



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

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

RECEIVED/FILED  
MICHIGAN DEPT OF STATE

2022 FEB -1 PM 2: 29

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 Donald Munski

Daytime Telephone Number  
231-720-5941

Mailing Address  
1078 Brookway Court

City  
Norton Shores

State  
MI

Zip  
49441

Email (optional)

donaldmunski@yahoo.com

**Section 2. Alleged Violator**

Name  
Melinda Pego

Mailing Address  
PO Box 145

City  
Holton

State  
MI

Zip  
49425

Email (optional)

pegoma@muskegoncounty.net

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

**Section(s) of the MCFA alleged to be violated: Section 169.252(c), and 169.243**  
**Explain how those sections were violated:**

**ALLEDGED VIOLATION #1**

Section 169.252(c) limits the dollar value of contributions that can be accepted by a candidates committee. Section 169.252 (c) states; "\$1,000.00 for a candidate for state representative, or for a candidate for local elective office if the district from which he or she is seeking office has a population of 85,000 or less." (Exhibit 1) According to the Muskegon County Apportionment Committee report the population for District 7, the candidates district, in 2010 was 18,312. (Exhibit 2) As the population of the district was 85,000 or less, the candidate is limited to accepting donations of \$1,000.00 or less.

The candidate's committee accepted contributions from individuals in excess of campaign finance limits. They accepted the following donations that exceeded the legal limit:

Andrew Heykoop, cumulative donations totaled \$1,100 on or about 6/26/20. (Exhibit 3-1 Itemized Contributions – Contribution #4, page 7 of 11)

Ryan Leestma cumulative donations totaled \$2,100 on, or about, 7/8/2020. (Exhibit 3-1 Itemized Contributions – Contribution #3, page 9 of 11)

Zach Lahring cumulative donations totaled \$2,000 on, or about 7/8/2020. (Exhibit 3-1 Itemized Contributions – Contribution #1, page 10 of 11)

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Mark Hickmott, cumulative donations totaled \$1,150 on, or about 11/14/20. (Exhibit 3-2 Itemized Contributions – Contribution #3, page 1 of 1)

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## ALLEGED VIOLATION #2

169.243 Expenditure by agent or independent contractor; requirements; violation; penalty.

“Sec. 43. An expenditure shall not be made, other than for overhead or normal operating expenses, by an agent or an independent contractor, including an advertising agency, on behalf of or for the benefit of a person unless the expenditure is reported by the committee as if the expenditure were made directly by the committee, or unless the agent or independent contractor files a report of an independent expenditure as provided in section 51. The agent or independent contractor shall make known to the committee all information required to be reported by the committee. A person who knowingly is in violation of this subsection is guilty of a misdemeanor and shall be punished by a fine of not more than \$1,000.00, or imprisoned for not more than 90 days, or both, and if the person is other than an individual the person shall be fined not more than \$10,000.00.” (Exhibit 4)

The Candidate’s Committee reported an expenditure to Right Strategies LLC on 7-17-20 for the purpose of Mailer Printing, in the amount of \$792.00. (Exhibit 3-1 Itemized Expenditures #1 page 5 of 5) Then another to Right Strategies LLC for the purpose of mailers on 11-14-2020, in the amount of \$1,302.20. (Exhibit 3-2 Itemized Expenditures #1 page 1 of 1). A payment to Jonathan Chulski for mailers was made on 6-22-20 in the amount of \$381.15 (Exhibit 3-1 Itemized Expenditures #5 page 1 of 5). The Committee failed to provide the details for the expenditure as required by statute. The statute requires details “as if the expenditure were made directly by the committee, or unless the agent or independent contractor files a report of an independent expenditure as provided by section 51.”

The Michigan Department of State provided an example of how to meet this disclosure required in the MCFA/MERTS Candidate Training on 6/16/21. (Exhibit 6)

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## **Evidence included with the submission of the complaint that supports the allegations:**

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EXHIBIT 1 - MCFA: Section 169.252

EXHIBIT 2 – Populations of Commissioner Districts 2010 Census Population Data

EXHIBIT 3-1 – Candidates Campaign Report for the period 4-24-2020 to 7-19-2020, filed with Muskegon County Clerk on July 21, 2020.

EXHIBIT 3-2 - Candidates Campaign Report for the period 10-18-2020 to 11-23-2020, filed with Muskegon County Clerk on Nov. 25, 2020.

EXHIBIT 4 – MCFA: Section 169.243

EXHIBIT 3-1 – Candidates Campaign Report for the period 4-24-2020 to 7-19-2020, filed with Muskegon County Clerk on July 21, 2020.

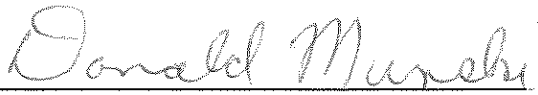
EXHIBIT 3-2 - Candidates Campaign Report for the period 10-18-2020 to 11-23-2020, filed with Muskegon County Clerk on Nov. 25, 2020

EXHIBIT 6 - Example of reporting expenditures made on behalf of the campaign by an agent, or independent contractor.

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**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**

Signature of Complainant



Date

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

If, after a reasonable inquiry under the circumstances, you are unable to certify that certain factual contentions are supported by evidence as indicated above, you may 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.

**Section 6. Submission**

Once completed, mail or hand deliver the complaint form with your evidence to the address below. The complaint is considered filed upon receipt by the Bureau of Elections.

Michigan Department of State  
Bureau of Elections  
Richard H. Austin Building – 1st Floor  
430 West Allegan Street  
Lansing, Michigan 48918

EXHIBIT 1

MICHIGAN DEPARTMENT OF STATE  
CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Malinda Pego

**MICHIGAN CAMPAIGN FINANCE ACT (EXCERPT)**  
**Act 388 of 1976**

**169.252 Limitations on contributions to candidate committee; contribution from candidate's immediate family; contribution for particular election cycle; violation as misdemeanor; penalty; contributions made by political or independent committees established by corporation, joint stock company, domestic dependent sovereign, or labor organization; bundled contributions.**

Sec. 52. (1) Except as provided in subsection (5) or (11) and subject to section 46 and subsection (8), a person other than an independent committee or a political party committee shall not make contributions to a candidate committee of a candidate for elective office that, with respect to an election cycle, are more than the following:

(a) \$6,800.00 for a candidate for state elective office other than the office of state legislator, or for a candidate for local elective office if the district from which he or she is seeking office has a population of more than 250,000.

(b) \$2,000.00 for a candidate for state senator, or for a candidate for local elective office if the district from which he or she is seeking office has a population of more than 85,000 but 250,000 or less.

(c) \$1,000.00 for a candidate for state representative, or for a candidate for local elective office if the district from which he or she is seeking office has a population of 85,000 or less.

(2) Except as otherwise provided in this subsection and subsection (12), an independent committee shall not make contributions to a candidate committee of a candidate for elective office that, in the aggregate for that election cycle, are more than 10 times the amount permitted a person other than an independent committee or political party committee in subsection (1). A house political party caucus committee or a senate political party caucus committee is not limited under this subsection in the amount of contributions made to the candidate committee of a candidate for the office of state legislator, except as follows:

(a) A house political party caucus committee or a senate political party caucus committee shall not pay a debt incurred by a candidate if that debt was incurred while the candidate was seeking nomination at a primary election and the candidate was opposed at that primary.

(b) A house political party caucus committee or a senate political party caucus committee shall not make a contribution to or make an expenditure on behalf of a candidate if that candidate is seeking nomination at a primary election and the candidate is opposed at that primary.

(3) A political party committee other than a state central committee shall not make contributions to the candidate committee of a candidate for elective office that are more than 10 times the amount permitted a person other than an independent committee or political party committee in subsection (1).

(4) A state central committee of a political party shall not make contributions to the candidate committee of a candidate for state elective office other than a candidate for the legislature that are more than 20 times the amount permitted a person other than an independent committee or political party committee in subsection (1). A state central committee of a political party shall not make contributions to the candidate committee of a candidate for state senator, state representative, or local elective office that are more than 10 times the amount permitted a person other than an independent committee or political party committee in subsection (1).

(5) A contribution from a member of a candidate's immediate family to the candidate committee of that candidate is exempt from the limitations of subsection (1).

(6) Consistent with the provisions of this section, a contribution designated in writing for a particular election cycle is considered made for that election cycle. A contribution made after the close of a particular election cycle and designated in writing for that election cycle shall be made only to the extent that the contribution does not exceed the candidate committee's net outstanding debts and obligations from the election cycle so designated. If a contribution is not designated in writing for a particular election cycle, all of the following apply to that contribution:

(a) The contribution is considered made for the election cycle that corresponds to the date of the written instrument.

(b) The contribution limits for the current election cycle apply to that contribution.

(c) A candidate committee may use that contribution to pay outstanding debts and obligations from a previous election cycle regardless of whether the contribution, when aggregated with any contributions made in that previous election cycle, would exceed the contribution limits for that previous election cycle.

(7) A candidate committee, a candidate, or a treasurer or agent of a candidate committee shall not accept a contribution with respect to an election cycle that exceeds the limitations in subsection (1), (2), (3), (4), (11), or (12).

(8) The contribution limits in subsection (1) for a candidate for local elective office are effective on the

effective date of the amendatory act that provides for those contribution limits, however, only contributions received by that candidate on and after that date shall be used to determine if the contribution limit has been reached.

(9) A person who knowingly violates this section is guilty of a misdemeanor punishable, if the person is an individual, by a fine of not more than \$1,000.00 or imprisonment for not more than 90 days, or both, or, if the person is not an individual, by a fine of not more than \$10,000.00.

(10) For purposes of the limitations provided in subsections (1) and (2), all contributions made by political committees or independent committees established by any corporation, joint stock company, domestic dependent sovereign, or labor organization, including any parent, subsidiary, branch, division, department, or local unit thereof, shall be considered to have been made by a single independent committee. By way of illustration and not limitation, all of the following apply as a result of the application of this requirement:

(a) All of the political committees and independent committees established by a for profit corporation or joint stock company, by a subsidiary of the for profit corporation or joint stock company, or by any combination thereof, are treated as a single independent committee.

(b) All of the political committees and independent committees established by a single national or international labor organization, by a labor organization of that national or international labor organization, by a local labor organization of that national or international labor organization, or by any other subordinate organization of that national or international labor organization, or by any combination thereof, are treated as a single independent committee.

(c) All of the political committees and independent committees established by an organization of national or international unions, by a state central body of that organization, by a local central body of that organization, or by any combination thereof, are treated as a single independent committee.

(d) All of the political committees and independent committees established by a nonprofit corporation, by a related state entity of that nonprofit corporation, by a related local entity of that nonprofit corporation, or by any combination thereof, are treated as a single independent committee.

(11) The limitation on a political committee's contributions under subsection (1) does not apply to contributions that are part of 1 or more bundled contributions delivered to the candidate committee of a candidate for statewide elective office and that are attributed to the political committee as prescribed in section 31. A political committee shall not make contributions to a candidate committee of a candidate for statewide elective office that are part of 1 or more bundled contributions delivered to that candidate committee, that are attributed to the political committee as prescribed in section 31, and that, in the aggregate for that election cycle, are more than the amount permitted a person other than an independent committee or political party committee in subsection (1).

(12) The limitation on an independent committee's contributions under subsection (2) does not apply to contributions that are part of 1 or more bundled contributions delivered to the candidate committee of a candidate for statewide elective office and that are attributed to the independent committee as prescribed in section 31. An independent committee shall not make contributions to a candidate committee of a candidate for statewide elective office that are part of 1 or more bundled contributions delivered to that candidate committee, that are attributed to the independent committee as prescribed in section 31, and that, in the aggregate for that election cycle, are more than 10 times the amount permitted a person other than an independent committee or political party committee in subsection (1).

**History:** 1976, Act 388, Eff. June 1, 1977;—Am. 1978, Act 349, Imd. Eff. July 12, 1978;—Am. 1989, Act 95, Imd. Eff. June 21, 1989;—Am. 1994, Act 117, Eff. Apr. 1, 1995;—Am. 1995, Act 264, Eff. Mar. 28, 1996;—Am. 1996, Act 590, Eff. Mar. 31, 1997;—Am. 2001, Act 250, Eff. Mar. 22, 2002;—Am. 2013, Act 252, Imd. Eff. Dec. 27, 2013;—Am. 2015, Act 269, Imd. Eff. Jan. 6, 2016.

**Compiler's note:** Section 2 of Act 264 of 1995 provides:

"If any portion of this amendatory act or the application of this amendatory act to any person or circumstance is found to be invalid by a court, the invalidity does not affect the remaining portions or applications of this amendatory act that can be given effect without the invalid portion or application, if those remaining portions are not determined by the court to be inoperable. To this end, this amendatory act is declared to be severable."

EXHIBIT 2

MICHIGAN DEPARTMENT OF STATE  
CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Melinda Pego

**Muskegon County Apportionment  
Plan Name: 2000-2010 Commissioner Districts With 2010 Census Population**

ID	District	Population Total	Population Deviation from Target	Population Deviation %	White Population	White %	Black Population	Black %	Native American Population	Native American %	Asian Population	Asian %	Island Population	Island %	Hispanic Population	Hispanic %
District 1	D1	20,470	1,741	9.3	19,466	95.1	180	0.88	99	0.48	118	0.58	0	0	819	4
District 2	D2	21,176	2,447	13.07	19,514	92.15	497	2.35	219	1.03	67	0.32	6	0.03	1,035	4.89
District 3	D3	19,263	534	2.85	17,795	92.38	582	3.02	106	0.55	225	1.17	3	0.02	654	3.4
District 4	D4	17,070	-1,659	-8.86	14,933	87.48	1,124	6.58	183	1.07	171	1	5	0.03	797	4.67
District 5	D5	16,187	-2,542	-13.57	7,868	48.61	6,625	40.93	161	0.99	75	0.46	4	0.02	1,516	9.37
District 6	D6	14,523	-4,206	-22.46	3,234	22.27	10,263	70.67	81	0.56	20	0.14	0	0	928	6.39
District 7	D7	18,312	-417	-2.23	13,987	76.38	3,011	16.44	165	0.9	74	0.4	3	0.02	1,164	6.36
District 8	D8	20,605	1,876	10.02	19,336	93.84	481	2.33	155	0.75	97	0.47	3	0.01	538	2.61
District 9	D9	20,951	2,222	11.86	19,829	94.64	240	1.15	217	1.04	83	0.4	4	0.02	629	3
Totals		168,557			135,962		23,003		1,386		930		28		8,080	
Districts		9														
Target Population		18,729														

**Muskegon County Apportionment**

**Plan: 2000-2010 Districts With 2010 Census Populati**

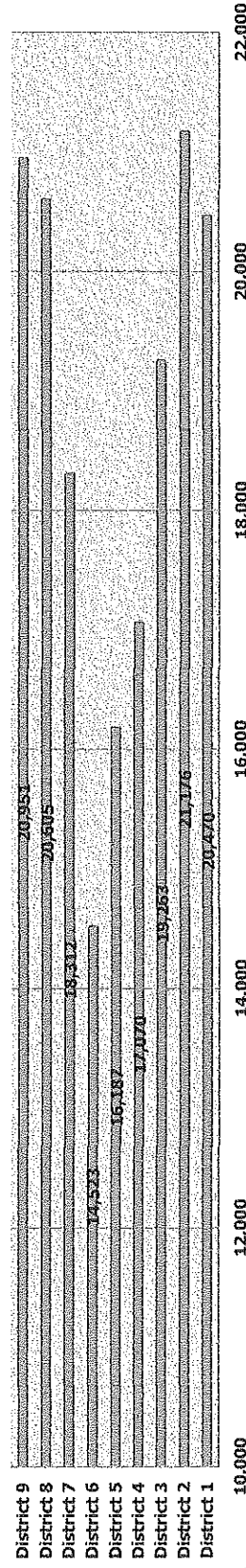




EXHIBIT 3-1

MICHIGAN DEPARTMENT OF STATE  
CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Melinda Pego



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FILED**

JUL 21 2020

NANCY A. WATERS  
MUSKEGON COUNTY CLERK

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE  
COVER PAGE**


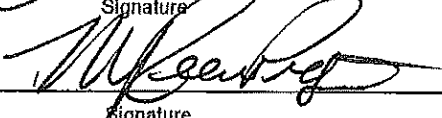
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 4/24/2020 to 7/19/2020

1. Committee I.D. Number <b>84075</b>	4. Candidate Last Name <b>Pego</b> First Name <b>Malinda</b> M.I. <b>Lynn - Reese</b>
2. Committee Name <b>Committee to Elect Malinda Pego</b>	4a. Office Sought Including District # or Community Served (If applicable) <b>Muskegon County Commission District 7</b> 4b. County of Residence <b>MUSKEGON</b>
5. Committee's Mailing Address <b>PO Box 145 Holton, MI 49425</b>  Area Code and Phone <u>231-286-6240</u> 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.	6. Treasurer's Name & Residential Address <b>Laurie Hawkins 6705 Holton Duck Lake Rd Holton, MI 49425</b>  Area Code & Phone <u>231-286-9128</u>
7. Treasurer's Business Address <b>N/A</b>  Area Code and Phone _____	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)   Area Code and Phone _____

<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 <u>8/4/2020</u>	Required ONLY if candidate is not on the ballot for the current year: <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 hereby 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.
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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	<u>Laurie Hawkins</u> Type or Print Name	 Signature	Date <u>7-21-20</u>
Candidate	<u>Malinda Pego</u> Type or Print Name	 Signature	Date <u>0721-2020</u>



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 84075

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Malinda Pego

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>8805.73</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>8805.73</u>	(18.) \$
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$		(19.) \$
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>8805.73</u>	(20.) \$
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$		(21.) \$
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$		(22.) \$
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>8094.85</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$	<u>8094.85</u>	(23.) \$
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>8805.73</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$	<u>8805.73</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>8094.85</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>710.88</u>	*



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/13/2020</u></p> <p>Name &amp; Address: <u>Zach Lahring</u> <u>9770 Judson Rd, Ravenna, MI 49451</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Construction</u> Employer <u>Tridon</u> Business Address <u>1461 Evanston Ave Muskegon MI 49442</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		1000.00 \$	1000.00 \$
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/19/2020</u></p> <p>Name &amp; Address: <u>Sandra Betten</u> <u>2805 Judson Rd. Spring Lake, MI 49456</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		10.00 \$	10.00 \$
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/19/2020</u></p> <p>Name &amp; Address: <u>Sandra Betten</u> <u>2805 Judson Rd. Spring Lake, MI 49456</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		100.00 \$	110.00 \$
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/19/2020</u></p> <p>Name &amp; Address: <u>Andrew Heykoop</u> <u>6465 Central Rd, Twin Lake, MI 49457</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Operations Manage</u> Employer <u>Eagle Towing</u> Business Address <u>2844 S. Mill Iron, Muskegon, MI 49444</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		100.00 \$	100.00 \$

Page Subtotal 1210.00

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 84075  
2. Committee Name Committee to Elect Malinda Pego

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/19/2020</u> Name & Address: <u>Craig Sherman</u> <u>1361 E. Tyler Rd, Hart MI 49420</u>		20.00 \$	20.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/19/2020</u> Name & Address: <u>Malja Hahn</u> <u>2091 Cory Dr, Hudsonville, MI 49426</u>		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/20/2020</u> Name & Address: <u>Ann Derouin</u> <u>1391 W. Laketon Ave. Muskegon, MI 49441</u>		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/20/2020</u> Name & Address: <u>Joe &amp; Angel Walker</u> <u>3570 Barker St. Hudsonville, MI 49426</u>		25.00 \$	25.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **145.00**

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 84075

2. Committee Name Committee to Elect Malinda Pego

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>5/21/2020</u>	
Name & Address: <u>Bonnie Kellogg</u> <u>512 S. Bear Lake Rd, N. Muskegon, MI 49445</u>		<u>200.00</u>	<u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____		<a href="#">Click Here for Memo Itemization</a>	
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>5/21/2020</u>	
Name & Address: <u>Julie Watson</u> <u>4836 Stony Creek, Comstock Park, MI 49321</u>		<u>50.00</u>	<u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
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 <u>5/22/2020</u>	
Name & Address: <u>Kathleen Sharkey</u> <u>5729 S. 142nd Ave, Rothbury, MI 49452</u>		<u>50.00</u>	<u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" 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 <u>5/26/2020</u>	
Name & Address: <u>Stephen Rockman</u> <u>15495 Sweetbriar Drive, Grand Haven, MI 49417</u>		<u>50.00</u>	<u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 350.00

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

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line 3a of Summary  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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>7/11/20</u> Name & Address: <u>Ann Derouin</u> <u>1391 W. Laketon Ave, Muskegon MI 49441</u>		<u>100.00</u> \$	<u>150.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/30/2020</u> Name & Address: <u>Lisa Lowder</u> <u>2565 Memorial Dr. North Muskegon, MI 49445</u>		<u>50.00</u> \$	<u>50.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Self-employed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>5/31/2020</u> Name & Address: <u>Debra Null</u> <u>605 Lakeshore Blvd, Norton Shores, MI 49444</u>		<u>100.00</u> \$	<u>100.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>Muskegon Pregnancy Serv.</u> Business Address <u>1775 Wells Ave, Muskegon, MI 49442</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>6/4/2020</u> Name & Address: <u>Kim Cyr</u> <u>8487 Staple Rd, Twin Lake, MI 49457</u>		<u>100.00</u> \$	<u>100.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 350.00

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>6/10/2020</u> Name & Address: <u>Deborah VanDyk</u> <u>2767 New Holland Dr. Hudsonville, MI 49426</u>		<u>125.00</u> \$	<u>125.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>6/14/2020</u> Name & Address: <u>Lyn Sample</u> <u>3416 Ewing Rd, Twin Lake, MI 49457</u>		<u>50.00</u> \$	<u>50.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>6/17/2020</u> Name & Address: <u>Benjamin Spencer</u> <u>4485 Apple Ave. Muskegon, MI 49442</u>		<u>50.00</u> \$	<u>50.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>6/17/2020</u> Name & Address: <u>Jodi Sodini</u> <u>5809 Larson, Muskegon, MI 49444</u>		<u>20.00</u> \$	<u>20.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 245.00

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

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line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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>6/23/2020</u> Name & Address: <u>Sandra Kempf</u> <u>713 Fowlet St. Muskegon, MI 49445</u>		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/2020</u> Name & Address: <u>Juna Spencer</u> <u>761 Murner Rd. Apt. D, Gaylord, MI 49735</u>		100.00 \$	100.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/2020</u> Name & Address: <u>Jeremy Hooker</u> <u>3110 Pinewood, Muskegon, MI 49444</u>		100.00 \$	100.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/2020</u> Name & Address: <u>Rachelle Meyers</u> <u>3625 Michillinda, Twin Lake, MI 49457</u>		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **300.00**

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

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line 3a of Summary  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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>6/26/2020</u> Name & Address: <u>Teresa Huston</u> <u>4845 Somerset Ct. Norton Shores, MI 49441</u>		<u>25.00</u> \$	<u>25.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/8/2020</u> Name & Address: <u>Ann Derouin</u> <u>1391 W. Laketon Ave. Muskegon, MI 49441</u>		<u>50.00</u> \$	<u>200.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/19/2020</u> Name & Address: <u>James Riley</u> <u>1138 Elsa Ave. Muskegon, MI 49441</u>		<u>200.00</u> \$	<u>200.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Finance Manager</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/26/2020</u> Name & Address: <u>Andrew Heykoop</u> <u>6465 Central Rd. Twin Lake, MI 49457</u>		<u>1000.00</u> \$	<u>1100.00</u> \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Eagle Towing</u> Business Address <u>2844 S Mill Iron Rd, Muskegon, MI 49444</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 1275.00

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

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6/27/2020

Name & Address:

Angela Bush  
4090 Braeburn Dr. Norton Shores, MI 49441

250.00

250.00

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation Unemployed Employer Unemployed

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/7/2020

Name & Address:

P D Black Enterprises Inc.  
210 N. Canada Rd.  
Casnovia, MI 49318

250.00

250.00

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation Farmer Employer Self-employed

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/6/20

Name & Address:

Darrel Evans  
6030 E. Apple Ave.  
Muskegon, MI 49442

20.00

20.00

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/7/20

Name & Address:

John Rapp  
11625 Sherman Blvd.  
Ravenna, MI 49451

500.00

500.00

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation Construction Employer Self-Employed

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 1020.00

Grand Total of All Schedules 1A  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 84075

2. Committee Name Committee to Elect Malinda Pego

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)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/7/2020</u></p> <p>Name &amp; Address: <u>Malinda Pego</u> <u>6230 3rd St.</u> <u>Holton, MI 49425</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>99.73</u> \$ _____	<u>99.73</u> \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/8/2020</u></p> <p>Name &amp; Address: <u>Martha Dillon</u> <u>207 Robinwood Dr.</u> <u>Whitehall, MI 49461</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>31.00</u> \$ _____	<u>31.00</u> \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/8/2020</u></p> <p>Name &amp; Address: <u>Ryan Leestma</u> <u>1599 Westwind Court</u> <u>Muskegon, MI 49445</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>self-employed</u>      Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>2100.00</u> \$ _____	<u>2100.00</u> \$ _____
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>7/8/2020</u></p> <p>Name &amp; Address: <u>Tammy &amp; Alan Jager</u> <u>8081 Holton Duck Lake Rd</u> <u>Holton, MI 49425</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>50.00</u> \$ _____	<u>50.00</u> \$ _____
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 2280.73

Grand Total of All Schedules 1A  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/8/2020</u> Name & Address: Zach Lahring 9770 Judson Rd. Ravenna, Mi 49451		1000.00 \$	2000.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Construction</u> Employer <u>Tridonn</u> Business Address <u>1461 Evanston Ave, Muskegon Mi 49442</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/8/2020</u> Name & Address: Kathy Wysozan 4521 Marshall Rd Muskegon, MI 49441		50.00 \$	50.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>house cleaner</u> Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/8/2020</u> Name & Address: Janet Brott 2536 Sullivan Rd Ravenna, MI 49451		100.00 \$	100.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>REtired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/20</u> Name & Address: Mark Hickmott 1880 Chatterson Rd Muskegon, MI 49442		150.00 \$	150.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Hickmott Homes</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1300.00

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

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

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>6/26/20</u> Name & Address: Sandra Betten 2805 Judson Rd. Spring Lake, MI 49456		100.00 \$	210.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/9/20</u> Name & Address: Christopher Kaijala 3242 Hall Rd Muskegon, MI 49442		10.00 \$	10.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/10/20</u> Name & Address: Sandra Betten 2805 Judson Rd. Spring Lake, MI 49456		200.00 \$	410.00 \$
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/20</u> Name & Address: Billie Picklesimer 3641 John St. Ravenna, MI 49451		20.00 \$	20.00 \$
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 330.00

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

8805.73

Enter this total on  
line 3a of Summary  
Page.



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

84075

1. Committee I. D. Number

2. Committee Name Committee to Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Right Strategies, LLC</u>  Address <u>2153 Wealthy St. SE, Suite 166</u> <u>East Grand Rapids, MI 49506</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Voter Data</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/10/2</u> Date	\$ <u>75.00</u>
Expenditure #2 Name <u>Home Depot</u>  Address <u>900 Jackson St.</u> <u>Grand Haven, MI 49417</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>signage posts</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/11/2</u> Date	\$ <u>112.26</u>
Expenditure #3 Name <u>Pixel Ink Frame, LLC</u>  Address <u>4485 E. Apple Ave.</u> <u>Muskegon, MI 49442</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard signs/cards</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/18/2</u> Date	\$ <u>1113.08</u>
Expenditure #4 Name <u>Tractor Supply</u>  Address <u>1328 West Main</u> <u>Fremont, MI 49412</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Puller</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/18/2</u> Date	\$ <u>45.57</u>
Expenditure #5 Name <u>Jonathan Chulski</u>  Address <u>258 Mill St.</u> <u>Big Rapids, MI 49307</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>mailers</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/22/2</u> Date	\$ <u>381.15</u>

Subtotal this page

1727.06

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**

84075

1. Committee I. D. Number \_\_\_\_\_  
2. Committee Name Committee to Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>United Sign</u>  Address <u>444 Irwin Ave.</u> <u>Muskegon, MI 49442</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>E-Z corostake</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/23/2</u> Date	\$ <u>95.40</u>
Expenditure #2 Name <u>Pixel Ink Frame LLC</u>  Address <u>4485 E. Apple Ave.</u> <u>Muskegon, MI 49442</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Magnets/business cards</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/25/2</u> Date	\$ <u>168.54</u>
Expenditure #3 Name <u>Lowe's</u>  Address <u>2035 East Sherman</u> <u>Muskegon, MI 49444</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>T-post for signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/25/2</u> Date	\$ <u>74.14</u>
Expenditure #4 Name <u>United States Post office</u>  Address <u>8779 Holton Duck Lake Rd</u> <u>Holton, MI 49425</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps/mailings</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/26/2</u> Date	\$ <u>24.20</u>
Expenditure #5 Name <u>Tractor Supply Co.</u>  Address <u>1328 West Main</u> <u>Fremont, MI 49412</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Stakes for signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/2</u> Date	\$ <u>142.78</u>
Subtotal this page			<b>505.06</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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on line 8a of  
Summary Page





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

84075

1. Committee I. D. Number

2. Committee Name

Committee to Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name Lamar Companies  Address P.O. Box 96030 Baton Rouge, LA 70896  <input type="checkbox"/> Fund Raiser	Purpose: <u>Billboard Ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/2</u> Date	\$ <u>900.0</u>
Expenditure #2 Name Donorbox  Address 5 3rd St, Suite 900 San Francisco, CA 94103  <input type="checkbox"/> Fund Raiser	Purpose: <u>June Bill/Fee's</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1/20</u> Date	\$ <u>19458</u>
Expenditure #3 Name Pixel Ink Frame LLC  Address 1934 E. Apple Ave Muskegon, MI 49442  <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1/20</u> Date	\$ <u>487.0</u>
Expenditure #4 Name Lowes  Address 2035 East Sherman Muskegon, MI 49444  <input type="checkbox"/> Fund Raiser	Purpose: <u>sign hardware</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/6/20</u> Date	\$ <u>62.90</u>
Expenditure #5 Name Lamar Companies  Address P.O. Box 96030 Baton Rouge, LA 70896  <input type="checkbox"/> Fund Raiser	Purpose: <u>Billboard #2</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/7/20</u> Date	\$ <u>900.0</u>

Subtotal this page

2544.48

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**

84075

1. Committee I. D. Number

2. Committee Name

Committee to Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Lamar Companies  Address P.O. Box 96030 Baton Rouge, LA 70896  <input type="checkbox"/> Fund Raiser	Purpose: <u>Billboard #3</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/8/20</u> Date	\$ <u>900.0</u>
Expenditure #2 Name Pixel Ink Frame LLC  Address 1934 E. Apple Ave Suite 310 Muskegon, MI 49442  <input type="checkbox"/> Fund Raiser	Purpose: <u>6x20 Banner</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/11/20</u> Date	\$ <u>197.69</u>
Expenditure #3 Name All Signs  Address 1005 W. Laketon Ave Muskegon, MI 49441  <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/11/2</u> Date	\$ <u>375.0</u>
Expenditure #4 Name The Ravenna Independent News LLC  Address 500 S. Ravenna Road Ravenna, MI 49451  <input type="checkbox"/> Fund Raiser	Purpose: <u>Full page ad</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/13/2</u> Date	\$ <u>125.0</u>
Expenditure #5 Name Lamar Companies  Address P.O. Box 96030 Baton Rouge, LA 70896  <input type="checkbox"/> Fund Raiser	Purpose: <u>Holton billboard #4</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/17/2</u> Date	\$ <u>900.0</u>

Subtotal this page

2497.69

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**

84075

1. Committee I. D. Number

2. Committee Name Committee To Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Right Strategies</u>  Address <u>2153 Wealthy, SE Suite 166</u> <u>East Grand Rapids, MI 49506</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailer Printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/17/2</u> Date	\$ <u>792.0</u>
Expenditure #2 Name <u>Tractor Supply</u>  Address <u>6435 Airline Rd</u> <u>Fruitport, MI 49415</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>t-posts</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/17/2</u> Date	\$ <u>28.56</u>
Expenditure #3 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	\$ _____
Expenditure #4 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	\$ _____
Expenditure #5 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	\$ _____

Subtotal this page

820.56

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

8094.85

Enter this total  
on line 8a of  
Summary Page

EXHIBIT 3-2

MICHIGAN DEPARTMENT OF STATE

CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Melinda Pego



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

FILED

NOV 25 2020

NANCY A. WATERS  
MUSKEGON COUNTY CLERK

FOR OFFICIAL USE ONLY

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: 10/18/20 to 11/23/20

1. Committee I.D. Number 84075		4. Candidate Last Name Pego		First Name Malinda	M.I. R
2. Committee Name Committee to Elect Malinda Pego		4a. Office Sought Including District # or Community Served (If applicable) Muskegon County Commissioner			
5. Committee's Mailing Address PO Box 145 Holton, MI 49425  Area Code and Phone 231-286-6240 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.		4b. County of Residence MUSKEGON			
6. Treasurer's Name & Residential Address Laurie Hawkins 6705 Holton Duck Lake Rd Holton, MI 49425  Area Code & Phone 231-286-9128		7. Treasurer's Business Address NA			
8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)		Area Code and Phone			
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" 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 11/3/2020		Required ONLY if candidate is not on the ballot for the current year: <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.)		9e. Dissolution of Candidate Committee <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.	
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 Laurie Hawkins Type or Print Name		Signature 		Date 11-23-20	
Candidate Malinda Pego Type or Print Name		Signature 		Date 11-23-2020	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 84075

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Malinda Pego

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>1350.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>1350.00</u>	(18.) \$ <u>12290.73</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u></u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>1350.00</u>	(20.) \$ <u></u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u></u>	(21.) \$ <u></u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u></u>	(22.) \$ <u>12290.73</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>1302.20</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u></u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>1302.20</u>	(23.) \$ <u>12059.68</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u></u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u></u>	(24.) \$ <u></u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u></u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
<b>BALANCE STATEMENT</b>			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>183.25</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>1350.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>1533.25</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>1302.20</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>231.05</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 84075  
2. Committee Name Committee to Elect Malinda Pego

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 11/14/20

Name & Address:

Ben Landheer  
194 Stewart  
Fremont, MI 49412

50.00

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 11/14/20

Name & Address

Eagles Eye Properties, LLC  
5490 Apple ave  
Muskegon MI 49442

100.00

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 11/14/20

Name & Address:

Mark Hickmott  
1880 S. Chatterson  
Muskegon, MI 49442

500.00

1150.00

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation Builder Employer Hickmott Homes

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 11/14/20

Name & Address

Muskegon County Republican Executive Committee  
Muskegon, MI 49445

700.00

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

1350.00

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

1350.00

Enter this total on  
line 3a of Summary  
Page.



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

84075

1. Committee I. D. Number

2. Committee Name Committee to Elect Malinda Pego

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Right Strategies, LLC</u>  Address <u>2153 Wealthy ST. SE Suite 166</u> <u>East Grand Rapids, MI 49506</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>mailers</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/14/20</u> Date	\$ <u>1302.20</u>
Expenditure #2 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	\$ _____
Expenditure #3 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	\$ _____
Expenditure #4 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	\$ _____
Expenditure #5 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	\$ _____
Subtotal this page			1302.20
Grand Total of all Schedules 1B (Complete on last page of Schedule)			1302.20

Enter this total  
on line 8a of  
Summary Page



EXHIBIT 4

MICHIGAN DEPARTMENT OF STATE  
CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Melinda Pego

**MICHIGAN CAMPAIGN FINANCE ACT (EXCERPT)**  
**Act 388 of 1976**

**169.243 Expenditure by agent or independent contractor; requirements; violation; penalty.**

Sec. 43. An expenditure shall not be made, other than for overhead or normal operating expenses, by an agent or an independent contractor, including an advertising agency, on behalf of or for the benefit of a person unless the expenditure is reported by the committee as if the expenditure were made directly by the committee, or unless the agent or independent contractor files a report of an independent expenditure as provided in section 51. The agent or independent contractor shall make known to the committee all information required to be reported by the committee. A person who knowingly is in violation of this subsection is guilty of a misdemeanor and shall be punished by a fine of not more than \$1,000.00, or imprisoned for not more than 90 days, or both, and if the person is other than an individual the person shall be fined not more than \$10,000.00.

**History:** 1976, Act 388, Eff. June 1, 1977.

EXHIBIT 5

MICHIGAN DEPARTMENT OF STATE

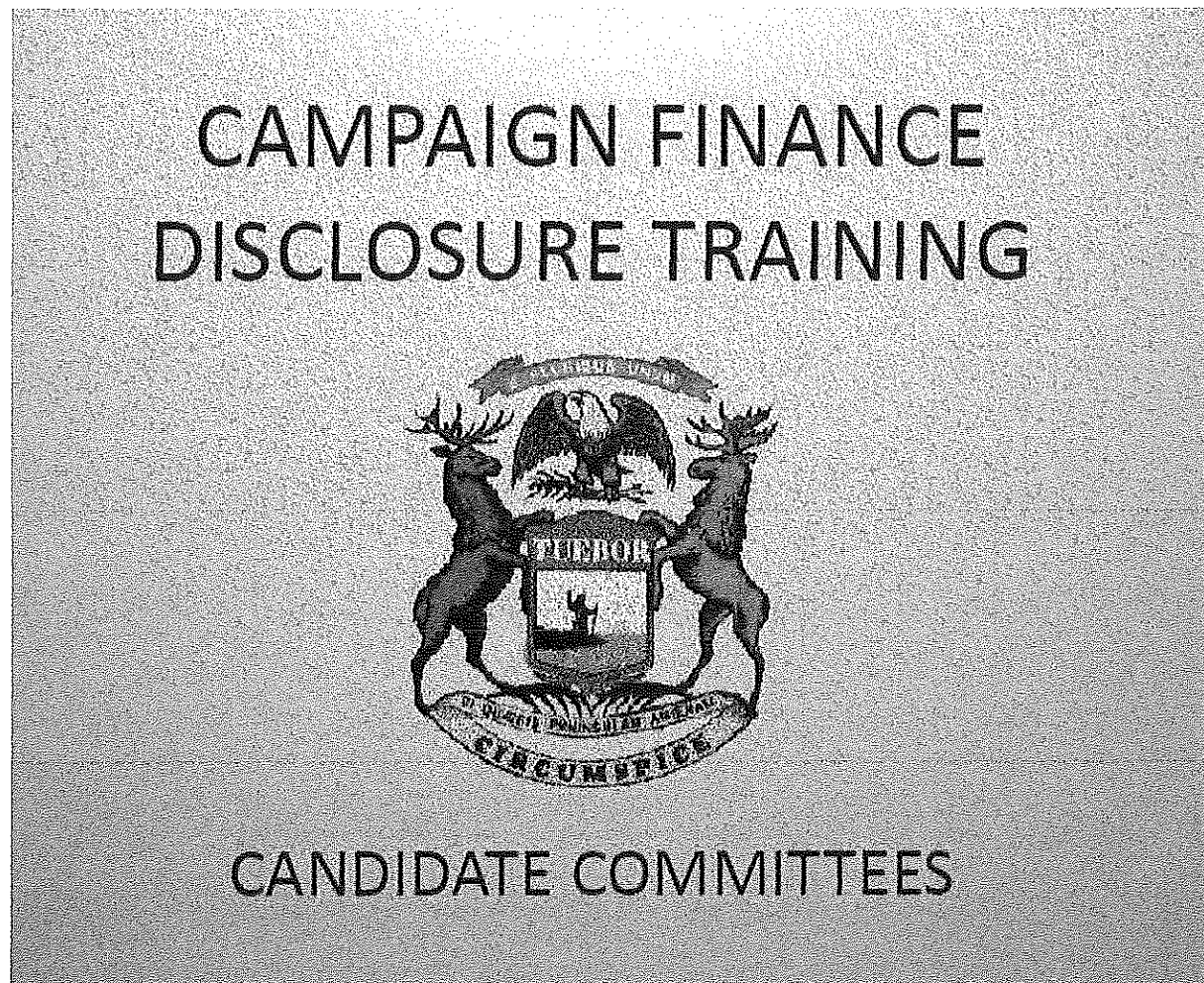
CAMPAIGN FINANCE COMPLAINT FORM

Complainant: Donald Munski

Alleged Violator: Melinda Pego

Example of how to report expenditures made on the campaigns behalf by an agent, or independent contractor.

Example provided by Michigan Department of State at MCFA/MERTS Candidate Training on 6/16/21



# Memo Itemization of Expenditure

- A Committee that contracts with an agent or an independent contractor to make expenditures on its behalf must disclose the expenditures made to and by the agent or independent contractor. This is done by **Memo Itemizing** the expenditure.
  - Vendors, consultants, campaign workers
  - Credit card payments
  - Reimbursements
  - Independent Contractors (Appendix L)

## Memo Itemization of Expenditure Example

The Committee to Elect George Mabry hired the firm Primo Consultants to produce some TV ads. Primo Consultants then hired WFAK TV to run the ad on their station. The transactions should be reported in the following way:

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE		1. Committee I. O. Number	2. Committee Name
		999999-1	Committee to Elect George Mabry
3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name: Primo Consultants Address: 333 Saginaw Lansing MI 48999 <input type="checkbox"/> Fund Raiser	Purpose: Hired to produce a TV ad <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/26/17 Date	\$ 5,000.00 Memo Itemization Below
Expenditure #2 Name: WFAK TV Address: 567 Allegan Lansing MI 48999 <input type="checkbox"/> Fund Raiser	Purpose: TV station running the ad <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/29/17 Date	\$ (3500.00) (Memo Itemization)



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

September 14, 2022

Melinda Pego  
P.O. Box 145  
Holton, MI 49425

Re: *Munski v. Pego*  
Campaign Finance Complaint No. 2022 – 04 – 10 – 52

Dear Ms. Pego:

The Department of State (Department) has received a formal complaint filed against you by Donald Munski alleging that you violated the Michigan Campaign Finance Act (MCFA or Act). Specifically, the complaint alleges that you accepted contributions in excess of the amount allowed, and that you reported expenditures without sufficient detail.<sup>1</sup> A copy of the complaint is included with this notice.

In Michigan, contributions to a candidate committee are governed by statute. MCL 169.252. Specifically, in local elections for districts containing fewer than 85,000 people, no person may donate more than \$1,050.00.

<https://mertsplus.com/mertsuserguide/index.php?n=MANUALS.LocalLevelOffices>.

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. 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.* An explanation of the process is included in the enclosed guidebook.

**If you wish to file a written response to this 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. Materials may be emailed to [BOERegulatory@michigan.gov](mailto:BOERegulatory@michigan.gov) or mailed 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

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<sup>1</sup> Mr. Munski also alleged that you failed to include sufficient detail when you reported expenditures amounting to \$2,094.20 to Right Strategies LLC for "mailer printing" and "mailers" and an expenditure of \$381.15 to Jonathan Chulski for "mailers." Because your campaign statement was accepted as sufficiently detailed by the county clerk, who is your proper filing official, the Department dismisses this allegation. MCL 169.216(6).

fail to submit a response, the Department will render a decision based on the evidence furnished by the complainant.

A copy of your answer will be provided to Mr. Munski, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing 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 penalty provided in section 33(11) of the Act.

If you have any questions concerning this matter, you may contact the Regulatory Section of the Bureau of Elections at [BOERegulatory@michigan.gov](mailto:BOERegulatory@michigan.gov).

Sincerely,

Regulatory Section  
Bureau of Elections  
Michigan Department of State



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

October 12, 2022

**SECOND NOTICE**

Melinda Pego  
P.O. Box 145  
Holton, MI 49425

Re: *Munski v. Pego*  
Campaign Finance Complaint No. 2022 – 04 – 10 – 52

Dear Ms. Pego:

The Department of State (Department) has received a formal complaint filed against you by Donald Munski alleging that you violated the Michigan Campaign Finance Act (MCFA or Act). Specifically, the complaint alleges that you accepted contributions in excess of the amount allowed, and that you reported expenditures without sufficient detail.<sup>1</sup> A copy of the complaint is included with this notice.

The Department sent you notice of this complaint in a letter dated September 14, 2022. That letter informed you that you had 15 business days from that date to provide a response to the complaint. **As a courtesy, the Department is extending you an opportunity to submit a response within 15 business days of the date of this second notice.** If you do not submit a response within 15 business days of the date of this notice, the Department will have no choice but to adjudicate the complaint based on the facts and allegations included in the complaint alone.

In Michigan, contributions to a candidate committee are governed by statute. MCL 169.252. Specifically, in local elections for districts containing fewer than 85,000 people, no person may donate more than \$1,050.00.

<https://mertsplus.com/mertsuserguide/index.php?n=MANUALS.LocalLevelOffices>.

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<sup>1</sup> Mr. Munski also alleged that you failed to include sufficient detail when you reported expenditures amounting to \$2,094.20 to Right Strategies LLC for “mailer printing” and “mailers” and an expenditure of \$381.15 to Jonathan Chulski for “mailers.” Because your campaign statement was accepted as sufficiently detailed by the county clerk, who is your proper filing official, the Department dismisses this allegation. MCL 169.216(6).



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. 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.* An explanation of the process is available on the Department's [website](#).

**If you wish to file a written response to this 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. Materials may be emailed to [BOERegulatory@michigan.gov](mailto:BOERegulatory@michigan.gov) or mailed 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 answer will be provided to Mr. Munski, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing 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.

If you have any questions concerning this matter, you may contact the Regulatory Section of the Bureau of Elections at [BOERegulatory@michigan.gov](mailto:BOERegulatory@michigan.gov).

Sincerely,

Regulatory Section  
Bureau of Elections  
Michigan Department of State



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

November 30, 2022

Malinda Pego  
P.O. Box 145  
Holton, MI 49425

Re: *Munski v. Pego*  
Campaign Finance Complaint No. 2022 – 04 – 10 – 52

Dear Ms. Pego:

The Department of State (Department) has finished investigating the campaign finance complaint filed against you by Donald Munski on January 12, 2022. The complaint alleges that you violated the Michigan Campaign Finance Act (MCFA or Act) by accepting contributions in excess of the amount allowed, and that you reported expenditures without sufficient detail.<sup>1</sup>

Specifically, the complaint alleges that you accepted the following contributions from the following individuals:

Andrew Heykoop—cumulative contributions of \$1,100  
Ryan Leestma—cumulative contributions of \$2,100  
Zach Lahring—cumulative contributions of \$2,000  
Mark Hickmott—cumulative contributions of \$1,150

The complaint includes copies of the filings that corroborate the cumulative contribution amounts from each individual.

You were notified of the complaint on September 14, 2022 but did not respond. As a courtesy, the Department sent you a second notice of the complaint on October 12, 2022. To date, you have not submitted a response; therefore the Department has no choice but to adjudicate the complaint based on the facts and allegations included in the complaint alone.

In Michigan, contributions to a candidate committee are governed by statute. MCL 169.252. Specifically, in local elections for districts containing fewer than 85,000 people, no person may

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<sup>1</sup> Mr. Munski also alleged that you failed to include sufficient detail when you reported two expenditures to Right Strategies LLC for “mailer printing” and one expenditure to Jonathan Chulski for “mailers.” Because your campaign statements were accepted as sufficiently detailed by the county clerk, who is your proper filing official, the Department dismisses this allegation. MCL 169.216(6).

donate more than \$1,050.00.

<https://mertsplus.com/mertsuserguide/index.php?n=MANUALS.LocalLevelOffices>.

Upon review, the evidence submitted supports the conclusion that a potential violation of the Act has occurred. When the Department finds that there may be reason to believe a violation has occurred, the Act requires the Department to use “informal methods such as a conference [or] conciliation” to correct the potential violation or to prevent further violation. MCL 169.215(10). The Department has 90 business days to reach an informal resolution of the matter. *Id.*

Given this, please contact the undersigned by emailing [BOERegulatory@Michigan.gov](mailto:BOERegulatory@Michigan.gov) to informally resolve this complaint. If the Department is unable to informally resolve the complaint by April 14, 2023, the Act requires the Department to refer the matter to the Department of Attorney General with a request that her office prosecute the criminal penalties outlined under the Act. MCL 169.233(11).

Sincerely,



Adam Fracassi, Regulatory Manager  
Regulatory Section  
Bureau of Elections  
Michigan Department of State

c: Donald Munski

## MDOS-BOERegulatory

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**From:** MDOS-BOERegulatory  
**Sent:** Tuesday, April 4, 2023 9:18 AM  
**To:** Malinda Pego  
**Subject:** FW: Munki vs Pego 2022-04-10-52

Ms. Pego,

Have you submitted your statements to the Muskegon County Clerk? The conciliation period for your complaint expires on April 13, at which time this matter will be referred to the Department of Attorney General if it has not been resolved. Please let us know when you have amended the reports.

Thank you,

**Jenny McInerney**  
*Regulatory Attorney*  
Regulatory Section  
[Michigan Bureau of Elections](#)  
**Main:** 517-335-3234

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**From:** MDOS-BOERegulatory  
**Sent:** Thursday, February 2, 2023 2:35 PM  
**To:** Malinda Pego <[pegoformuskegon@gmail.com](mailto:pegoformuskegon@gmail.com)>  
**Subject:** RE: Munki vs Pego 2022-04-10-52

You need to resubmit your pre-and post-election statements with the Muskegon County Clerk's office and indicate they're an amendment. You should work with the County Clerk specifically on how to submit that since they're the filing official.

Thanks!

**Adam Fracassi**, *Regulatory Manager*  
Bureau of Elections  
Michigan Department of State  
Secretary of State Jocelyn Benson  
P.O. Box 20126  
Lansing, Michigan 48901  
**Main:** 517-335-3234

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**From:** Malinda Pego <[pegoformuskegon@gmail.com](mailto:pegoformuskegon@gmail.com)>  
**Sent:** Tuesday, January 31, 2023 1:24 PM  
**To:** MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)>  
**Subject:** Re: Munki vs Pego 2022-04-10-52

**CAUTION: This is an External email. Please send suspicious emails to [abuse@michigan.gov](mailto:abuse@michigan.gov)**

Definitely.  
Which forms do I file for the amendments?  
Thanks!  
Malinda

On Thu, Jan 26, 2023 at 12:06 PM MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)> wrote:

Ms. Pego –

Thank you for this information. You will need to amend your reports to properly reflect the individual contributor. Please let me know when you have done this.

Thank you,

**Adam Fracassi**, *Regulatory Manager*

Bureau of Elections

Michigan Department of State

Secretary of State Jocelyn Benson

P.O. Box 20126

Lansing, Michigan 48901

**Main:** 517-335-3234

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**From:** Malinda Pego <[pegoformuskegon@gmail.com](mailto:pegoformuskegon@gmail.com)>

**Sent:** Friday, December 16, 2022 11:08 AM

**To:** MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)>

**Subject:** Re: Munki vs Pego 2022-04-10-52

**CAUTION: This is an External email. Please send suspicious emails to [abuse@michigan.gov](mailto:abuse@michigan.gov)**

This is all I have for now.

The rest must have been online donations.

I'm not sure how to retrieve that information at the moment.

Thanks ,

Malinda

On Fri, Dec 16, 2022 at 10:44 AM MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)> wrote:

Yes, please provide the spouse information demonstrating that it was from two distinct individuals – for example, a copy of the check, etc. You will also need to amend your campaign finance filings accordingly, and provide a copy of the amended reports.

Thanks,

Adam

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**From:** Malinda Pego <[pegoformuskegon@gmail.com](mailto:pegoformuskegon@gmail.com)>  
**Sent:** Wednesday, December 14, 2022 5:01 PM  
**To:** MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)>  
**Subject:** Re: Munski vs Pego 2022-04-10-52

**CAUTION: This is an External email. Please send suspicious emails to [abuse@michigan.gov](mailto:abuse@michigan.gov)**

Apparently an oversight and misunderstanding between myself and treasurer.

The contributions were consolidated as one and didn't separate and record and report separately with their spouse's information.

I can provide the spouse information for these contributions.

Please advise accordingly.

Thank you.

Malinda Pego

On Wed, Dec 14, 2022 at 4:22 PM MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)> wrote:

Ms. Pego,

Please review the determination that was sent as well as the attached complaint. The Department previously sent a notice in both September and October about the complaint. I would like to know a response you have to the complaint, if any and attempt to reach an informal resolution to the matter.

If you have any questions, let me know.

Thank you,

**Adam Fracassi**, *Regulatory Manager*

Michigan Bureau of Elections

P.O. Box 20126

Lansing, Michigan 48901

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**From:** Malinda Pego <[pegoforbuskegon@gmail.com](mailto:pegoforbuskegon@gmail.com)>  
**Sent:** Wednesday, December 14, 2022 11:45 AM  
**To:** MDOS-BOERegulatory <[MDOS-BOERegulatory@michigan.gov](mailto:MDOS-BOERegulatory@michigan.gov)>  
**Subject:** Munski vs Pego 2022-04-10-52

**CAUTION: This is an External email. Please send suspicious emails to [abuse@michigan.gov](mailto:abuse@michigan.gov)**

To whom it may concern,

This the first correspondence that I have received regarding this matter.

This is my notification upon receiving today,

December 14, 2022.



I will have to review this matter.

Please provide me with a phone number for communications with this office.

Thank you,

Malinda Pego

231-286-6240



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

April 21, 2023

Malinda Pego  
P.O. Box 145  
Holton, MI 49425

*Via email*

Re: *Munski v. Pego*  
Campaign Finance Complaint No. 2022 – 04 – 10 – 52

Dear Ms. Pego,

The Department of State (Department) has determined that you have filed your requisite campaign finance reports with the Muskegon County, as directed in the Department's November 30, 2022 determination and correspondence sent in February and April of 2023.

Given this, the Department concludes that a formal warning is a sufficient resolution to the complaint and considers the complaint concluded. Please note that your filing official may require additional amendments to your filings and work with them to correct any issues.

Thank you for your resolution of this matter.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jenny McInerney".

Jenny McInerney, Regulatory Attorney  
Regulatory Sections  
Bureau of Elections  
Michigan Department of State

c: Donald Munski