



STATE OF MICHIGAN  
RUTH JOHNSON, SECRETARY OF STATE  
DEPARTMENT OF STATE  
LANSING

August 2, 2016

Jim Dravenstatt-Moceri  
1331 Hosta Court  
Holt, Michigan 48842

Dear Mr. Dravenstatt-Moceri:

The Department of State (Department) received a formal complaint filed by Jim Miller against you, alleging that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq.* The investigation and resolution of this complaint is governed by section 15 of the Act and the corresponding administrative rules, R 169.51 *et seq.* A copy of the complaint and supporting documentation is enclosed with this letter.

The MCFA prohibits a candidate committee from making a "contribution to or an independent expenditure in behalf of another candidate committee." MCL 169.244(2). A knowing violation of section 44 is a misdemeanor punishable by a fine, imprisonment, or both. MCL 169.244(5).

Mr. Miller alleges that your candidate committee made a contribution of \$500.00 to the Scott Wriggelsworth for Ingham County Sheriff committee in contravention of the Act.

The purpose of this letter is to inform you of the Department's examination of these matters and your right to respond to the allegations before the Department proceeds further. It is important to understand that the Department is neither making this complaint nor accepting the allegations as true.

**If you wish to file a written response to the complaint, you are required to do so within 15 business days of the date of this letter.** Your response may include any written statement or additional documentary evidence you wish to submit. All materials must be sent to the Department of State, Bureau of Elections, Richard H. Austin Building, 1<sup>st</sup> Floor, 430 West Allegan Street, Lansing, Michigan 48918. If you fail to submit a response, the Department will render a decision based on the evidence furnished by the complainant.

A copy of your reply will be provided to Mr. Miller, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe that a violation of [the MCFA] has occurred [.]" MCL 169.215(10). Note that the Department's enforcement powers include the possibility of entering a conciliation agreement, conducting an administrative hearing, or referring this matter to the Attorney General for enforcement of the criminal penalties provided in section 44(5) of the Act.

Jim Dravenstatt-Moceri  
August 2, 2016  
Page 2

If you have any questions concerning this matter, you may contact me at (517) 241-0395.

Sincerely,

A handwritten signature in black ink, appearing to read "Lori A. Bourbonais". The signature is fluid and cursive, with a large, sweeping initial "L".

Lori A. Bourbonais  
Bureau of Elections  
Michigan Department of State

c: Jim Miller

**Campaign Finance Complaint Form Michigan  
Department of State**

This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (the MCFA, 1976 PA 388, as amended; MCL 169.201 *et seq.*). All information on the form must be provided along with an original signature and evidence.

**Please print or type all information.**

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name <b>Jim Miller</b>		Daytime Telephone Number <b>(517)694-0776</b>
Mailing Address <b>4328 Holt Rd</b>		
City <b>Holt</b>	State <b>MI</b>	Zip <b>48842</b>

Section 2. Alleged Violator		
Name <b>Jim Dravenstatt-Moceri</b>		
Mailing Address <b>1331 Hosta Ct</b>		
City <b>Holt</b>	State <b>MI</b>	Zip <b>48842</b>

Section 3. Alleged Violations (Use additional sheet if more space is needed.)
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Section(s) of the MCFA violated: **Section 169.271**

Explain how those sections were violated:

Jim Dravenstratt-Moceri's committee gave \$500 on 1-17-16 to Scott Wrigglesworth's campaign committee. Scott Wrigglesworth's campaign has as of 7/26/2016 not disclosed this contribution. Even if disclosed, the contribution is in excess of the \$100 limit allowed by the Michigan Campaign Finance Act. The contribution is also not noted as tickets to an event as allowed on the MCFA.

*Same complaint*

Evidence that supports those allegations (attach copies of pertinent documents and other information):

**See attached documents**

RECEIVED/FILED  
MICHIGAN DEPT OF STATE  
2016 JUL 26 PM 2:23  
ELECTIONS/GREY SEAL

**Section 4. Certification (Required)**

*I certify that to the best of my knowledge, information, and belief, formed after a reasonable inquiry under the circumstances, each factual contention of this complaint is supported by evidence.*

X

James Albert Mich  
Signature of Complainant

7/26/16  
Date

**Section 5. Certification without Evidence (Supplemental to Section 4)**

**Section 15(6) of the MCFA (MCL 169.215) requires that the signed certification found in section 4 of this form be included in every complaint.** However, if, after a reasonable inquiry under the circumstances, you are unable to certify that certain factual contentions are supported by evidence, you may also make the following certification:

*I certify that to the best of my knowledge, information, or belief, there are grounds to conclude that the following specifically identified factual contentions are likely to be supported by evidence after a reasonable opportunity for further inquiry. Those specific contentions are:*

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X

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

**Section 15(8) of the MCFA provides that a person who files a complaint with a false certification is responsible for a civil violation of the MCFA. The person may be required to pay a civil fine of up to \$1,000.00 and some or all of the expenses incurred by the Michigan Department of State and the alleged violator as a direct result of the filing of the complaint.**

Mail or deliver the completed complaint form with an **original signature and evidence** to the following address:

Michigan Department of State  
Bureau of Elections

Richard H. Austin Building – 1st Floor  
430 West Allegan Street Lansing,  
Michigan 48918

Revised: 01/16

## COMPLAINT PROCESS

Section 15 of the MCFA governs the filing and processing of complaints. If you believe someone has violated the MCFA, you may file a written complaint. The complaint **must** include all of the following:

- Your name, address and telephone number.
- The alleged violator's name and address.
- A description in reasonable detail of the alleged violation, including the section or sections of the MCFA you believe were violated, an explanation of how you believe the MCFA was violated, and any other pertinent information.
- Evidence which supports your allegations.
- A certification that:

***To the best of your knowledge, information, and belief, formed after a reasonable inquiry under the circumstances, each factual contention of the complaint is supported by evidence.***

- If after a reasonable inquiry under the circumstances, you are unable to certify that certain specifically identified factual contentions of the complaint are supported by evidence, you may also certify that:

***To the best of your knowledge, information, or belief, there are grounds to conclude that those specifically identified factual contentions are likely to be supported by evidence after a reasonable opportunity for further inquiry.***

- Your signature immediately after the certification or certifications.

**WARNING:** Section 15(8) of the MCFA (MCL 169.215) provides that a person who files a complaint with a false certification is responsible for a civil violation of the

MCFA. Under section 15(16) of the MCFA (MCL 169.215), the Secretary of State may require a person who files a complaint with a false certification to:

- Pay the Department some or all of the expenses incurred by the Department as a direct result of the filing of the complaint.
- Pay the alleged violator some or all of the expenses, including, but not limited to, reasonable attorney fees, incurred by that person as a direct result of the filing of the complaint.
- Pay a civil fine of up to \$1,000.00.

A complaint may be dismissed if any required information is not included, or if the complaint is determined to be frivolous, illegible, or indefinite. All parties are notified of dismissed complaints.

When a complaint meets the above requirements, the Department notifies the alleged violator that a complaint has been filed and provides a copy of the complaint. The alleged violator will have an opportunity to file a response. The compliant filer will have an opportunity to file a rebuttal to any response. All parties receive periodic reports concerning the actions taken by the Department on a complaint.

If the Department finds no reason to believe that the allegations are true, the complaint will be dismissed.

If the Department finds that there may be reason to believe your allegations are true, the Department must attempt to correct the violation or prevent further violations by informal methods such as a conference, conciliation, or persuasion, and may enter into a conciliation agreement with the alleged violator.

If the Department is unable to correct the violation or prevent further violations informally, an administrative hearing may be held to determine whether a civil violation of the MCFA has occurred, or the matter may be referred to the Attorney General for the enforcement of criminal penalties. An administrative hearing could result in the assessment of a civil penalty. Such a hearing would be conducted in accordance with the Michigan Administrative Procedures Act. An order issued as a result of such a hearing may be appealed to the appropriate circuit court.

Accepted complaints and all supporting documentation including responses and rebuttal statements are made available on the Department's website as required by the MCFA at the conclusion of the process.

Questions? Contact us at:

Michigan Department of State  
Bureau of Elections  
Richard H. Austin Building – 1st Floor  
430 West Allegan Street  
Lansing, Michigan 48918  
Phone: 517-373-2540  
Email: [Disclosure@Michigan.gov](mailto:Disclosure@Michigan.gov)



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

F2016-0674

7/21/16 8:57 AM Page 1 of 1

CAMP 30.00

Barb Byrum, Ingham County Clerk



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.

<b>1. Committee I.D. Number</b> 46310		<b>3. This Statement covers From:</b> 1-1-16 to 7-17-16	
<b>2. Committee Name</b> JIM DRAVENSTATT-MOCERI FOR DELHI TOWNSHIP TRUSTEE		<b>4. Candidate Last Name</b> DRAVENSTATT-MOCERI <b>First Name</b> JIM <b>M.I.</b> G. <b>4a. Office Sought Including District # or Community Served (If applicable)</b> DELHI TOWNSHIP TRUSTEE <b>4b. County of Residence</b> INGHAM	
<b>5. Committee's Mailing Address</b> 1331 HOSTA CT. HOLT MI. 48842  <b>Area Code and Phone</b> _____ <small>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.</small>		<b>6. Treasurer's Name &amp; Residential Address</b> JAMES G. DRAVENSTATT-MOCERI 1331 HOSTA CT. HOLT MI. 48842  <b>Area Code &amp; Phone</b> 517-490-4158	
<b>7. Treasurer's Business Address</b> 1331 HOSTA CT. HOLT MI. 48842  <b>Area Code and Phone</b> _____		<b>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)</b>  <b>RECEIVED</b> JUL 21 2016 <b>INGHAM COUNTY CLERK</b>  <b>Area Code and Phone</b> _____	
<b>9. TYPE OF STATEMENT</b> 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus _____		<b>Required ONLY if candidate is not on the ballot for the current year:</b> <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year  9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		<b>9e. Dissolution of Candidate Committee</b> <input type="checkbox"/> 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.	
<b>10. Verification:</b> (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.)			
<b>Current Treasurer or Designated Record keeper</b> JIM DRAVENSTATT-MOCERI Type or Print Name Signature Date 7-20-16			
<b>Candidate</b> JIM DRAVENSTATT-MOCERI Type or Print Name Signature Date 7-20-16			



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46310  
2. Committee Name JIM DRAVENSTATT-MOERI FOR DELHI TOWNSHIP TRUSTEE

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1500.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>0</u>	(18.) \$ <u>1750.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>          </u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>0</u>	(20.) \$ <u>1750.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2905.20</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2905.20</u>	(23.) \$ <u>4339.93</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)</b>		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>          </u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>4304.26</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1500.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>5804.26</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>2905.20</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>2899.06</u>	





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46310  
JIM DRAVENSTATT-MOCKER FOR DELHI  
2. Committee Name TOWNSHIP TRUSTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5-12-2016</u>	
Name & Address: <u>PLUMBERS &amp; PIPE FITTERS LOCAL 333</u> <u>5405 S. MARTIN LUTHER KING JR. BLVD</u> <u>LANSING MI. 48911</u>		\$ <u>500.00</u>	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5-25-16</u>	
Name & Address: <u>IBEW LOCAL 352</u> <u>3315 S. PENNSYLVANIA AVE.</u> <u>LANSING MI. 48910</u>		\$ <u>1000.00</u>	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

1500.00

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

1500.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46310  
JIM DRAVENSTATT-MOORE FOR DELHI TOWNSHIP  
2. Committee Name TRUSTEE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>SCOTT A. WIEGGELSWORTH</u> <u>FOR INGHAM COUNTY SHERIFF</u> Address <u>P.O. BOX 4128</u> <u>EAST LANSING MI, 48826</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FOR HIS</u> <u>CAMPAIGN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-17-16</u> Date	<u>\$ 500.00</u>
<b>Expenditure #2</b> Name <u>APPLEBEE'S</u> Address <u>2450 COOLIDGE RD.</u> <u>EAST LANSING MI. 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN</u> <u>DINNER MEETING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-19-16</u> Date	<u>\$ 31.86</u>
<b>Expenditure #3</b> Name <u>PNC BANK</u> Address <u>4308 W. HOLT RD.</u> <u>HOLT MI, 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>COUNTER CHECK FEE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-19-16</u> Date	<u>\$ 4.50</u>
<b>Expenditure #4</b> Name <u>PNC BANK</u> Address <u>4308 W. HOLT RD.</u> <u>HOLT MI, 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>COUNTER CHECK FEE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-19-16</u> Date	<u>\$ 1.50</u>
<b>Expenditure #5</b> Name <u>PIAZZANO'S</u> Address <u>1825 N. GRAND RIVER AVE</u> <u>LANSING MI. 48206</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN MEETING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-25-16</u> Date	<u>\$ 69.02</u>
Subtotal this page			<u>606.88</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46310  
JIM DRAVENSTATT - MOORE FOR DELE  
2. Committee Name TOWNSHIP TRUSTEE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>KNIGHT CAP</u> Address <u>320 E. MICHIGAN AVE., LANSING MI, 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MEETING FOR CAMPAIGN</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2-19-16</u> Date	<u>\$ 41.50</u>
<b>Expenditure #2</b> Name <u>LE ROY'S</u> Address <u>1526 S. CEDAR ST., LANSING MI, 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN MEETING</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-14-16</u> Date	<u>\$ 101.47</u>
<b>Expenditure #3</b> Name <u>OFFICE MAX</u> Address <u>446 E. EDGEWOOD BLVD. LANSING MI, 48911</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>OFFICE SUPPLIES</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-15-16</u> Date	<u>\$ 22.23</u>
<b>Expenditure #4</b> Name <u>BODDIES</u> #13 Address <u>2040 N. AURELIUS RD., HOLT MI, 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN MEETING</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-16-16</u> Date	<u>\$ 50.00</u>
<b>Expenditure #5</b> Name <u>COREY'S</u> Address <u>1511 S CEDAR LANSING MI, 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN MEETING</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-17-16</u> Date	<u>\$ 79.00</u>

Subtotal this page

294.20

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

Enter this total  
on line 8a of  
Summary Page



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

1. Committee I. D. Number 46310  
JIM DRAVINSKY - MAYER FOR DEPUTY  
2. Committee Name TOWNSHIP TRUSTEE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>KNIGHT CAP</u> Address <u>320 E. MICHIGAN AVE</u> <u>LANSING MI. 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN MEETING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-2-16</u> Date	<u>\$110.67</u>
<b>Expenditure #2</b> Name <u>PURE ENCHANTMENT PHOTOGRAPHY</u> Address <u>601 N. WAVERLY RD.</u> <u>LANSING MI.</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PICTURE FOR MY LITERATURE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-8-16</u> Date	<u>\$60.00</u>
<b>Expenditure #3</b> Name <u>PNL BANK</u> Address <u>4308 W. HOLT RD.</u> <u>HOLT MI. 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>COUNTER CHECK</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-20-16</u> Date	<u>\$3.00</u>
<b>Expenditure #4</b> Name <u>KEYSTONE MILLBROOK</u> Address <u>3540 W. JEFFERSON HWY.</u> <u>GRANDLEDGE, MI. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE LIT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-20-16</u> Date	<u>\$317.63</u>
<b>Expenditure #5</b> Name <u>KEYSTONE MILLBROOK</u> Address <u>3540 W. JEFFERSON HWY.</u> <u>GRANDLEDGE MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAMPAIGN LITERATURE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-23-16</u> Date	<u>\$1,023.96</u>

Subtotal this page

1515.26

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46310  
2. Committee Name JEM DRAVENSTATT-MOORE FOR DELHI TOWNSHIP

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>PHIL BALK</u> Address <u>4308 W. HOLT RD,</u> <u>HOLT MI, 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>LAUNTER CAREK</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-23-16</u> Date	<u>\$ 3.00</u> Click Here for Memo Itemization Type
<b>Expenditure #2</b> Name <u>CONN. TO RR-ELECT TOM REICH</u> Address <u>1822 WINCHESTER WAY</u> <u>EATON RAPIDS MI, 48827</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>GOLF OUTING CAMPAIGN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-24-16</u> Date	<u>\$ 75.00</u> Click Here for Memo Itemization Type
<b>Expenditure #3</b> Name <u>KEYSTONE MILL BROOK</u> Address <u>3540 W. JEFFERSON HWY</u> <u>GRANDLEDGE MI, 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE FOR LITERATURE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-11-16</u> Date	<u>\$ 360.86</u> Click Here for Memo Itemization Type
<b>Expenditure #4</b> Name <u>ELECT KARA HOPE</u> Address <u>1891 MAPLE ST,</u> <u>HOLT MI, 48842</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FOR CAMPAIGN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-16-16</u> Date	<u>\$ 50.00</u> Click Here for Memo Itemization Type
<b>Expenditure #5</b> Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	_____ Click Here for Memo Itemization Type

Subtotal this page 488.86

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 2905.20

Enter this total  
on line 8a of  
Summary Page



STATE OF MICHIGAN  
RUTH JOHNSON, SECRETARY OF STATE  
DEPARTMENT OF STATE  
LANSING

August 24, 2016

Jim Miller  
4328 Holt Road  
Holt, Michigan 48842

Dear Mr. Miller:

The Department of State received a response to the complaint you filed against Jim Dravenstatt-Moceri, which concerns an alleged violation of the Michigan Campaign Finance Act (MCFA), 1976 P.A. 388, MCL 169.201 *et seq.* A copy of the response is provided as an enclosure with this letter.

If you elect to file a rebuttal statement, you are required to send it within 10 business days of the date of this letter to the Bureau of Elections, Richard H. Austin Building, 1<sup>st</sup> Floor, 430 West Allegan Street, Lansing, Michigan 48918.

Sincerely,

A handwritten signature in cursive script that reads "Lori A. Bourbonais".

Lori A. Bourbonais  
Bureau of Elections  
Michigan Department of State

c: Jim Dravenstatt-Moceri

2016 AUG 15 PM 2:07

2016 AUG 15 PM 2:07

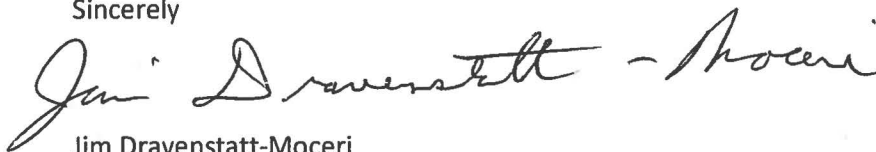
August 8, 2016

Lori A. Bourbonais  
Bureau of Elections  
430 W. Allegan  
Lansing Mi. 48918

Dear Lori,

Per our Conversation on August 8<sup>th</sup>, I am putting in writing that Scott Wriggelsworth reimbursed me \$400.00 to my campaign account. I deposit it on July 29. The Ingham County Clerk's office sent us a letter letting us know the form to use for both of us on the next filing. Thank you for your time on this matter.

Sincerely

A handwritten signature in cursive script that reads "Jim Dravenstatt-Moceri". The signature is written in dark ink and is positioned above the printed name.

Jim Dravenstatt-Moceri



STATE OF MICHIGAN  
RUTH JOHNSON, SECRETARY OF STATE  
DEPARTMENT OF STATE  
LANSING

March 21, 2017

Jim Miller  
4328 Holt Road  
Holt, Michigan 48842

Dear Mr. Miller:

The Department of State (Department) has concluded its investigation of the complaint you filed against Jim Dravenstatt-Moceri, which concerned an alleged violation of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq.* This letter concerns the disposition of your complaint.

You filed your complaint on July 26, 2016, and Mr. Dravenstatt-Moceri filed a response to the complaint on August 15, 2016. You did not file a rebuttal statement with the Department.

The MCFA prohibits a candidate committee from making a "contribution to or an independent expenditure in behalf of another candidate committee." MCL 169.244(2). A knowing violation of section 44 is a misdemeanor punishable by a fine, imprisonment, or both. MCL 169.244(5).

You alleged that Mr. Dravenstatt-Moceri's candidate committee made a \$500.00 contribution to the Scott Wriggelsworth's candidate committee in contravention of section 44 of the Act. As evidence, you provided the 2016 Pre-Primary campaign statement for Mr. Dravenstatt-Moceri's candidate committee, which included disclosure of a \$500.00 contribution to the Scott A. Wriggelsworth for Ingham County Sheriff committee on January 17, 2016.

In his answer to the complaint, Mr. Dravenstatt-Moceri explained that while his candidate committee did make a contribution to Scott Wriggelsworth's candidate committee in excess of the contribution limits set by section 44 of the Act, he received a refund check in the amount of \$400.00 from the Wriggelsworth committee prior to the filing of your complaint. The Wriggelsworth committee's 2016 Post-Primary statement indicates the refund was made on July 24, 2016; Mr. Dravenstatt-Moceri asserted in his answer that he deposited this refund on July 29, 2016. No evidence has been provided to the contrary.


Your complaint was filed on July 26, 2016. While the Department believes that the evidence tends to support a conclusion that Mr. Dravenstatt-Moceri did make a contribution above the contribution limits set in the Act, the amount over the limit was refunded and the violation was cured prior to the filing your complaint.



Jim Miller  
March 21, 2017  
Page 2

When a violation is found to have occurred, the MCFA requires the Department to attempt to correct the violation and prevent further violations through informal methods. With this letter, the Department reminds Mr. Dravenstatt-Moceri that a candidate committee is limited to purchasing a fundraiser ticket up to \$100.00 per candidate committee in any calendar year. MCL 169.244.

Because Mr. Dravenstatt-Moceri took the appropriate corrective action prior to the filing of your complaint, your complaint is dismissed.

Sincerely,  
  
Lori A. Bourbonais  
Bureau of Elections  
Michigan Department of State

c: Jim Dravenstatt-Moceri