



Michigan Department of State
Campaign Finance Complaint Form

BUREAU OF ELECTIONS • RICHARD H. AUSTIN BUILDING - 1st Floor
 430 W. ALLEGAN STREET • LANSING, MICHIGAN 48918

RECEIVED/FILED
 MICHIGAN DEPT OF STATE

2021 OCT 26 AM 11:21

ELECTIONS/GREAT SEAL

This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (MCFA). For instructions on how to complete this form, see the Campaign Finance Complaint Guidebook & Procedures document. All spaces are required unless otherwise indicated.

Section 1. Complainant			
Your Name Randy A. Bell		Daytime Telephone Number 517-505-6456	
Mailing Address 316 Tenth St.			
City Frankfort	State MI	Zip 49635	
Email (optional) goldnrod24@hotmail.com			

Section 2. Alleged Violator			
Name Committee to Elect Karen Cunningham / Nancy Reid / Leslie Boach			
Mailing Address there are 3 separate committees - see attached forms			
City Frankfort	State MI	Zip 49635	
Email (optional)			

Section 3. Allegations (Use additional sheets if more space is needed.)

Section(s) of the MCFA alleged to be violated: Section 47

Explain how those sections were violated:
Address not provided in identifier.

Evidence included with the submission of the complaint that supports the allegations:
attached



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October 8, 2021

Dear Fellow Frankfort Resident and Voter:

We write to you to ask for your vote for City Council for the election on November 2, 2021. We are Karen Cunningham, Nancy Reid, and Leslie Roach. We are running for the three council seats to improve our City and to preserve its natural beauty.

Who we are:

Karen acts on her strong sense of duty and civic responsibility. She has served in the military, mission trips, appointed city council member in Goodyear AZ, co-chair for Veterans Inspiring Veterans and a board member for Northern Michigan 4 Veterans. A respected team member, valued for insight, decisiveness and diplomacy; skills she will leverage while serving on Frankfort City Council.

Nancy has a long history of service to our community. She has served on the board of the Oliver Art Center and has served on the Women's Association for the Congregational Summer Assembly. Nancy has an MBA in finance and marketing, which led to her 25 years in publishing books. As the head of production, she led staff meetings concerning editing, marketing, scheduling, costs, and final product quality. Nancy is committed to protecting and preserving the natural beauty of Frankfort and its beach, parks, and trails.

Leslie provides a finance acumen and fiscal responsibility. Leslie has both a bachelor's and master's degree in finance, which she utilized in her over 20 years of commercial banking in national real estate development and lending. She is committed to funding the significant unfunded pension liability and mandating fiscal responsibility. She wants a sound financial foundation for Frankfort, not only for today but also for our children and their children. Leslie currently serves on the Planning Commission.

Our Top Priorities:

- We will listen to you and always treat you and your opinions with respect.
- We believe in transparency of government. We will be accountable to you, and will demand accountability from the City bureaucracy.
- We believe in fiscal responsibility. We will work to fund the significant unfunded pension. We also will manage City assets so as to maximize their value to the City.
- We will create an improved year-round economy in Frankfort through highly dependable internet connectivity that will attract young professionals, who can work remotely, and High-Tech startups. High paying jobs will attract families to live here.
- We will preserve the natural beauty and recreational resources of our City, and in particular of our iconic beach. We oppose any bathroom built on the beach. Rather, the next bathroom needs to be in Cannon Park or adjoining the existing beach parking lot to replace the stinky vault toilets.

Democracy cannot take place without a participatory citizenry.

Paid for by Committee to Elect Karen Cunningham for City Council, Committee to Elect Nancy Reid for City Council, and Committee to Elect Leslie Roach for City Council.



1. Committee ID #: **15127** *2. Type of Filing: Original: Eff. Date: **10/04/2021**
 Amendment to items:

*3. Full Name of Committee (must include Candidate's first and last name):
Elect Leslie Roach for City Council

*4a. Candidate Full Name: Last Name **Roach** First Name **Leslie** M.I. **A**

*4b. Political Party (if applicable): **NA** *4c. County of Residence: **BENZIE**

*4d. Office Sought: **City Council** *4e. District or Jurisdiction: **Frankfort**

*5. Date Committee was Formed: **08/16/2021**

*6a. Committee Phone: **(586) 292-7634** 6b. Committee Fax #:

*6c. Committee Email Address: **roachforfrankfortcc@ya** 6d. Committee Website Address:

*7a. Complete Committee Mailing Address (May be PO Box):
20 Winnebago St, Frankfort MI 49635

*7b. Complete Committee Street Address (May not be PO Box):
20 Winnebago St, Frankfort MI 49635

*8. Treasurer Name and Complete Residential Address:
Steven A. Roach, 20 Winnebago St, Frankfort MI 49635
Phone #: **(313) 496-7933** Email Address: **saroach61@gmail.com**

9. Designated Record Keeper Name and Complete Address:
Steven A. Roach, 20 Winnebago St, Frankfort MI 49635
Phone #: **(313) 496-7933** Email Address: **saroach61@gmail.com**

*10. REPORTING WAIVER REQUEST:
 YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000.00 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000.00 in an election, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000.00 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports.
 NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000.00 in an election. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.

*11. Name and Address of Depositories or intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received.
*Official Depository (name and address): **Fifth Third Bank, 3535 W South Airport Road West, Traverse City, MI 49684**
Secondary Depository (name and address):

12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)

*Candidate: *Leslie A Roach* Date: *10-4-21* *Current Treasurer: *[Signature]* Date: *10/4/2021*

*Designated Record Keeper (If Applicable): *[Signature]* Date: *10/4/2021*



1. Committee ID #: 15128	*2. Type of Filing: <input checked="" type="checkbox"/> Original: <input type="checkbox"/> Amendment to items:	Eff. Date: 07/19/2021
*3. Full Name of Committee (must include Candidate's first and last name): Committee to Elect Karen Cunningham		
*4a. Candidate Full Name: Last Name Cunningham	First Name Karen	M.I.
*4b. Political Party (if applicable):	*4c. County of Residence: BENZIE	
*4d. Office Sought: City Council	*4e. District or Jurisdiction: City of Frankfort	
*5. Date Committee was Formed: 16 Aug 21		
*6a. Committee Phone: (231) 499-7868	6b. Committee Fax #:	
*6c. Committee Email Address: kleecunningham@gmail.com	6d. Committee Website Address:	
*7a. Complete Committee Mailing Address (May be PO Box): 915 Elm St, Frankfort, MI 49635		
*7b. Complete Committee Street Address (May not be PO Box): 915 Elm St, Frankfort, MI 49635		
*8. Treasurer Name and Complete Residential Address: Karen L Cunningham, 915 Elm St, Frankfort, MI 49635		
Phone #: (231) 499-7868	Email Address: kleecunningham@gmail.com	
9. Designated Record Keeper Name and Complete Address: Same as Above		
Phone #:		
Email Address:		
*10. REPORTING WAIVER REQUEST: <input checked="" type="checkbox"/> YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000.00 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000.00 in an election, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000.00 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports. <input type="checkbox"/> NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000.00 in an election. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.		
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received. *Official Depository (name and address): State Savings Bank, Benzie Blvd, Beulah, MI 49617 Secondary Depository (name and address):		
12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)		
*Candidate: Karen Cunningham Date: 19 Aug 21	*Current Treasurer: Karen L Cunningham Date: 19 Aug 21	
*Designated Record Keeper (If Applicable) Date:		

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AUG 19 2021

DAWN OLNEY
BENZIE COUNTY CLERK
BEULAH, MI 49617



ORIGINAL OR AMENDED
STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE COMMITTEES FILED WITH A COUNTY CLERK

Information on this form is made public.

1. Committee ID #: 15129	*2. Type of Filing: <input type="checkbox"/> Original: <input checked="" type="checkbox"/> Amendment to items: 10.3.21 Eff. Date: 7/21/21
*3. Full Name of Committee (must include Candidate's first and last name): ELECT REID FOR CITY COUNCIL	
*4a. Candidate Full Name: Last Name REID	First Name NANCY
M.I. C	
*4b. Political Party (if applicable): N/A	*4c. County of Residence: BENZONIA
*4d. Office Sought: CITY COUNCIL	*4e. District or Jurisdiction:
*5. Date Committee was Formed: 7/21/2021	
*6a. Committee Phone: 231.399.0150	6b. Committee Fax #: N/A
*6c. Committee Email Address: nancyreid362@gmail.com	6d. Committee Website Address: N/A
*7a. Complete Committee Mailing Address (May be PO Box): 15 NIPISSING STREET, FRANKFORT MI 49635	
*7b. Complete Committee Street Address (May not be PO Box): 15 NIPISSING STREET FRANKFORT MI 49635	
*8. Treasurer Name and Complete Residential Address: MARY ARMSTRONG 1 SAC STREET FRANKFORT 49635	
Phone #: 231.352.5097	Email Address: starseeker33@gmail.com
9. Designated Record Keeper Name and Complete Address: MARY ARMSTRONG 1 SAC STREET FRANKFORT	
Phone #: 231.352.5097	Email Address:
*10. REPORTING WAIVER REQUEST: <input checked="" type="checkbox"/> YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000.00 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000.00 in an election, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000.00 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports. <input type="checkbox"/> NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000.00 in an election. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.	
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received. *Official Depository (name and address): STATE SAVINGS BANK 703 MAIN ST FRANKFORT MI 49635 Secondary Depository (name and address):	
12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)	
*Candidate: Nancy Reid	Date: 8.16.21
*Current Treasurer: Mary Armstrong	Date: 8.16.21
*Designated Record Keeper (If Applicable) _____	
Date:	

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OCT 06 2021

DAWN OLNEY
BENZIE COUNTY CLERK
BEULAH, MI 49617

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AUG 16 2021

DAWN OLNEY
BENZIE COUNTY CLERK
BEULAH, MI 49617

Clear Form



STATE OF MICHIGAN
JOCELYN BENSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

December 2, 2021

Committee to Elect Karen Cuningham
Karen Cuningham, Treasurer
915 Elm St.
Frankfort, MI 49635

Elect Leslie Roach for City Council
Steven A. Roach, Treasurer
20 Winnebago St.
Frankfort, MI 49635

Elect Nancy Reid For City Council
Mary Armstrong, Treasurer
1 Sac St.
Frankfort, MI 49635

Re: *Bell v. Committee to Elect Karen Cuningham et al.*
Campaign Finance Complaint
No. 2021-10-54-247

Dear Ms. Cuningham, Mr. Roach, and Ms. Armstrong:

The Department of State (Department) has received a formal complaint alleging you have violated MCL 169.247 of the Michigan Campaign Finance Act (MCFA) by failing to include a complete and correct identification statement on certain campaign-related materials. A copy of the complaint is enclosed.

The complaint was submitted to the Department and alleges that you have distributed a mailer that did not include a proper paid for by statement. A copy of the mailer was included with the complaint.

The MCFA and corresponding administrative rules require a person who produces printed material that relates to an election include the phrase "Paid for by [name and address of the person who paid for the item]." MCL 169.247(1), R 169.36(2). A knowing violation constitutes a misdemeanor offense punishable by a fine of up to \$1,000.00, imprisonment for up to 93 days, or both. MCL 169.247(6).

Karen Cuningham
Nancy Reid
Leslie Roach
December 2, 2021
Page 2

Upon review, the evidence submitted supports the conclusion that a potential violation of the Act has occurred. From the outset, the Department must consider whether it is an expenditure covered by the MCFA. The mailer includes the phrase “[w]e write to you to ask for your vote for City Council.” This is express advocacy as defined by the Act. MCL 169.206(2)(j). Because the mailer urges voters to vote for the candidates supported by your committees and was published by your committees, the mailer is covered by the ambit of the Act and must include the paid for by statement outlined under section 47. *Id.* However, the mailer omitted the address of the committees for which you serve as treasurers. Since this phrase is absent, the evidence supports the conclusion that a potential violation has occurred.

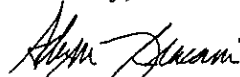
After reaching this conclusion, the Act requires the Department to “endeavor to correct the violation or prevent a further violation by using informal methods” if it finds that “there may be reason to believe that a violation ... has occurred [.]” MCL 169.215(10). The objective of an informal resolution is “to correct the violation or prevent a further violation.” *Id.*

Given this, the Department concludes that a formal warning is a sufficient resolution to the complaint and is hereby advising you that MCL 169.247(1) and R 169.36(2) require you to print a complete and accurate identification statement on all campaign materials, consisting of the phrase “paid for by” followed by the full name and address of your committees.

Note that all printed materials referencing you or your candidacy produced in the future must include this identification statement. For all materials currently in circulation, the paid for by statement must be corrected. If this information has been included in your materials and you wish to rebut the Department’s conclusion, you must respond in writing to the Department within 15 business days of the date of this letter otherwise the Department will treat the complaint as resolved.

Please be advised that this notice has served to remind you of your obligation under the Act to identify your printed matter and may be used in future proceedings as evidence that tends to establish a knowing violation of the Act. A knowing violation is a misdemeanor offense and may merit referral to the Attorney General for enforcement action. MCL 169.247(6), 215(10).

Sincerely,



Adam Fracassi
Bureau of Elections

C: Randy Bell