

Anthony G. Forlini

Macomb County Clerk Register of Deeds

Jennifer Walker Deputy Register of Deeds

MACOMB COUNTY ELECTION COMMISSION

MEETING NOTICE

Date/Time: Friday, July 28, 2023, 10:00 a.m.

Location: Macomb County Court Building Probate Courtroom of Hon. Sandra A. Harrison (5th Floor) 40 North Main Street, Mount Clemens, 48043

AGENDA

- I. Call to Order
- II. Adoption of Agenda

Kathy Smith

Chief Deputy Clerk

- III. Public Participation (limited to five minutes)
- IV. Approval of minutes from May 25, 2023 Election Commission Meeting
- V. Judge Clarity and Factuality of Recall Petitions Filed Against John Paterek (Armada Twp. Supervisor) and Sara Murray (Armada Twp. Treasurer) (proponent of recall/legal representative and named official/legal representative may present argument on each item before vote is taken)
 - 1) John Paterek Petition #1
 - 2) John Paterek Petition #2
 - 3) Sara Murray Petition #3
 - 4) Sara Murray Petition #4
- VI. Unfinished Business
- VII. New Business
- VIII. Public Participation (limited to five minutes)
- IX. Adjournment

MACOMB COUNTY ELECTION COMMISSION **SPECIAL MEETING** May 25, 2023

UNOFFICIAL MINUTES

The Macomb County Election Commission met on Thursday, May 25, 2023, in the courtroom of Judge Harrison on the 5th Floor, 40 North Main, Mount Clemens with the following members present:

Judge Sandra A. Harrison – Senior Probate Judge

Larry Rocca - County Treasurer

Anthony G. Forlini – County Clerk and Register of Deeds

Michael Grix – Election Department Also Present:

> Goce Nedanovski – Election Department Frank Krycia – Corporation Counsel's Office Molly Zappitell - Corporation Counsel's Office

CALL TO ORDER

Judge Harrison called the meeting to order at 2:31 p.m. Roll call was taken by Judge Harrison. All members of the commission were present.

ADOPTION OF AGENDA

A motion to adopt the agenda was made by Anthony Forlini. Larry Rocca seconded the motion. The motion passed unanimously.

PUBLIC PARTICIPATION

None

APPROVAL OF MINUTES FROM MARCH 6, 2023 ELECTION COMMISSION MEETING

Larry Rocca made a motion to approve the minutes as presented. Anthony Forlini seconded the motion. The motion passed unanimously.

APPROVAL OF RESOLUTION 23-1: PRECINCT CONSOLIDATION OF ST. CLAIR SHORES, PCT. 3 AND GROSSE POINTE SHORES, PCT. 3 FOR THE AUGUST 8, 2023 ELECTION

Anthony Forlini made a motion to approve Resolution 23-1. Larry Rocca seconded the motion. The motion passed unanimously.

UNFINISHED BUSINESS

None

NEW BUSINESS

None

PUBLIC PARTICIPATION

None

ADJOURNMENT

At 2:33 p.m., Anthony Forlini made a motion to adjourn the meeting, seconded by Larry Rocca. The motion passed unanimously and the meeting was adjourned.

Anthony G. Forlini Macomb County Clerk and Register of Deeds



Macomb County Election Department

FILED 2023 JUL 18 PM1:13 MACOMB COUNTY CLERK

RECEIPT FOR RECALL LANGUAGE SEEKING CLARITY REVIEW

Person(s) Being Recalled	Office Held
John Paterek	Supervisor - Arr
Sara Murray	Treasurer-Armada
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SUBMITTED BY: MONICO	J 06
ADDRESS: 19040 33	mile
CITY & ZIP: Amada	M1 48005
PHONE: 586-65	1-0209
E-MAIL ADDRESS: Monifold	660 gmail con
SIGNATURE:	
	Don Uhl
	ELECTION CLERK

Macomb County Election Department

32 Market Street
Mount Clemens, MI 48043-5640
586-469-5209; Fax: 586-469-6927
macombgov.org/elections
elections@macombgov.org

INSTRUCTIONS ON	REVERSE SIDE
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FILED	2023	JUL	18	PM111
MAC	OMB	OUN	TYC	LERK

	We, the undersigned registered and qualified voters of the calling of an election to recall (Name of Of Failure to provide Contract tailure	ficer) proof of Fire Chi	Title of O	ervisor	Any)	igan, petition for	
← FOR (WARNING - A PERSON WHO KNOWING THE PROVISIONS OF THE MI	LY SIGNS A RECALL PETITION MORE THA CHIGAN ELECTION LAW.	N ONCE OR S	IGNS A NAME OTHER THAN HIS	OR HER OWN		
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the pe	e undersigned circulator of the above petition asserts that he or a petition was signed in his or her presence and was not obtained rmitted a person to sign the petition more than once and has no knowledge and helief each signature is the genuine signature of the	TE OF CIRCULATOR she is 18 years of age or older and a United States citizen; that each through fraud, deceit or misrepresentation; that he or she has neith owledge of a person signing the petition more than once; and that, to person purporting to sign the petition, the person signing the petition was a significant to be significant.	her caused nor his or her best was at the time (Sign	CIRCULATOR — DO NO CERTIFICATE UNTIL AFTER (1
this circ	signing a registered elector of the City or Township listed in the he If the circulator is not a resident of Michigan, the circulator shall respectively specified in the signatures will not be counted by a culator asserts that he or she is not a resident of Michigan and agraring that concerns a petition sheet executed by the circulator and a Secretary of State has the same effect as if personally served on	rading of the petition, and the elector was qualified to sign the petition make a cross [X] or check mark $\lceil \sqrt{\rceil}$ in the box provided, otherwise eac a filing official. By making a cross or check mark in the box provided, the ees to accept the jurisdiction of this state for the purpose of any legal agrees that legal process served on the Secretary of State or a design the circulator.	ch signature on ne undersigned I proceeding or gnated agent of (Cor	nted Name of Circulator) mplete Residence Address [Street and Number or y or Township, State, Zip Code)	Rural Route]) - [Do no	t enter a post c	office box]
W	/ARNING-ACIRCULATORKNOWINGLYMAK	(ING A FALSE STATEMENT IN THE ABOVE CER	TIFICATE,				

A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

(County of Registration, if Registered to Vote, of a Circulator who is not a Resident of Michigan)
REV. 10/15

FILED	2023	JUL	18	PM1:18
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	City Township Village of	, in the County of Macons	
	EKONE from the office of	Armada Tup. Supervisor (Title of Office) (District Fire Chief Christopher	for the following reason(s):
© Contract without E WARNING - A PERSON WHO KNOWING THE PROVISIONS OF THE MI	LY SIGNS A RECALL PETITION MOR	E THAN ONCE OR SIGNS A NAME OTHER THAN H	IS OR HER OWN IS VIOLATING
SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE DATE OF SIGNING MONTH DAY YEAR
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The undersigned circulator of the above petition asserts that he or sthe petition was signed in his or her presence and was not obtained permitted a person to sign the petition more than once and has no knowledge and belief, each signature is the genuine signature of the pof signing a registered elector of the City or Township listed in the he	I through fraud, deceit or misrepresentation; that he or she owledge of a person signing the petition more than once; ar person purporting to sign the petition, the person signing the	has neither caused nor and that, to his or her best expetition was at the time (Signature of Circulator)	NOT SIGN OR DATE R CIRCULATING PETITION. (Date)
If the circulator is not a resident of Michigan, the circulator shall not this petition sheet is invalid and the signatures will not be counted by a circulator asserts that he or she is not a resident of Michigan and agree hearing that concerns a petition sheet executed by the circulator and the Secretary of State has the same effect as if personally served on	tilling official. By making a cross or check mark in the box properts to accept the jurisdiction of this state for the purpose of agrees that legal process served on the Secretary of State (ovided, the undersigned any legal proceeding or or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Number or a designated agent or a designated agent or a designated agent of Complete Residence Address [Street and Number or a designated agent of Complete Residence Address [Street and Street agent or a designated agent of a designated agent or a designated agent or a designated agent or a designated agent or a designated agent of a designated agent or a designated agent or a designated agent or a designated	or Rural Route]) - [Do not enter a post office box]
WARNING-A CIRCULATOR KNOWINGLY MAK A PERSON NOT A CIRCULATOR WHO SIGN NAME OTHER THAN HIS OR HER OWN AS	IS AS A CIRCULATOR, OR A PERSON	WHO SIGNS A (County of Registration, if Registered to Vote of a C	Circulator who is not a Resident of Michigan)

FORM APPROVED BY DIRECTOR OF ELECTIONS, STATE OF MICHIGAN

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	We, the undersigned registered and qualified voters of the	Township \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		in the County of Macomb	, and State of Mich	nigan, petit	ion for th	he
	calling of an election to recall Sara (Name of Off	icer) from the office of	3	e of Office) (District, if Any)	for the	e following	reason(s	s):
OR CLERK'S USE	WARNING - A PERSON WHO KNOWINGL	Y SIGNS A RECALL PETITION MORE TH		ristopher Grotche	HER OWN	IS VIC	DLATI	
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	12.	T OF OIDCLIL ATOR		CIRCULATOR — DO NOT	SIGN OP D	ATE		
the per	e undersigned circulator of the above petition asserts that he or sepetition was signed in his or her presence and was not obtained rmitted a person to sign the petition more than once and has no knowledge and helief each signature is the genuine signature of the provided and the provided and belief each signature is the genuine signature of the provided and th	through fraud, deceit or misrepresentation; that he or she has neowledge of a person signing the petition more than once; and that, erson purporting to sign the petition, the person signing the petition.	either caused nor to his or her best on was at the time	CERTIFICATE UNTIL AFTER CIRC (Signature of Circulator)		PETITIO	ON.	
of	signing a registered elector of the City or Township listed in the hea	ding of the petition, and the elector was qualified to sign the petit.	ion.					
this	If the circulator is not a resident of Michigan, the circulator shall mess petition sheet is invalid and the signatures will not be counted by a	filing official. By making a cross or check mark in the box provided,	, the undersigned	(Printed Name of Circulator)				
cire	culator asserts that he or she is not a resident of Michigan and agre aring that concerns a petition sheet executed by the circulator and a Secretary of State has the same effect as if personally served on t	es to accept the jurisdiction of this state for the purpose of any legagrees that legal process served on the Secretary of State or a deg	gal proceeding or	(Complete Residence Address [Street and Number or Rura	Route]) - [Do no	t enter a p	ost offic	ce box]
	ARNING - A CIRCULATOR KNOWINGLY MAK		RTIFICATE.	(City or Township, State, Zip Code)				

A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

(County of Registration, if Registered to Vote, of a Circulator who is not a Resident of Michigan) FORM APPROVED BY DIRECTOR OF ELECTIONS, STATE OF MICHIGAN

#4

FILED 2023 JUL 18 pm1:13 MACOMB COUNTY CLERK

We, the undersianed reaiste	red and qualified voters of the	Township Village of	Armada		in the County of Macomb	, and State of Mich	ilgan, petitic	on for the
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calling of an election to recall	(Name of		newal of	. (Tit	le-of Office) (District	Krotche	· (
& Contrac	+ witho	at Vali	d reason (s					
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the petition was signed in his or permitted a person to sign the pe	e above petition asserts that he of her presence and was not obtain etition more than once and has no	ned through fraud, deceit or m knowledge of a person signin	Ider and a United States citizen; that pisrepresentation; that he or she has not g the petition more than once; and that	neither caused nor it, to his or her best	CIRCULATOR — DO CERTIFICATE UNTIL AFTER		PETITIC	1
knowledge and belief, each sign of signing a registered elector of	ature is the genuine signature of th the City or Township listed in the	ne person purporting to sign th heading of the petition, and th	e petition, the person signing the petit re elector was qualified to sign the pe	ion was at the time tition.	(Signature of Circulator)		(1	Date)
If the circulator is not a resid	ent of Michigan, the circulator sha	II make a cross [X] or check m	park $[\sqrt{\ }]$ in the box provided, otherwise cross or check mark in the box provide	each signature on d, the undersigned	(Printed Name of Circulator)			
hearing that concerns a petition	s not a resident of Michigan and a sheet executed by the circulator a ume effect as if personally served o	nd agrees that legal process s	n of this state for the purpose of any le erved on the Secretary of State or a d	egal proceeding or esignated agent of	(Complete Residence Address [Street and Number	or Rural Route]) - [Do no	t enter a po	st office box]
WARNING-ACIRCUL	ATOR KNOWINGLY MA	KING A FALSE STAT	EMENT IN THE ABOVE CH	ERTIFICATE,	(City or Township, State, Zip Code)			
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