT FARMINGTON, MI 48335		\$ <u>100.00</u>	\$ <u>100.00</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? ☐ YES	4. Date of Receipt <u>06/13/2024</u>	
Name & Address: MARTHA USZTAN 2483 SPYGLASS DR OAKLAND TWP, MI 48363		\$ <u>50.00</u>	\$ <u>50.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/17/2024</u>	
Name & Address: MARYELLEN FRAYNE 1011 RICHARDS RD DUBUQUE, IA 52003		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 225.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>06/17/2024</u> Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, MI 00000</u> Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser		\$ <u>4,000.00</u>	\$ <u>10,567.69</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/18/2024</u> Name & Address: JAMES PERRY 337 ALKMAAR ST ELLENTON, FL 34222 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/29/2024</u> Name & Address: FRANK TAUBE 2455 LAKE ANGELUS RD LAKE ANGELUS, MI 48326 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/03/2024</u> Name & Address: EUGENE GREENSTEIN 32433 OLDE FRANKLIN DR FARMINGTON HILLS, MI 48334 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal **4,650.00**

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

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/04/2024</u> Name & Address: JANUSZ BORA 6320 WALKER DR TROY, MI 48085		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/11/2024</u> Name & Address: KAREN NUNHEIMER 16268 GREENLY ST HOLLAND, MI 49424		\$ <u>20.00</u>	\$ <u>20.00</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? ☐ YES 4. Date of Receipt <u>07/17/2024</u> Name & Address: JANE BOYER 5530 NORTHCREST CT CLARKSTON VLG, MI 48346		\$ <u>65.00</u>	\$ <u>65.00</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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/17/2024</u> Name & Address: JOHN DOLAN 18671 DELAWARE AVE REDFORD TWP, MI 48240		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 535.00

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>07/17/2024</u> Name & Address: MATT MARKO 1222 FOREST BAY DR WATERFORD TWP, MI 48328		\$ <u>65.00</u>	\$ <u>65.00</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 #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/17/2024</u> Name & Address: DEBRA OESTREICH 33621 ARGONNE RD FARMINGTON HILLS, MI 48335		\$ <u>120.00</u>	\$ <u>220.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING CONTENT STRATEGY</u> Employer <u>OESTREICH STRATEGY</u> Business Address <u>33621 ARGONNE RD, FARMINGTON HILLS, MI 48335</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/17/2024</u> Name & Address: TERESA RENAUD 30857 CENTENNIAL DR NOVI, MI 48377		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DISTRICT DIRECTOR</u> Employer <u>MICHIGAN STATE SENATE</u> Business Address <u>201 TOWNSEND ST, LANSING, MI 48933</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/17/2024</u> Name & Address: RONALD RITCHIE 4643 EDDYSTONE CIR CLARKSTON VLG, MI 48346		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNT MANAGER</u> Employer <u>KARMAX</u> Business Address <u>1805 BOWERS RD, LAPEER, MI 48446</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **585.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

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 <u>07/18/2024</u> Name & Address: LISA BJORK 845 WOODSIDE CT ORION TWP, MI 48359		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/18/2024</u> Name & Address: DIANE FISHER 158 NOTTINGHAM DR TROY, MI 48085		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/18/2024</u> Name & Address: SCOTT SAIONZ 4221 KENT RD ROYAL OAK, MI 48073		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>N/A</u> Business Address <u>N/A, N/A, MI 00000</u> 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 _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **600.00**

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

13,130.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **98456**

CANDIDATE COMMITTEE

2. Committee Name **ELECT BARB PALLOTTA FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: N/A N/A, N/A, MI 00000 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description ELECTION FILING FEE 5. Date Of Receipt: 04/22/2024 6. Vendor Name & Address: OAKLAND COUNTY CLERK 1200 N TELEGRAPH, PONTIAC, MI 48341	\$ 100.00	\$ 100.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: N/A N/A, N/A, MI 00000 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description POLITICAL PARTY EVENT 5. Date Of Receipt: 04/29/2024 6. Vendor Name & Address: OCRP 42611 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304	\$ 270.46	\$ 370.46
Contribution #3 PAC Receipt? ☐ Yes Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: N/A N/A, N/A, MI 00000 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description CAMPAIGN PHOTOGRAPHY 5. Date Of Receipt: 05/10/2024 6. Vendor Name & Address: WINSHIP PHOTOGRAPHY STUDIO 7183 N MAIN ST, STE. A, INDEPENDENCE TWP, MI 48346	\$ 99.00	\$ 6,469.46

Page Subtotal **469.46** **0.00**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **98456**

CANDIDATE COMMITTEE

2. Committee Name **ELECT BARB PALLOTTA FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Business Address: N/A N/A, N/A, MI 00000 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description POLITICAL PARTY EVENT 5. Date Of Receipt: 05/15/2024 6. Vendor Name & Address: OCRP 42611 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304	\$ 73.23	\$ 6,542.69
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: N/A N/A, N/A, MI 00000 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description CAMPAIGN TRAINING 5. Date Of Receipt: 05/26/2024 6. Vendor Name & Address: FACL 101 WASHINGTON ST, FREDERICKSBURG, VA 22405	\$ 25.00	\$ 6,567.69
Contribution #3 PAC Receipt? ☐ Yes Name & Address: SARA GETZ 1210 SMITH AVE ROYAL OAK, MI 48073 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description THANK YOU CARDS 5. Date Of Receipt: 06/11/2024 6. Vendor Name & Address: VISUAL AUTHORITY 700 E BIG BEAVER RD, STE. F, TROY, MI 48083	\$ 42.38	\$ 42.38

Page Subtotal **140.61** **6,567.69**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **98456**

CANDIDATE COMMITTEE

2. Committee Name **ELECT BARB PALLOTTA FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: SARA GETZ 1210 SMITH AVE ROYAL OAK, MI 48073 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description BUTTONS 5. Date Of Receipt: 06/15/2024 6. Vendor Name & Address: VISUAL AUTHORITY 700 E BIG BEAVER RD, STE. F, TROY, MI 48083	\$ 46.97	\$ 89.35
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: TED GETZ 1210 SMITH AVE ROYAL OAK, MI 48073 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description LABEL STICKERS 5. Date Of Receipt: 06/15/2024 6. Vendor Name & Address: VISUAL AUTHORITY 700 E BIG BEAVER RD, STE. F, TROY, MI 48083	\$ 63.83	\$ 63.83
Contribution #3 PAC Receipt? ☐ Yes Name & Address: TED GETZ 1210 SMITH AVE ROYAL OAK, MI 48073 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description CANDY FOR PARADE 5. Date Of Receipt: 06/29/2024 6. Vendor Name & Address: WALLGREENS 1815 S ROCHESTER RD, ROYAL OAK, MI 48073	\$ 11.93	\$ 75.76

Page Subtotal **122.73** **89.35**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **98456**

CANDIDATE COMMITTEE

2. Committee Name **ELECT BARB PALLOTTA FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: TED GETZ 1210 SMITH AVE ROYAL OAK, MI 48073 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description CANDY FOR PARADE 5. Date Of Receipt: 07/01/2024 6. Vendor Name & Address: WALLGREENS 1815 S ROCHESTER RD, ROYAL OAK, MI 48073	\$ 5.30	\$ 81.06
☐ Fund Raiser Contribution			
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: ANDREW RACKOWSKI 3204 MCCLURE TROY, MI 48084 If over \$100.00 cumulative, please provide: Occupation: PRESIDENT Employer Name & Address: VISUAL AUTHORITY 700 E. BIG BEAVER, STE. F, TROY, MI 48083	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description BANNER 5. Date Of Receipt: 07/03/2024 6. Vendor Name & Address: VISUAL AUTHORITY 700 E BIG BEAVER RD, STE. F, TROY, MI 48083	\$ 200.00	\$ 200.00
☐ Fund Raiser Contribution			
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ANDREW RACKOWSKI 3204 MCCLURE TROY, MI 48084 If over \$100.00 cumulative, please provide: Occupation: PRESIDENT Employer Name & Address: VISUAL AUTHORITY 700 E. BIG BEAVER, STE. F, TROY, MI 48083	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description SIGN STAKES 5. Date Of Receipt: 07/03/2024 6. Vendor Name & Address: VISUAL AUTHORITY 700 E BIG BEAVER RD, STE. F, TROY, MI 48083	\$ 100.00	\$ 300.00
☐ Fund Raiser Contribution			

Page Subtotal **305.30** **381.06**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **1,038.10**

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **98456**
2. Committee Name **ELECT BARB PALLOTTA FOR COUNTY CLERK**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PULSE COMMUNICATIONS Address 4929 E SHADY ACRES DR INVERNESS, FL 34453 ☐ Fund Raiser	Purpose: <u>CAMPAIGN WEB AND SOCIAL MEDIA</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/25/2024</u> Date	\$ <u>2,500.00</u>
Expenditure #2 Name COMERICA BANK Address 7789 SASHABAW CLARKSTON, MI 48348 ☐ Fund Raiser	Purpose: <u>BANK SERVICE FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/13/2024</u> Date	\$ <u>47.12</u>
Expenditure #3 Name VISUAL AUTHORITY LLC Address 700 E BIG BEAVER RD STE. F TROY, MI 48083 ☐ Fund Raiser	Purpose: <u>CAMPAIGN SIGNS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/18/2024</u> Date	\$ <u>3,306.35</u>
Expenditure #4 Name ANEDOT Address 1340 POYDRAS ST NEW ORLEANS, LA 70112 ☐ Fund Raiser	Purpose: <u>CC PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/09/2024</u> Date	\$ <u>48.10</u>
Expenditure #5 Name ANEDOT Address 1340 POYDRAS ST NEW ORLEANS, LA 70112 ☐ Fund Raiser	Purpose: <u>CC PROCESSING FEES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/19/2024</u> Date	\$ <u>60.70</u>

Subtotal this page **5,962.27**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **5,962.27**

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>ELECTION FILING FEE</u> 5. <u>Date Debt Was Incurred:</u> <u>04/22/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 100.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>POLITICAL PARTY EVENT</u> 5. <u>Date Debt Was Incurred:</u> <u>04/29/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 270.46</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 270.46</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>CANDIDATE LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/10/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 6,000.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 6,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

6,370.46

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>CAMPAIGN PHOTOGRAPHY</u> 5. <u>Date Debt Was Incurred:</u> <u>05/10/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 99.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 99.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>POLITICAL PARTY EVENT</u> 5. <u>Date Debt Was Incurred:</u> <u>05/15/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 73.23</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 73.23</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>CAMPAIGN TRAINING</u> 5. <u>Date Debt Was Incurred:</u> <u>05/26/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 25.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 25.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

197.23

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 98456
2. Committee Name ELECT BARB PALLOTTA FOR COUNTY CLERK

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: BARBARA PALLOTTA 5445 RIDGE TRAIL N VILLAGE OF CLARKSTON, MI 48348	4. Type: <u>CANDIDATE LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>06/17/2024</u> 6. <u>Original Amount of Debt:</u> <u>\$ 4,000.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 4,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

4,000.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

10,567.69

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.