



Michigan Department of State Campaign Finance Complaint Form

This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (MCFA). Electronic submission of the form to BOERegulatory@Michigan.gov is strongly recommended. 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 Matthew Schonert		Daytime telephone number +1 (231) 250-9931
Mailing address 22050 Boulder Ave		
City Eastpointe	State MI	Zip 48021
Email (recommended) MRSCHONERT@GMAIL.COM		

Section 2. Alleged Violator (Respondent)

Name Wanda Moody		
Mailing address 18460 Lister Ave		
City Eastpointe	State MI	Zip 48021
Email (recommended) wandamoodyforcitycouncil@gmail.com		
Committee ID (optional) Committee ID 140321 with the Macomb County Clerk		

Please include email addresses to expedite processing time and mitigate mail delays.

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

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

MCL 169.226(d)
MCL 169.226(e)

Explain how these sections were violated:

MCL 169.226(d) - No fundraising schedule (1F) was included with pre-general campaign statement (original or amended) despite a BBQ fundraiser advertised for Oct. 14, which fell during the coverage period for the pre-general statement.

MCL 169.226(e) - Occupations and employer information is blank for some individuals who each cumulatively contributed more than \$100. Examples (name followed by cumulative contribution):

Alfred Ragsdale \$125

Katrina Green \$270

Travis Moody \$290

Toby Gallant \$200

LaTaisha Little \$220

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

MCL 169.226(d) - I have attached copies of social media posts and graphics promoting the Oct. 14 fundraiser and a copy of the original and amended pre-general campaign statements which do not include schedule 1F.

MCL 169.226(e) - I have attached a copy of the original and amended pre-general campaign statements showing the contributions and absence of occupation and employer information.

The campaign statements are also available online from Macomb County Clerk:

<https://campaignfinance.us/docs.macomb.mi/471782030.PDF> (amended)

<https://campaignfinance.us/docs.macomb.mi/471780314.PDF> (original)

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.



Signature of complainant

10/27/2023

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:

Not applicable

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 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, submit the complaint form with your evidence to BOERegulatory@Michigan.gov. Alternatively, you may 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

Eastpointe Michigan Residents Group

Discussion

Featured

People

Events

Media

Files



Wanda Moody

October 14 at 4:43 PM · 🌐



Keeping my word. Rain or shine. Come on through for eats and greets.



- 14-YEAR EASTPOINTE RESIDENT
- CHAIR, EASTPOINTE ARTS, CULTURAL & DIVERSITY COMMISSION (8/2022 - PRESENT)
- COMMISSIONER, PLANNING COMMISSION (1/2023 - PRESENT)
- 2023 CITY PLANNER CERTIFICATE - MSU EXTENSION
- LIFE, ACCIDENT & HEALTH INSURANCE AGENT (2014 - PRESENT) NON-RESIDENT LICENSE (AL, FL, TN, IL)
- NAACP MEMBER

November 7th Vote For

WANDA **MOODY**
CITY COUNCIL

OF EASTPOINTE

Caring for the People

JOIN US FOR A **STROLLING**
BACKYARD BBQ FUNDRAISER

Saturday, October 14th

3PM to 6PM

18460 Lister Ave., Eastpointe, MI



November 7th Vote For

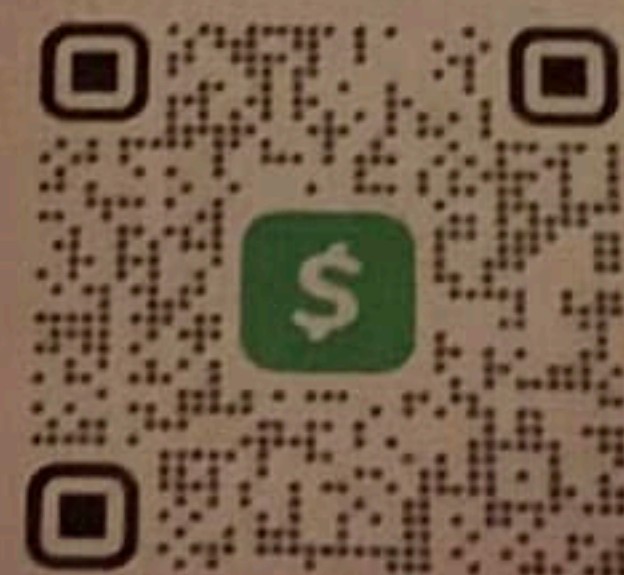
WANDA MOODY CITY COUNCIL OF EASTPOINTE

- 14-YEAR EASTPOINTE RESIDENT
- CHAIR, EASTPOINTE ARTS, CULTURAL & DIVERSITY COMMISSION (8/2022 -PRESENT)
- COMMISSIONER, PLANNING COMMISSION (1/2023 - PRESENT)
- 2023 CITY PLANNER CERTIFICATE - MSU EXTENSION
- LIFE, ACCIDENT & HEALTH INSURANCE AGENT (2014 - PRESENT) NON-RESIDENT LICENSE (AL, FL, TN, IL)
- NAACP MEMBER

Caring for the People

JOIN US FOR A **STROLLING** BACKYARD BBQ FUNDRAISER

Saturday, October 14th
3PM to 6PM
18460 Lister Ave., Eastpointe, MI



Wanda Moody

Scan to pay \$Moody4Council

PAID FOR BY FRIENDS TO ELECT WANDA MOODY FOR CITY COUNCIL
(313) 682-6754



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1 Committee ID Number: 140321		3 This Statement covers From <u>06/12/23</u> <u>10/22/23</u>	
2 Committee Name: Friends to Elect Wanda Moody for City Council		4 Candidate Last Name <u>Moody</u> First Name <u>Wanda</u> MI <u>F</u> 4a Office Sought (including District # or Community Served (if applicable)) City Council 4b County of Residence <u>MACOMB</u>	
5 Committee's Mailing Address: 18460 Lister Ave. Eastpointe, MI 48021 Area Code and Phone <u>(313) 657-0404</u> <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>		6 Treasurer's Name & Residential Address: Pam Russell 23600 Kelly Rd. Apt 1 Eastpointe, MI 48021 Area Code & Phone <u>(313) 742-7769</u>	
7 Treasurer's Business Address: Area Code and Phone _____		8 Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper): Cynthia Scott 18435 Onyx St Southfield, MI 48075 Area Code and Phone <u>(313) 680-2503</u>	
9 TYPE OF STATEMENT 9a <input checked="" type="checkbox"/> Pre-Election OR 9b <input 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 <u>11/07/2023</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.) 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 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.	
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>Cynthia Scott</u> Type or Print Name <u>Cynthia M. Scott</u> Signature <u>[Signature]</u> Date <u>10/25/2023</u>			
Candidate: <u>Wanda Moody</u> Type or Print Name <u>Wanda Moody</u> Signature <u>[Signature]</u> Date <u>10/25/2023</u>			



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee ID Number 140321

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Friends to elect Wanda Moody to City Council

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a) \$	<u>1,223.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c) \$	<u>\$1,223.00</u>	(18) \$ _____
4. Other Receipts (Schedule 1A - 1, Column 6)	(4) \$	_____	(19) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5) \$	<u>\$1,223.00</u>	(20) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6) \$	_____	(21) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7) \$	_____	(22) \$ _____
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a) \$	<u>\$567.67</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b) \$	_____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c) \$	_____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9) \$	<u>\$567.67</u>	(23) \$ _____
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b) \$	<u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11) \$	<u>\$0.00</u>	(24) \$ _____
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed)	(13) \$	<u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14) + \$	<u>\$1,223.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15) = \$	<u>\$1,223.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16) - \$	<u>\$567.67</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17) \$	<u>\$655.33</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1 Committee I.D. Number 140321
2 Committee Name Committee to elect Wanda Moody for City Council

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>07/29/2023</u> Name & Address: Mary Hives 2172 Tullis Dr. Montgomery, AL 36111 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		\$ <u>25.00</u>	\$ <u>20.00</u>
		Click Here for Memo Itemization	
3 Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address: Christine Fails-Raymond 315 Cone Dr. Selma, AL 36701 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		\$ <u>20.00</u>	\$ <u>40.00</u>
		Click Here for Memo Itemization	
3 Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address: Deloise Smith 204 Crestwood Dr. Selma, AL 36702 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		\$ <u>20.00</u>	\$ <u>60.00</u>
		Click Here for Memo Itemization	
3 Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address: LaQuita Logan 86 Double D Rd Pikeville, TN 37367 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		\$ <u>20.00</u>	\$ <u>85.00</u>
		Click Here for Memo Itemization	

Page Subtotal **\$85.00**

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 140321

2. Committee Name Committee to Elect Wanda Moody for City Council

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address:</p> <p>Thomas Logan 13088 Jackson Trace Rd. Lincoln, AL 35096</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>28.00</u>	\$ <u>28.00</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address:</p> <p>Vanetta Holloway 5064 Karl Rd. Columbus, OH 43229</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>20.00</u>	\$ <u>48.00</u>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address:</p> <p>Earl Holloway 5064 Karl Rd Columbus, OH 43229</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>5.00</u>	\$ <u>53.00</u>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address:</p> <p>Ron Portis 571 Gosport Landing Rd Whatley, AL 36482</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>20.00</u>	\$ <u>73.00</u>

Page Subtotal **\$73.00**

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1 Committee I D Number 140321

2 Committee Name Committee to elect Wanda Moody for City Council

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>07/29/2023</u>	
Name & Address: Lemuel Perkins, Jr. 391 Halsell St. Monroe, LA 71203		\$ <u>40.00</u>	\$ <u>40.00</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		Click Here for Memo Itemization	
3 Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4 Date of Receipt <u>07/29/2023</u>	
Name & Address: Janell Hives 384 E. 16th St Columbus, OH 43201		\$ <u>10.00</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		Click Here for Memo Itemization	
3 Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4 Date of Receipt <u>07/29/2023</u>	
Name & Address: Mark Hives 384 E. 16th St Columbus, OH 43201		\$ <u>5.00</u>	\$ <u>55.00</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		Click Here for Memo Itemization	
3 Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4 Date of Receipt <u>07/29/2023</u>	
Name & Address: Thoris McConnell 384 16th St Columbus, OH 43201		\$ <u>5.00</u>	\$ <u>60.00</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		Click Here for Memo Itemization	

Page Subtotal **\$60.00**

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 140321
2. Committee Name Committee to elect Wanda Moody for City Council

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 Name & Address: Richard Perkins, Jr 45265 Greenbriar Dr. Van Buren Twp, MI 48111 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		\$ 10.00	\$ 10.00 Click Here for Memo Itemization
3. Contribution #2 Name & Address: Richard Perkins, III 27392 Mill Creek Dr. Brownstown, MI 48183 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		\$ 10.00	\$ 20.00 Click Here for Memo Itemization
3. Contribution #3 Name & Address: Samantha Perkins 27392 Mill Creek Dr. Brownstown, MI 48283 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		\$ 5.00	\$ 25.00 Click Here for Memo Itemization
3. Contribution #4 Name & Address: Cynthia Scott 18435 Onyx St Southfield, MI 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		\$ 50.00	\$ 75.00 Click Here for Memo Itemization

Page Subtotal \$75.00

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(Complete on last page of Schedule)

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Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I D Number 140321

2. Committee Name Committee to elect Wanda Moody for City Council

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 Name & Address Aaron Moody 18460 Lister, Ave. Eastpoint, MI 48021 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		\$ 50.00	\$ 50.00
3 Contribution #2 Name & Address Lemuel J. Perkins, Sr 4910 Country Rd 1 Frisco City, AL 36445 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		\$ 30.00	\$ 80.00
3 Contribution #3 Name & Address Ronnie Davis PO Box 85657 Westland, MI 48185 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		\$ 20.00	\$ 100.00
3 Contribution #4 Name & Address Alfred Ragsdale 18472 Lister Eastpointe, MI 48021 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		\$ 25.00	\$ 125.00

Page Subtotal \$125.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 140321

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/04/2023</u> Name & Address: Jerald Bussey 401 Teravista Pkwy #311 Round Rock, TX 78665		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Independent Sales Agent</u> Employer <u>Colonial Life Insurance</u> Business Address <u>30700 Telegraph Rd., Ste 2620, Bingham Farms, MI 48025</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	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/14/2023</u> Name & Address: Katrina Green 11761 Stamford Ave Warren, MI 48089		\$ <u>20.00</u>	\$ <u>270.00</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		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/14/2023</u> Name & Address: Travis Moody 11762 Stamford Ave Warren, MI 48089		\$ <u>20.00</u>	\$ <u>290.00</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		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/13/2023</u> Name & Address: William Hill 47160 Merion Circle Northville, MI 48168		\$ <u>200.00</u>	\$ <u>490.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Public Sector Mgr</u> Employer <u>Colonial Life Insurance</u> Business Address <u>30700 Telegraph Rd., Ste 2620, Bingham Farms, MI 48025</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	

Page Subtotal \$490.00

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Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 140321

2. Committee Name Friends to elect Wanda Moody for City Council

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 10/16/2023

Name & Address:

Robin Basil
827 Michelson Rd
Rochester Hills, 48307

\$ 100.00

\$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/16/2023

Name & Address

Toby Gallant
790 Red Run Dr.
Troy, MI 48085

\$ 100.00

\$ 200.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 10/15/2023

Name & Address:

LaTaisha Little
2748 Pasadena
Detroit, MI 48238

\$ 20.00

\$ 220.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/30/2023

Name & Address

Wanda Moody
18460 Lister Ave
Eastpointe, MI 48021

\$ 100.00

\$ 320.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

\$320.00

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

\$1,223.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1 Committee I.D. Number 140321
2 Committee Name Friends to elect Wanda Moody for City Council

3 Name and address of person or vendor to whom paid	4 Purpose (Required Information)	5 Date	6 Amount
Expenditure #1 Name <u>Magnets on the Cheap</u> Address <u>11525 Stonehollow Dr #B220</u> <u>Austin, TX 78756</u> <input type="checkbox"/> Fund Raiser	Purpose <u>Car side political magnets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/2023</u> Date	<u>\$ 69.92</u>
Expenditure #2 Name <u>UZ Marketing</u> Address <u>5900 Bingle Rd</u> <u>Houston, TX 77092</u> <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>09/21/2023</u> Date	<u>\$ 235.37</u>
Expenditure #3 Name <u>U Printing</u> Address <u>8000 Haskell Ave</u> <u>Van Nuys, CA 91406</u> <input type="checkbox"/> Fund Raiser	Purpose <u>Post cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/2023</u> Date	<u>\$ 199.71</u>
Expenditure #4 Name <u>Magnets on the Cheap</u> Address <u>11525 Stonehollow Dr #B220</u> <u>Austin, TX 78756</u> <input type="checkbox"/> Fund Raiser	Purpose <u>Car side magnets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/2023</u> Date	<u>\$ 50.67</u>
Expenditure #5 Name <u>First State Bank</u> Address <u>24300 Little Mack</u> <u>Saint Clair Shores, MI 48080</u> <input type="checkbox"/> Fund Raiser	Purpose <u>Cumulative bank fees 4 months @ \$3.00 each</u> (Memo itemization) <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/2023</u> Date	<u>\$ 12.00</u>
Subtotal this page			\$567.67
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$567.67

Enter this total
on line 8a of
Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1 Committee I.D. Number 140321		3. This Statement covers From: <u>07/29/2023</u> to <u>10/16/2023</u>	
2. Committee Name Friends to Elect Wanda Moody for City Council		4 Candidate Last Name Moody First Name Wanda M.I. F 4a Office Sought Including District # or Community Served (if applicable) City Council 4b. County of Residence MACOMB	
5. Committee's Mailing Address 18460 Lister Ave. Eastpointe, MI 48021 Area Code and Phone <u>(313) 657-0404</u> <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>		6. Treasurer's Name & Residential Address Pam Russell 23600 Kelly Rd. Apt 1 Eastpointe, MI 48021 Area Code & Phone <u>(313) 742-7769</u>	
7. Treasurer's Business Address Area Code and Phone _____		8. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper) Cynthia Scott 18435 Onyx St Southfield, MI 48075 Area Code and Phone <u>(313) 680-2503</u>	
9 TYPE OF STATEMENT 9a <input checked="" type="checkbox"/> Pre-Election OR 9b <input 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 <u>11/07/2023</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.) 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 <u>Cynthia Scott</u> Type or Print Name		<u>Cynthia Scott</u> Signature	
Candidate <u>Wanda Moody</u> Type or Print Name		<u>Wanda Moody</u> Signature	
		Date <u>10/18/2023</u>	
		Date <u>10/18/2023</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 140321

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Friends to elect Wanda Moody to City Council

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a) \$	<u>1,223.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c) \$	<u>\$1,223.00</u>	(18) \$ <u> </u>
4. Other Receipts (Schedule 1A - 1, Column 6)	(4) \$	<u> </u>	(19) \$ <u> </u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5) \$	<u>\$1,223.00</u>	(20) \$ <u> </u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
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> </u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a) \$	<u>\$567.67</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>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9) \$	<u>\$567.67</u>	(23) \$ <u> </u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b) \$	<u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11) \$	<u>\$0.00</u>	(24) \$ <u> </u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13) \$	<u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14) + \$	<u>\$1,223.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15) = \$	<u>\$1,223.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16) - \$	<u>\$567.67</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17) \$	<u>\$655.33</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1 Committee I.D. Number 140321

2 Committee Name Committee to elect Wanda Moody for City Council

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>07/29/2023</u> Name & Address Mary Hives 2172 Tullis Dr. Montgomery, AL 36111		\$ <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		Click Here for Memo Itemization	
3 Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address Christine Fails-Raymond 315 Cone Dr. Selma, AL 36701		\$ <u>20.00</u>	\$ <u>40.00</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		Click Here for Memo Itemization	
3 Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address Deloise Smith 204 Crestwood Dr. Selma, AL 36702		\$ <u>20.00</u>	\$ <u>60.00</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		Click Here for Memo Itemization	
3 Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4 Date of Receipt <u>07/29/2023</u> Name & Address LaQuita Logan 86 Double D Rd Pikeville, TN 37367		\$ <u>20.00</u>	\$ <u>80.00</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		Click Here for Memo Itemization	

Page Subtotal \$80.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321
2. Committee Name Committee to Elect Wanda Moody for City Council

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>07/29/2023</u> Name & Address: Thomas Logan 13088 Jackson Trace Rd. Lincoln, AL 35096		\$ <u>28.00</u>	\$ <u>28.00</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		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u> Name & Address: Vanetta Holloway 5064 Karl Rd. Columbus, OH 43229		\$ <u>20.00</u>	\$ <u>48.00</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		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u> Name & Address: Earl Holloway 5064 Karl Rd Columbus, OH 43229		\$ <u>5.00</u>	\$ <u>53.00</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		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u> Name & Address: Ron Portis 571 Gosport Landing Rd Whatley, AL 36482		\$ <u>20.00</u>	\$ <u>73.00</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		Click Here for Memo Itemization	

Page Subtotal \$73.00

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321
2. Committee Name Committee to elect Wanda Moody for City Council

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>07/29/2023</u>	
Name & Address: Lemuel Perkins, Jr. 391 Halsell St. Monroe, LA 71203		\$ <u>40.00</u>	\$ <u>40.00</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		Click Here for Memo Itemization	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/29/2023</u>	
Name & Address: Janell Hives 384 E. 16th St Columbus, OH 43201		\$ <u>10.00</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		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/29/2023</u>	
Name & Address: Mark Hives 384 E. 16th St Columbus, OH 43201		\$ <u>5.00</u>	\$ <u>55.00</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		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/29/2023</u>	
Name & Address: Thoris McConnell 384 16th St Columbus, OH 43201		\$ <u>5.00</u>	\$ <u>60.00</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		Click Here for Memo Itemization	

Page Subtotal \$60.00

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

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line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321

2. Committee Name Committee to elect Wanda Moody for City Council

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>07/29/2023</u></p> <p>Name & Address:</p> <p>Richard Perkins, Jr 45265 Greenbriar Dr. Van Buren Twp, MI 48111</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>10.00</u>	\$ <u>10.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address</p> <p>Richard Perkins, III 27392 Mill Creek Dr. Brownstown, MI 48183</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>10.00</u>	\$ <u>20.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/29/2023</u></p> <p>Name & Address</p> <p>Samantha Perkins 27392 Mill Creek Dr. Brownstown, MI 48283</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>5.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/20/2023</u></p> <p>Name & Address</p> <p>Cynthia Scott 18435 Onyx St Southfield, MI</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>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>75.00</u>
		Click Here for Memo Itemization	

Page Subtotal \$75.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321

2. Committee Name Committee to elect Wanda Moody for City Council

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>09/17/2023</u></p> <p>Name & Address: Aaron Moody 18460 Lister, Ave. Eastpoint, MI 48021</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>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2023</u></p> <p>Name & Address: Lemuel J. Perkins, Sr 4910 Country Rd 1 Frisco City, AL 36445</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>30.00</u>	\$ <u>80.00</u>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2023</u></p> <p>Name & Address: Ronnie Davis PO Box 85657 Westland, MI 48185</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>20.00</u>	\$ <u>100.00</u>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2023</u></p> <p>Name & Address: Alfred Ragsdale 18472 Lister Eastpointe, MI 48021</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>25.00</u>	\$ <u>125.00</u>

Page Subtotal \$125.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321
2. Committee Name Committee to elect Wanda Moody for City Council

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>10/04/2023</u></p> <p>Name & Address: Jerald Bussey 401 Teravista Pkwy #311 Round Rock, TX 78665</p>		\$ <u>250.00</u>	\$ <u>250.00</u>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Independent Sales Agent</u> Employer <u>Colonial Life Insurance</u> Business Address <u>30700 Telegraph Rd., Ste 2620, Bingham Farms, MI 48025</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2023</u></p> <p>Name & Address: Katrina Green 11761 Stamford Ave Warren, MI 48089</p>		\$ <u>20.00</u>	\$ <u>270.00</u>
<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>		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/14/2023</u></p> <p>Name & Address: Travis Moody 11762 Stamford Ave Warren, MI 48089</p>		\$ <u>20.00</u>	\$ <u>290.00</u>
<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>		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/2023</u></p> <p>Name & Address: William Hill 47160 Merion Circle Northville, MI 48168</p>		\$ <u>200.00</u>	\$ <u>490.00</u>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Public Sector Mgr</u> Employer <u>Colonial Life Insurance</u> Business Address <u>30700 Telegraph Rd., Ste 2620, Bingham Farms, MI 48025</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		Click Here for Memo Itemization	

Page Subtotal \$490.00

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

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line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140321
2. Committee Name Friends to elect Wanda Moody for City Council

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 Name & Address: Robin Basil 827 Michelson Rd Rochester Hills, 48307 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		\$ 100.00	\$ 100.00
3. Contribution #2 Name & Address: Toby Gallant 790 Red Run Dr. Troy, MI 48085 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		\$ 100.00	\$ 200.00
3. Contribution # 3 Name & Address: LaTaisha Little 2748 Pasadena Detroit, MI 48238 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		\$ 20.00	\$ 220.00
3. Contribution # 4 Name & Address: Wanda Moody 18460 Lister Ave Eastpointe, MI 48021 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ 100.00	\$ 320.00

Page Subtotal \$320.00

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

\$1,223.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 140321
2. Committee Name Friends to elect Wanda Moody for City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Magnets on the Cheap Address 11525 Stonehollow Dr #B220 Austin, TX 78756 <input type="checkbox"/> Fund Raiser	Purpose <u>Car side political magnets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/2023</u> Date	<u>\$ 69.92</u> Click Here for Memo Itemization Type
Expenditure #2 Name UZ Marketing Address 5900 Bingle Rd Houston,, TX 77092 <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>09/21/2023</u> Date	<u>\$ 235.37</u> Click Here for Memo Itemization Type
Expenditure #3 Name U Printing Address 8000 HaskellAve Van Nuys, CA 91406 <input type="checkbox"/> Fund Raiser	Purpose <u>Post cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/2023</u> Date	<u>\$ 199.71</u> Click Here for Memo Itemization Type
Expenditure #4 Name Magnets on the Cheap Address 11525 Stonehollow Dr #B220 Austin, TX 78756 <input type="checkbox"/> Fund Raiser	Purpose <u>Car side magnets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/2023</u> Date	<u>\$ 50.67</u> Click Here for Memo Itemization Type
Expenditure #5 Name First State Bank Address 24300 Little Mack Saint Clair Shores, MI 48080 <input type="checkbox"/> Fund Raiser	Purpose <u>Cumulative bank fees: 4 months @ \$3.00 each</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/2023</u> Date (Memo Itemization)	<u>\$ 12.00</u>
Subtotal this page			\$567.67
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$567.67

Enter this total
on line 8a of
Summary Page



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

November 8, 2023

Wanda Moody
18460 Lister Ave
Eastpointe, MI 48021

Re: *Schonert v. Moody*
Campaign Finance Complaint No. 23-098

Dear Ms. Moody:

The Department of State (Department) has received a formal complaint filed against you by Matthew Schonert alleging that you violated the Michigan Campaign Finance Act (MCFA or Act). Specifically, the complaint alleges that you failed to report an October 14, 2021 fundraiser in your pre-general campaign statement. Additionally, the complaint alleges that you failed to properly report contributions made by individuals donating more than \$100. A copy of the complaint is included with this notice.

Section 26 of the MCFA specifies the information that must be included in a committee campaign statement. In addition to committee information, contributions, and expenditures, a committee must disclose certain information regarding fundraisers. The Act requires that each fund-raising event must be included in the report. MCL 169.226(d).

Additionally, campaign statements are required to include additional information from contributors who contribute more than \$100 cumulatively. A campaign statement is required to include the occupation, employer, and place of business for any individual that contributes cumulatively more than \$100 MCL 169.226(e). anyone that contributes more than cumulative contributions from individuals. Specifically, the complaint alleges cumulative contributions from Alfred Ragsdale, Katrina Green, Travis Moody, Toby Gallant, & LaTaisha Little exceed \$100 without the disclosure of occupational information.

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

Wanda Moody

Page 2

BOERegulatory@michigan.gov or mailed to the Department of State, Bureau of Elections, Richard H. Austin Building, 1st 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. Schonert, 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.

Sincerely,

Regulatory Section
Bureau of Elections
Michigan Department of State

Enclosure
c: Matthew Schonert

From: [wanda.moody](#)
To: [MDOS-BOERegulatory](#)
Subject: Campaign Finance Committee No. 23-098
Date: Saturday, November 18, 2023 6:18:20 PM
Attachments: [Wanda Moody Revised Election Forms.pdf](#)

**CAUTION: This is an External email. Please send suspicious emails to
abuse@michigan.gov**

In Schonert v. Moody, Campaign Finance Committee No. 23-098. The complaint specifically states that Alfred Ragsdale, Katrina Green, Travis Moody, Toby Gallant, and LaTaisha Little made cumulative contributions that exceeded \$100.00. The total amount for the persons was not more than \$100.00. Each contribution amount should have flowed over to column 7, however the numbers in column 6 were inadvertently added to column 7. Per conversation with the Macomb County Election Department, upon their recommendation, an amended Schedule A has been filed. Kindly find a copy attached.

Hopefully, this explanation will address the current complaint. Please accept that this was a sincere error. I await your reply with reference to the next steps surrounding this matter.

Have a great remainder of your day.

Wanda Moody
18460 ListerAve.
Eastpointe, MI 48021
(313)657-0404



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

1 Committee ID Number 140321		3 This Statement covers From <u>06/12/23</u> to <u>10/22/23</u> <u>MI</u>	
2 Committee Name Friends to Elect Wanda Moody for City Council		4 Candidate Last Name Moody First Name Wanda F	
5 Committee's Mailing Address 18460 Lister Ave. Eastpointe, MI 48021		4a Office Sought Including District # or Community Served (If applicable) City Council	
Area Code and Phone (313) 657-0404 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 MACOMB	
7 Treasurer's Business Address Cynthia Scott 18435 Onyx St Southfield, MI 48075		6 Treasurer's Name & Residential Address Pam Russell 23600 Kelly Rd. Apt 1 Eastpointe, MI 48021	
Area Code and Phone _____		Area Code & Phone (313) 742-7769	
9 TYPE OF STATEMENT 9a <input checked="" type="checkbox"/> Pre-Election OR 9b <input 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		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	
Date of Election Convention or Caucus <u>11/07/2023</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)	
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 Cynthia Scott Type or Print Name		Signature <i>Cynthia Scott</i> Date <u>11/17/23</u>	
Candidate Wanda Moody Type or Print Name		Signature <i>Wanda Moody</i> Date <u>11-17-2023</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1 Committee ID Number 140321
Committee to elect Wanda Moody for City Council

3 Contribution # 1 Name & Address	4 Date of Receipt	6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Mary Hives 2172 Tullis Dr Montgomery, AL 36111	07/29/2023	\$ 25.00	\$ 20.00

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

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution #2
Name & Address

Christine Falls-Raymond
315 Cone Dr.
Selma, AL 36701

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

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution # 3
Name & Address

Deloise Smith
204 Crestwood Dr
Selma, AL 36702

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

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution # 4
Name & Address

LaQuita Logan
86 Double D Rd
Pikeville, TN 37367

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

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$85.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

140321

1 Committee / D Number
Committee to Elect Wanda Moody for City Council

CANDIDATE COMMITTEE

2 Committee Name

3 Contribution # 1 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt 07/29/2023	5 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
--------------------------------------	---	------------------------------	----------	---

Thomas Logan
13088 Jackson Trace Rd
Lincoln, AL 35096

\$ 28.00 \$ 28.00

5 If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution #2 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt 07/29/2023	5 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Vanetta Holloway
5064 Karl Rd.
Columbus, OH 43229

\$ 20.00 \$ 20.00

5 If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution # 3 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt 07/29/2023	5 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
--------------------------------------	---	------------------------------	----------	---

Earl Holloway
5064 Karl Rd
Columbus, OH 43229

\$ 5.00 \$ 5.00

5 If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution # 4 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt 07/29/2023	5 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Ron Portis
571 Gosport Landing Rd
Whitley, AL 36482

\$ 20.00 \$ 20.00

5 If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal	Grand Total of All Schedules 1A (Complete on last page of Schedule)
\$73.00	

Enter this total on
line 3a of Summary
Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

1 Committee ID Number 140321
Committee to elect Wanda Moody for City Council

CANDIDATE COMMITTEE

3 Contribution #1 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>	6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Lemuel Perkins, Jr
391 Halsell St
Monroeville, LA 71203

\$ 40.00 \$ 40.00

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

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution #2 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>
-------------------------------------	---	-------------------------------------

Janell Hives
384 E 16th St
Columbus, OH 43201

\$ 10.00 \$ 10.00

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

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution #3 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>
-------------------------------------	---	-------------------------------------

Mark Hives
384 E. 16th St
Columbus, OH 43201

\$ 5.00 \$ 5.00

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

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3 Contribution #4 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>
-------------------------------------	---	-------------------------------------

Thoris McConnell
384 16th St
Columbus, OH 43201

\$ 5.00 \$ 5.00

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

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____
Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$60.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

1 Committee ID Number 140321
Committee to elect Wanda Moody for City Council

2 Committee Name _____

3 Contribution # 1 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>	6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Richard Perkins, Jr. 45265 Greenbriar Dr. Van Buren Twp, MI 48111			\$ 10.00	\$ 10.00
6. 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				
3 Contribution # 2 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>		
Richard Perkins, III 27392 Mill Creek Dr. Brownstown, MI 48183			\$ 10.00	\$ 10.00
6. 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				
3 Contribution # 3 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>07/29/2023</u>		
Samantha Perkins 27392 Mill Creek Dr. Brownstown, MI 48283			\$ 5.00	\$ 5.00
6. 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				
3 Contribution # 4 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>09/20/2023</u>		
Cynthia Scott 18435 Onyx St Southfield, MI			\$ 50.00	\$ 50.00
6. 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				

Page Subtotal \$75.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1 Committee ID Number 140321
Committee to elect Wanda Moody for City Council

2 Committee Name

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 <input type="checkbox"/> NO	4 Date of Receipt	09/17/2023
Name & Address			
Aaron Moody			
18460 Lister, Ave.			
Eastpoint, MI 48021			
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		
3 Contribution # 2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt	09/30/2023
Name & Address			
Lemuel J Perkins Sr			
4910 Country Rd 1			
Frisco City, AL 36445			
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		
3 Contribution # 3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt	10/02/2023
Name & Address			
Ronnie Davis			
PO Box 85657			
Westland, MI 48185			
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		
3 Contribution # 4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt	10/14/2023
Name & Address			
Alfred Ragsdale			
18472 Lister			
Eastpointe, MI 48021			
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		

\$ 50.00 \$ 50.00

Click Here for Memo Itemization

\$ 30.00 \$ 30.00

Click Here for Memo Itemization

\$ 20.00 \$ 20.00

Click Here for Memo Itemization

\$ 25.00 \$ 25.00

Click Here for Memo Itemization

Page Subtotal \$125.00

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

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

1 Committee I D Number 140321
Committee to elect Wanda Moody for City Council

CANDIDATE COMMITTEE

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.

3 Contribution # 1 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>10/04/2023</u>	6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Jerald Bussey 401 Teravista Pkwy #311 Round Rock, TX 78665			\$ <u>250.00</u>	\$ <u>250.00</u>

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

Occupation Independent Sales Agent Employer Colonial Life Insurance Click Here for Memo Itemization

Business Address 30700 Telegraph Rd., Ste 2620, Bingham Farms, MI 48025

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

3 Contribution # 2 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>10/14/2023</u>
Katrina Green 11761 Stamford Ave Warren, MI 48089		

\$ 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 # 3 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>10/14/2023</u>
Travis Moody 11762 Stamford Ave Warren, MI 48089		

\$ 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 Name & Address	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Date of Receipt <u>10/13/2023</u>
William Hill 47160 Merion Circle Northville, MI 48168		

\$ 200.00 \$ 200.00

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

Occupation Public Sector Mgr Employer Colonial Life Insurance Click Here for Memo Itemization

Business Address 30700 Telegraph Rd. Ste 2620, Bingham Farms, MI 48025

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

Page Subtotal	Grand Total of All Schedules 1A (Complete on last page of Schedule)
\$490.00	

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

1 Committee I D Number 140321

CANDIDATE COMMITTEE

2 Committee Name Friends to elect Wanda Moody for City Council

3 Contribution #1	PAC Receipt?	YES	4 Date of Receipt	10/16/2023	6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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.						
3 Contribution #1						
Name & Address						
Robin Basil						
827 Michelson Rd						
Rochester Hills, 48307						
5. If over \$100.00 cumulative, please provide:						
Occupation			Employer		\$ 100.00	\$ 100.00
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						
Name & Address						
Toby Gallant						
790 Red Run Dr.						
Troy, MI 48085						
5. If over \$100.00 cumulative, please provide:						
Occupation			Employer		\$ 100.00	\$ 100.00
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						
Name & Address						
LaTaisha Little						
2748 Pasadena						
Detroit, MI 48238						
5. If over \$100.00 cumulative, please provide:						
Occupation			Employer		\$ 20.00	\$ 20.00
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						
Name & Address						
Wanda Moody						
18460 Lister Ave						
Eastpointe, MI 48021						
5. If over \$100.00 cumulative, please provide:						
Occupation			Employer		\$ 100.00	\$ 100.00
Business Address						
Type of Contribution	<input checked="" type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input type="checkbox"/> Fund Raiser			

Page Subtotal	\$320.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$1,223.00

Enter this total on line 3a of Summary Page



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

December 8, 2023

Matthew Schonert
22050 Boulder Ave
Eastpointe, MI 48021

Re: *Schonert v. Moody*
Campaign Finance Complaint No. 23-098

Dear Matthew Schonert:

The Department of State received a response from Ms. Moody in response to the complaint you filed against her alleging a violation of the Michigan Campaign Finance Act, 1976 P.A. 388, MCL 169.201 *et seq.* A copy of the response is provided with this letter.

You may file a rebuttal statement after reviewing the enclosed response. If you elect to file a rebuttal statement, you are required to do so within 10 business days of the date of this letter. The rebuttal statement may be emailed to BOERegulatory@Michigan.gov or mailed to the Department of State, Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918.

Sincerely,

Regulatory Section
Bureau of Elections
Michigan Department of State

Attachment
c: Wanda Moody

From: [Matt Schonert](#)
To: [MDOS-BOERegulatory](#)
Subject: Re: Schonert v. Moody Campaign Finance Complaint No. 23-098
Date: Friday, December 8, 2023 5:16:27 PM

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To Whom It May Concern:

The respondent's answer does not address the alleged violation of MCL 169.226(d). To date, the Macomb County Clerk's records for this committee do not indicate receipt of any Schedule 1F.

This concludes my rebuttal statement.

Sincerely,
Matthew R. Schonert

On Fri, Dec 8, 2023 at 2:28 PM MDOS-BOERegulatory <MDOS-BOERegulatory@michigan.gov> wrote:

Please see the attached.

Bureau of Elections, *Regulatory Section*

Michigan Department of State

Secretary of State Jocelyn Benson

P.O. Box 20126

Lansing, Michigan 48901



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

January 10, 2024

Wanda Moody
18460 Lister Ave
Eastpointe, MI 48021

Re: *Schonert v. Moody*
Campaign Finance Complaint No. 23-098

Dear Ms. Moody:

The Department of State (Department) has finished investigating the campaign finance complaint filed against you by Matthew Schonert alleging that you violated the Michigan Campaign Finance Act (MCFA or Act). This letter concerns the disposition of that complaint.

The complaint, filed October 27, 2023, alleged that your committee, "Friends to Elect Wanda Moody for City Council" improperly reported campaign contributions and failed to report a campaign fundraiser held on October 14, 2023.

You responded to the complaint. In your response, received November 18, 2023, you stated an error occurred when inputting contributions, resulting in the referenced contributions being over reported and not containing necessary information. You also stated an amended report had been filed with the Macomb County Clerk's Office correcting the error and provided a copy of the amended report.

Mr. Schonert was given the opportunity to provide a rebuttal statement and reiterated his complaint that alleges a failure to report a campaign fundraising event.

Section 26 of the MCFA specifies the information that must be included in a committee campaign statement. In addition to committee information, contributions, and expenditures, a committee must disclose certain information regarding fundraisers. The Act requires that each fund-raising event must be included in the report. MCL 169.226(d).

Additionally, campaign statements are required to include additional information from contributors who contribute more than \$100 cumulatively. A campaign statement is required to include the occupation, employer, and place of business for any individual that contributes cumulatively more than \$100 MCL 169.226(e). anyone that contributes more than cumulative contributions from individuals.

The Department has reviewed the evidence submitted in this matter, including an independent review of the Macomb County Campaign Finance website, and finds that sufficient evidence has been presented to support a finding of a potential violation of the MCFA. After reaching this conclusion, the Act requires the Department to “endeavor to correct the violation or prevent a further violation by using informal methods” if it finds that “there may be reason to believe that a violation ... has occurred [.]” MCL 169.215(10). The objective of an informal resolution is “to correct the violation or prevent a further violation.” *Id.*

You acknowledged in your response that you did not realize that you were out of compliance with the MCFA. Once you were made aware, you immediately filed an amended report. Subsequently, you filed a second amended report on January 10, 2024 that includes the fundraiser information.

Given this, The Department concludes that a formal warning is sufficient resolution to the complaint and will consider this matter concluded.

Please be advised that this notice has served to remind you of your obligation under the Act to file accurate reports and may be used in future proceedings as evidence that tends to establish a knowing violation of the Act. A knowing violation is a misdemeanor offense and may merit referral to the Attorney General for enforcement action. MCL 169.215(10).

Sincerely,

A handwritten signature in dark ink, appearing to read "Jimmy Biehl". The signature is fluid and cursive, with the first name "Jimmy" and last name "Biehl" clearly distinguishable.

Jimmy Biehl, Regulatory Attorney
Regulatory Section
Bureau of Elections
Michigan Department of State

c: Matthew Schonert