

Michigan Campaign Finance Complaint EC 15 Ph State

ELECTIONS/GREAT CEAT

Section 1. Complainant

Name: Matthew Ross Schonert

Daytime Telephone Number: +1 (231) 250-9931

Mailing Address: 22050 BOULDER AVE, EASTPOINTE, MI 48021

Section 2. Alleged Violator

Name: Kip C. Walby

Mailing Address: 21611 EDGEWOOD, ST CLAIR SHORES, MI 48080

Email: kip.walby@gmail.com

Section 3. Allegations

Sections of MCFA alleged to be violated:

• MCL 169.226(1)(j)

Explain how those sections were violated:

Background

- 1. Kip C. Walby organized a candidate committee called CTE KIP C WALBY, which is registered with the Macomb County Clerk.¹
- 2. Walby is named as the respondent in this complaint because the candidate committee is under the control and direction of the candidate.²
- 3. Walby's committee does not have a reporting waiver.

Details of allegation

4. An August 24, 2022, miscellaneous filing by SUPPORTERS FOR MONIQUE OWENS, a separate candidate committee also registered with the Macomb County Clerk, reported receiving a fundraiser-related \$100 direct contribution dated August 15, 2021, from

¹ https://macomb.mi.campaignfinance.us/iCommitteePortal.php?iCommitteeID=3669

² MCL 169.203(2)

- "Committee to Elect Kip C. Walby" with an address of 20712 Alger, St. Clair Shores, MI 48080.³
- 5. An expenditure from CTE KIP C WALBY occurring on August 15, 2021, would fall within the reporting period for the committee's 2021 October Quarterly campaign statement.
- 6. However, the pre-primary campaign statement filed by CTE KIP C WALBY, which covers from July 21, 2021, to October 20, 2021, did not report an expenditure paid to SUPPORTERS FOR MONIQUE OWENS. In fact, the summary page reported the committee's total expenditures for that period as \$0.
- 7. If CTE KIP C WALBY contributed to SUPPORTERS FOR MONIQUE OWENS as described above, then CTE KIP C WALBY likely violated MCL 169.226(1)(j) by not reporting the expenditure.

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

SUPPORTERS FOR MONIQUE OWENS miscellaneous filing dated August 24, 2022: https://campaignfinance.us/docs.macomb.mi/471775997.pdf (relevant page is attached at end of complaint)

CTE KIP C WALBY 2021 October Quarterly CS:

https://campaignfinance.us/docs.macomb.mi/470888480.PDF (statement in its entirety is attached at end of complaint)

Section 4. Certification

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.

 $\times \frac{MnRGA}{Signature of Complainant}$ 12/12/2022

³ https://campaignfinance.us/docs.macomb.mi/471775997.pdf

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.

\mathbf{X}_{\perp}			
	Signature of Complainant	Date	

Section 6. Submission

This complaint is hereby submitted to:

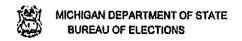
Michigan Department of State
Bureau of Elections
Richard H. Austin Building – 1st Floor
430 West Allegan Street
Lansing, Michigan 48918



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and sine treasurer (or designated record keeper) and car	algned by ndidate.	3. This Statement covers From	7/2/21 6	10 कि रा
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
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2. Committee Name	j	4s. Office Sought Including Dis	trict # or Community Served	(if applicable)
Supporters for Manague	Ouco	Wayor		
		4b. County of Residence V	acomb	
5. Committee's Meiling Address		6. Treasurer's Name & Reside		
P.O. Box 97	. 1	SAME as al	٥٥٥٩	
Eastporte, MJ 4802	. 1			
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Area Code and Phone If the address in this box is different from the committee.	ten	G		
mailing address on the Statement of Organization, m be sent to this address by the filing official.		Area Code & Phone	THE RESIDENCE OF THE PROPERTY	9841.1984.194
7. Treasurar's Business Address		8. Designated Record Keeper	's Name and Address (if the	committee has a
Same as above	!	Designated Record Keeper)		
	I			
Area Code and Phone	I	Area Code and Phone		
9. TYPE OF STATEMENT	**************************************		9e. Dissolution of Candid	late Committee
9s. Pre-Election OR 9b. Post-Election	Required ON is not on the	NLY if candidate ballot for the	By checking this item I/	We certify any outstanding debt
Pre-Election or Post-Election Statement relates to:	current year:		by the committee to the can by discharged and forgiven,	ididate or his or her spouse is here , and no longer collectible from
Primary	July Quart	erly	the committee. The commit owes no lates fees or has ar	itee has no oustanding assets, ny custanding debt.
General General	October Q	luarterly	- the 18 the diametrian as	and the manufact that the
Convention	7		Further, if the dissolution cal considered a request for the	nnot be granted, that this be Reporting Walver.
	9c. [] .			
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- Daumo	(Comp indical	piete tiem 9a, 9b, 9c or 9e to ite which Statement is being		idual funds must be reported on
	amend	fed.)	Schedule 1B and the Sumn	iary Mage.
Date of Election, Convention or Caucus		:		
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		i		
10. Verification: I/We certify that all reasonable diliger my/our knowledge and belief the contents are true, at	nce was used courate and co	In the preparation of this statement	ent and attached schedules ()	if any) and to the best of
Current Treasurer or	10000	100	/ Q	8/19/22
Designated Record keeper Novigia Type or Print Name	JURNO	Signature	Date	8/19/22
Maria Co.		$"\sim ()$	0	aliala
Candidate Type or Print Name	<u> Consu</u>	/ Mck Signature	Date	plura
l a ha a la		Cilifornia		



1. Committee I.D. Number

	MMUE	ARY P	AGE
CINAS	IDATE	COMI	MITTEE

2. Committee Name Supporters for Monique RECEIPTS Column I Column II Cumulative this election cycle This Period 3. Contributions a. Itemized (Schedule 1A - Column 6) **NOT APPLICABLE** b. Unitemized (less than \$20.01 each - no Schedule) (35.) \$ c. Subtotal of "Contributions" (18.) \$_____ (3c.) \$___ 4. Other Receipts (Schedule 1A -1, Column 6) (19.) \$ _____ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (20.) \$ ____ (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** (6.) s 5,574.97 6. In-Kind Contributions (Schedule 1-IK, Column 7) (21.) \$ 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) (22.) \$_____ EXPENDITURES 8. Expenditures a. Itemized (Schedule 1B, Column 6) (8a.) \$ _____ b. Itemized Get-Out-the-Vote (Schedule 18-G) (8b.) \$ _____ c. Uniternized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (23.) \$ ____ INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements (10a.) \$ ____ a. Itemized (Schedule 1C, Column 6) b. Uniternized (less than \$50.01 each - no Schedule) (10b.) \$ ____ 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (11.) \$ ____ (24.) \$ ____ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12b.) \$ BALANCE STATEMENT 13. Ending Balance of last report filed (13.) \$___ (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (14.) + \$... 15. SUBTOTAL Add lines 13 and 14 (15,) = \$____ 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number	139792
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CANDIDATE COMMITTEE 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? YES 4. Date of Receipt 8 152021 Name & Address: Committee to Elect KPC. Worldy 20712 Alger St. Clair Shares, MJ 48080 5. If over \$100.00 cumulative, please provide: Occupation Employer	s PO	ser Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Black		
Name & Address Walter Martin 19040 Elsmere Are Eastparte, MT +8021	s_75	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r 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 8 15/2021 Name & Address: Cooke-Brown 540 S. Sagnaw St. Flint, MI 48502 5. # over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$ 75 Click Here for	\$ Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Name & Address Tomes Young Rd Sufficiently Will Abo33 5. If over \$100.00 cumulative, please provide:	S	\$ Memo Itemization
Occupation Employer	•	
Business Address		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	325 Enter this total on	namanana o o ba e en pre uma conde mundo (Video do trafego de principa de Amina a corcu-

line 3a of Summary Page.

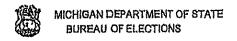


MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

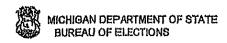
COVER PAGE				
Report must be legible, typed or prinied in ink and signed by the treasurer (or designeted record keeper) and candidate.	3. This Statement covers From: 7-21-2021 to 10-20-2024			
1. Committee I.D. Number	4. Candidate Last Name M.I.			
00 13 66 1850	WALBY KIP C			
2. Committee Name	4a. Office Sought including District # or Community Served (If applicable)			
CMTE Kip C- Walby	4b. County of Residence MACOMS:			
5. Committee's Mailing Address 216/1 2 dgewood 5.C.S. MI. 48080	8. Treasurer's Name & Residential Address			
216/1 Eagen 10080	Michele L. Walby- 21611 Edgewood			
S.C.S. N.Z. 40000	21611 Edgewood			
	SCS.			
Area Code and Phone 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.	Area Code & Phone			
7. Tressurer's Business Address	8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper)			
SAMR AS BOX 6	SAME AS BOX 6			
Area Code and Phone	Area Code and Phone			
9. TYPE OF STATEMENT				
9a. Pre-Election OR 9b. Post-	Election 9c. Annual Statement (Coverage Year)			
	Sd. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c			
Pre-Election or Post-Election Statement relates to:	or 8e to Indicate which Statement is being amended)			
Primary Gene	9e. Dissolution of Candidate Committee			
I I I I I I I I I I I I I I I I I I I	Effective Date of Dissolution			
Convention	ool			
Special Cauc	by checking this item, have certaly that the committee has no assets or outstanding debts, including tale filing fees. Further, IWe request that if			
Date of Election, Convention or Caucus	the dissolution cannot be granted, that this be considered a request for the Reporting Walver.			
11/2/2021	Note: The disposition of residual funds must be reported on Schedule 18 and the Summary Page.			
if any of the information listed in items 2, 4, 5, 6, 7, or 8 has change armendment to the Statement of Orgenization should accompany in before the filing deadline of a required campaign statement, the	uired Campaign Statements. The Campaign Statements must include all applicable officers, and cultatanding debts count against the \$1,000 Reporting Walver threshold. It is the shown on the committee's Statement of Organization, an a Campaign Statement. If a request for a Reporting Walver is not received on or a campaign statement cannot be walved.			
0. Verification: IWVe certify that all reasonable diligence was used in y \our knowledge and belief the contents are true, accurate and con	the preparation of this statement and attached schedules (if any) and to the best of plote.			
esignated Record Resper Michele Walky Michele Walky Michele Walky Date 10-22-2021				
Type or Print Name	Signature			
Candidate & CWall 9	1200d Date 10-22-21			
Type or Print Name	Signature			



SUMMARY PAGE CANDIDATE COMMITTEE 1, Committee I.D. Number 80 13 66 1850

2, Committee Name CMTE Kip C- Walby.

DECRIPTE	Column I	Column II
RECEIPTS	This Period	Cumulative this election cycle
8. Contributions	2	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c, Subtotel of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19,) \$
6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
8. 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 18, Column 8)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 18-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(BD.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements • a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12, Debts and Obligations		,
a. Owed by the Committee (Schedule 1E)	(128.)\$ 500	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
13. Ending Belance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	BALANCE STATEMENT (13.) \$ 714777 (14.) + \$ θ (16.) = \$ 714777 (16.) - \$ θ (17.) \$ 714777	•



DEBTS AND OBLIGATIONS

1. Committee I.D. Number 00 /3 66 /850

SCHEDULE IE		MIT	· Lis	KID	parts.	INAAA	3 S
CANDIDATE COMMITTEE	2. Committee Name	C1061	Carrent Control	7017	(~	are remain	<u> </u>
CANDIDATE COMMITTEE					/. # _*N-#		

CANDIDATE COMMITTEE 2.0	Jamminge Name				
This Schedule itemizes:				,	
a Debts and obligations owedby or forgiven the com (Che	nmilitee OR b, Debi	ls and obligations owed <u>to</u> c irpose checked.)	r forgiven <u>by</u> the co	mmittee. :	
3. Name and Malling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to dete on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt#1 Corp? Yes Owed to or by:	4. Type: LOAN	<u> </u>			
doc Walby	5. Date Debt Was Incurred:	<u> </u>	7		
The Color wood	11-1-09	\$	27	,500	
2/6/1 Ce of Cos NAI	6. Original Amount of Dobt:	\$	\$ <u>0</u>	\$	
Kip C. Walby 21611 @dgewood 51. Clair Shores, NAI 48080	\$ 500			FORGIVEN	
If bank loan, name of endorser or guaranter:	,	Ame	ount Endorsed: \$		
Dabt #2 Corp? Yes			I Linusiaso. V		
Owed to or by:	4. Typo;	\$		ш	
•	5. Date Dabt Was Incurred:	\$			
	6. Original Amount of Debt:	<u> </u>	*	s	
	\$	\$. 4		
	▼	<u> </u>		FORGIVEN	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$		
Debt#3 Corp? Yes Owed to or by:	4. Typs:	s			
tweet to or by.	5. Date Debt Was Incurred:	<u>.</u>			
ł	6. Original Amount of Debt:		\$	\$	
	\$	<u> </u>		FORGIVEN	
		<u> </u>		•	
f bank loan, name of endorser or guaranter:		Am	ount Endorsed: \$		
		Page Subtolal (Dulstanding debt)	500	
(Complete on lest page of Schedule showing amounts owed by or to the committee)					
Enter this total on line 12a "owed by" or line 12b by" or line 12b campaign Statement or it was forgiven during the period covered by this Campaign Statement. Enter this total on line 12a "owed by" or line 12b by" or line 12b "owed to" of the Summary Page					

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Page	م ا	f I	



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE

DEPARTMENT OF STATE

LANSING

January 3, 2023

Kip C. Walby 21611 Edgewood St. Clair Shores, MI 48080

Re: Schonert v. Walby

Campaign Finance Complaint No. 2022 - 12 - 225 - 226

Dear Mr. Walby:

The Department of State (Department) has received a formal complaint filed against you Matthew Schonert that you violated the Michigan Campaign Finance Act (MCFA or Act). Specifically, the complaint alleges that you may have failed to report a contribution by your committee, "CTE Kip C. Walby," to Monique Owens' campaign for Eastpoint mayor. Such a contribution was reported by Ms. Owens on August 24, 2022, with a contribution date of August 15, 2021. The Department has reviewed your filings with the Macomb County Clerk since July 23, 2021, and no such contribution has been identified in your reports. A copy of the complaint is included with this notice.

The MCFA requires that candidates and committees record the full name, street address, amount contributed, and date of contribution for each individual from whom contributions are received. MCL 169.226(1)(e). Further, if the individual's cumulative contributions are more than \$100.00, the candidate or committee must also report the individual's occupation, employer, and principal place of business. Id. For each person other than an individual, candidates and committees need not include the additional employment information but must provide all other contributor information previously listed. MCL 169.226(1)(g).

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. <u>It is important to understand that the Department is neither making this complaint nor accepting the allegations as true</u>. 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 or mailed to the Department of State, Bureau of Elections,

Kip C. Walby Page 2

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

c: Matthew Schonert

RECEIVED/FILED MICHIGAN DEPT OF STATE

COMMITTEE TO ELECT KIP C. WALBY FEB -7 PM 2: 26 20712 ALGER ST. CLAIR SHORES, MI 48080

January 30, 2023

Michigan Bureau of Elections Richard H. Austin Building, First Floor 431 W. Allegan Lansing, Michigan 48918

Re:

Schonert v Walby

Campaign Finance Complaint No. 2022-12-225-226

Committee ID No. 00-1366-1850

Dear Sir or Madam:

I send this correspondence in response to the above referenced Campaign Finance Complaint. My name is Michele Walby and I am the current treasurer and designated record keeper for the Committee to Elect Kip C. Walby, located at 20712 Alger, St. Clair Shores, Michigan 48080. I also was the treasurer and designated record keeper of said committee during the time the attached Campaign Finance Report was made and filed. The attached statement covers the period from July 21, 2021 to October 20, 2021. The report was filed on October 22, 2021 with the Macomb County Clerk. The report indicates that no expenditures were made from the committee during that period of time. The report inadvertently failed to disclose a \$100 expenditure made to "Supporters of Monique Owens" on or about August 18, 2021. I am not exactly sure why this expenditure did not get reported, however, it was inadvertent and not intentional.

I have completed an amended report and hereby submit same. The amended report shows the expenditure to "Supporters for Monique Owens" which was made on August 18, 2021. There were no other expenditures during the reporting period.

I respectfully request the Bureau of Elections to dismiss the complaint or pursue its normal procedure for informal resolution. I have been the record keeper for the Committee to Elect Kip C. Walby for more than 23 years and don't believe there have ever been any campaign finance reporting mistakes or violations. Your consideration of the above is appreciated.

Respectfully Submitted,

Michele C. Walby

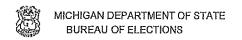
Michele Weller



COVER PAGE

FOR OFFICIAL USE ONLY

COVERPAGE	
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: 7 - 21 - 202/10 10 - 20 - 202/
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.
00 13 66 1850	WALBY KIP C
2. Committee Name	4a. Office Sought Including District # or Community Served (If applicable)
CMTE Kip C_ Walbyt 5. Committee's Mailing Address 2161) 2 dgewood 5.C.S. MI. 48080	4b. County of Residence MACOMS: 6. Treasurer's Name & Residential Address Michell L. Walby 21611 Edgewood
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address
2161) 2dgewood	Michele C. Walby
CCS MI. 48080	21/4 Colonwood
5.000	
Area Code and Phone	SCS.
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.	
be sent to this address by the filing official.	Area Code & Phone
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
	posignated Nesora Respery
1. 2. /	SAME AS BOX 6
SAME AS BOX 6	JAME AS 1201
_	
Area Code and Phone	Area Code and Phone
9. TYPE OF STATEMENT	
9a. Pre-Election OR 9b. Post-	Election 9c. Annual Statement (Coverage Year)
*	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:	or 9e to indicate which Statement is being amended)
	9e. Dissolution of Candidate Committee
Primary Gene	
Convention Scho	end Effective Date of Dissolution
[]	
Special Cauci	By checking this item, I/We certify that the committee has no assets or
Date of Election, Convention or Caucus	outstanding debts, including late filling fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for
1 1	the Reporting Waiver.
11/2/2021	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
committee that does not have a Reporting Waiver must file all requ	uired Campaign Statements. The Campaign Statements must include all applicable liftures, and outstanding debts count against the \$1,000 Reporting Walver threshold.
scriedules. Direct contributions, in-kind contributions, loans, expend f any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed	sinces, and outstanding debts count against the \$1,000 Reporting Walver threshold. I since the information was shown on the committee's Statement of Organization, an
menument to the Statement of Organization should accompany this eFore the filing deadline of a required campaign statement, that	l since the information was shown on the committee's Statement of Organization, an campaign Statement. If a request for a Reporting Waiver is not received on or t campaign statement cannot be waived.
l. Verification: (IWe certify that all reasonable diligence was used in	the preparation of this statement and attached schedules (if any) and to the best of piete.
	ma 11 811 al.
esignated Record keeper Michele Walloy	Muchele Wally Date 1-30-23
Type or Print Name	Signature
Kipc Libilitie	X 0/1/2/11 /= 30-3=
Type or Print Name	Ignature Date
13 ho or r rute refinite	Aguature



SUMMARY PAGE CANDIDATE COMMITTEE 1. Committee I.D. Number 00 1366 1850

2. Committee Name CMTE Kip C. Walby

OMIDAIL OUMANII ILL		
RECEIPTS 3. Contributions	Column í Thís Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$D	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(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.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c, Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		. (24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT 77	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 	(13.) \$ 7147 — (14.) + \$ & & & & & & & & & & & & & & & & & &	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(16.) - \$ 100 (17.) \$ 764772	

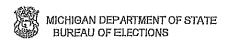


ITEMIZED EXPENDITURES **SCHEDULE 1B**

1. Committee I. D. Number 60 13 66 1850

CANDIDATE COMMITTEE 2.0	Committee Name	y (, e (Natoy:
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		-	
Name Supporters for Monique owen	<u> </u>	8-18-2	(\$ 100
Address	Purpose: Fundlaiser	Date	, <u>, , , , , , , , , , , , , , , , , , </u>
P.O. BOX 97	Click I	lere for Memo	Itemization Type
P. O. BOY 97 Exestpointe, M.I. 48021 Liturd Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			dr.
Address	Purpose:	Date	\$
	Click F	lere for Memo	itemization Type
		CIO IOI INCILIO	nomization Typo
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			
Address	Purpose:	Date	\$.
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4			
Name			
		Date	\$
Address	Purpose:	2,010	
	Click H	ere for Memo l	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click He	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		al this page	1427
			100
	Grand Total of all So (Complete on last page)		100

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number 00 13 66 1850
2. Committee Name CMTE KIP C-WALBY

CATADIDATE GOMMAN REE			•	
This Schedule itemizes:				
{	mittee OR b. Deb ck either a or b. Use only for the p	ts and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the c	ommittee. :
3. Name and Maling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt#1 Corp? Yes Owed to or by:	4. Type: LOAN	\$	•	
Kip C. Walby	5. Date Debt Was Incurred:			
Rip C. Walby 21611 @ dge wood 51. Clair Shores, MI 48080	6. Original Amount of Debt	,\$ \$	s_0_	\$500
ST. Clair 3 48080	s 500	·····		FORGIVEN
If bank loan, name of endorser or guarantor:	•	<u> </u>		
Debt #2 Corp? Yes		Amo	unt Endorsed: \$ _	-
Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
15h matafanan manan Parataman Angara		\$		
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt#3 Corp? Yes Owed to or by:	4. Type:	<u> </u>		
.	5. Date Debt Was Incurred:	\$,
	0.00	\$		
ı	6, Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			int Endorsed: \$	-
		Page Subtotal (Or	ifstanding debt)	500
(Сотр	olete on last page of Schedule sho	Grand Total of a wing amounts owed by or to	the committee)[-	COO
A debt or obligation must be shown on this Schedule it his Campaign Statement or it was forgiven during the p	there was an outstanding amo period covered by this Campaig	unt owed on it at the closir in Statement.	ig date of	emer this total on line 12a "owed oy"" or line 12b owed to" of the Summary Page

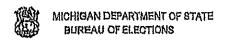


MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

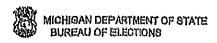
COVER PAGE		
Report must be legible, typed or pripled in ink and signed by the beasurer (or designated record keeper) and candidate.	8. This Statement covers From: 7-21-2021 to 10-20-2021 .	
1. Commillee I.D. Number	4. Candidale Last Name First Name M.I.	
00 13 66 1850	WALBY 4a. Office Sought including District or Community Served (If applicable)	
2. Commiltee Name	48. Office obtight their bind block of continuing defined in approximation	
Cura ila a la lhit	1/1	
CMTE Kip C Walby	4b. County of Residence MACOMS.	
2161) 2 dgewood S.C.S. M.T. 48080	8. Tressurer's Name & Residential Address	
216/1 2090	Michelle L. Warry	
6.C.S. M.L. 4000	Michele L. Walby- 21611 Edgewood	
	6CS.	
Area Code and Phone If the address in this box is different from the committee		
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.	Area Code & Phone	
7. Tronsurer's Business Address	8. Designated Record keeper's Name and Malling Address (If the committee has a Designated Record keeper)	
	0.11	
SAME AS BOX 6	SAME AS BOX 6	
DATITUDE !		
Area Code end Phone	Area Code and Phone	
9. Type of Statement		
9a. Pre-Election OR 9b. Post	-Election Bo. Annual Statement (Coverage Year)	
	8d. Amendment to Campaign Statement (Complete Ilem 9a, 9b, 9c	
Pre-Election or Post-Election Statement relates to:	Lor ee to Indicate which Statement is being amended)	
Primary Gen	98. Dissolution of Candidate Committee	
	Effective Date of Dissolution	
Convention	(OD)	
Special Cau	By checking this item, NWo certify that the committee has no assets or	
	outstanding debts, including late filing fees. Further, IWe request that if the dissolution cannot be granted, that this be considered a request for	
Date of Election, Convention or Caucus	the Reporting Walver.	
1112/2021	Note: The disposition of residual funds must be reported on Schedule 18 and the Summary Page.	
A committee that does not have a Reporting Waiver must file all re-	culred Campelon Statements. The Campelon Statements must include all applicable politices, and culstanding debts count against line \$1,000 Reporting Waiver threshold.	
If any of the information lister in items 2, 4, 5, 6, 7, or 8 has change amendment to the Statement of Omanization should accompany in	ed since the information was shown on the committee's Statement of Omanization, an ole Campaign Statement. If a request for a Reporting Walver is not received on or	
Schedules, Direct contributions, in kind controllions, that is, expending a set distribution was shown on the committee's Statement of Organization, and if any of the information was shown on the committee's Statement of Organization, and amendment to the Statement of Organization eticidal accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filling deadline of a required campaign statement, that campaign statement cannot be waived. 10. Verification: IWo certify that all reasonable difference was used in the preparation of this statement and attached schedules (if any) and to the best of my towledge and belief the contents are true, accurate and complete.		
my\our knowledge and bellet the collects are true, accurate and complete.		
Current Treasurer or Michele Wally Designated Report Keeper	1/ lie la Vally Date 10-22-2021	
Type or Print Name	Signature	
XO cwall	8/0(U)d) - 10-22-21	
Candidate 1	7 (14 COCCE Date Date Signature	



SUMMARY PAGE

1, Commillee 1,D, Number 80 13 66 1850
2, Commillee Name CMTE Kip C- Walby.

CANDIDATE COMMITTEE	1	
RECHIPTS	' Column I This Period	Column II Cumulativa inia election cycle
8. Contributions	2)	
a. itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
o. Subtotal of "Contribulions"	(30.) \$	(18.) \$
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$	(19.) \$
6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(6.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	m	
8. in-Kind Contributions (Schedule 1-lik, Column 7)	(6,) \$	(21.) \$
7. In-Kind Expenditures (Schedule 18-IK, Column 6)	7.) \$	(22.) \$
EXPENDITURES		
8, Expanditures		
a. ilemízed (Schedule 16, Column 8)	(8a.) \$ <u> </u>	
b, itemized Get-Out-the-Vote (Schedule 16-G)	(8b.) \$	
c. Uniternized (less than \$50.01 each - no Schedule)	(Bo.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8o)	(9.) \$	(29.) \$
NOIDENTAL EXPENSE DISBURSEMENTS . (Officeholders Only)		
10. Disbursements • a. Ilemized (Schedule 1C, Column 6)	(10a.)\$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12, Debts and Obligations	4.77	,
e, Owed by the Committee (Schedule 1E)	(12a.)\$ 500°	
b. Owad to the Committee (Schedule 15)	(12b.) \$	
	BALANCE STATEMENT	<u> </u>
13. Ending Belence of last report filed (Enter zero if no previous reporte have been filed.)	(1a.) \$ /14T/	
14. Amount received during reporting period (Line 6, Total Contributions & Other Receipts)	(14.) + \$	
15. SUBTOTAL Add lines 13 and 14	(16.) = \$ 7147 7	
16. Amount expended during reporting period (Add lines 9 and 11)	(18.) - \$	•
17. ENDING BALANCE (Subtract line 18 from line 18)	(17) \$ 7/47 .	



DEBTS AND OBLIGATIONS **SCHEDULE 1E**

1. Committee I.D. Number 00 /3 66 /850

CANDIDATE COMMITTEE This Schedule Hemizes: a X Debte and obligations owedby or forgiven the committee committee OR b, Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check slibers or b, Use only for the purpose checked.) 3. Name and Malling Address of person, vendor or financial institution to whom dobt is owed. 4. Type of Obligation 7. Date and amount of 9. Outstanding B. Cumulativa (Description) each payment payment to Belance at close 5. Indicate date debt was date on dabt of this period Check box to indicate whether debt is owed to an peunaul (Item 8 minus Item 8) incorporated business. If debt is a bank loan, please provide information regarding the endorsers or 8. Indicate original amount of debt guarantors, if any. 4. Type: LOan Debt#1 Corp7 Yes Owed to or by: Rip C. Walby 21611 @ dgewood 61. Clair Shores, MI 48080 5. Date Debt Was Incurred; らひひ **TORGIVEN** ifbank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 Corp? Owed to or by: 4. Typo:_ 5. Data Dabt Was Incurred! 8. Orlginal Amount of Debt: FORGIVEN If bank loan, name of endureer or guarantor: Amount Endorsed; \$ Debt#3 Com? Yes Owed to or by: 5, Date Debt Was Inquired: 8, Original Amount of Debt: **FORGIVEN** If bank loan, name of endorser or guarantor; Amount Endorsed: & 500 Page Subfolal (Oulslanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts awad by or to the committee)

A debt or obligation must be shown on this Schédule if there was an onlatending amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b ent to "of bowo" Summary Page

Page



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE

DEPARTMENT OF STATE

LANSING

February 8, 2023

Matthew Ross Schonert 22050 Boulder Ave Eastpointe, MI 48021

Via email

Re: Schonert v. Walby

Campaign Finance Complaint No. 2022-12-225-226

Dear Mr. Schonert:

The Department of State received a response from Kip C. Walby to the complaint you filed against him 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 as an enclosure with this letter.

You may file a rebuttal statement after reviewing the enclosed response. <u>If you elect to file a rebuttal statement</u>, you are required to do so within 10 business days of the date of this letter. The rebuttal statement may be emailed to <u>BOERegulatory@Michigan.gov</u> 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

c: Kip C. Walby

MDOS-BOERegulatory

From:	Matt Schonert <mrschonert@gmail.com></mrschonert@gmail.com>
Sent:	Wednesday, February 8, 2023 12:06 PM

To: MDOS-BOERegulatory

Subject: Re: Schonert v. Walby campaign finance complaint

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

To Whom It May Concern:

I hereby submit my rebuttal in Schonert v. Walby (Campaign Finance Complaint No. 2022-12-225-226).

To date, the Macomb County Clerk's campaign finance website shows no record of having received an amended October 2021 Campaign Statement for CTE KIP C WALBY.

https://macomb.mi.campaignfinance.us/iDocuments.php?iCommitteeID=3669

I respectfully ask that the Bureau of Elections deny the respondent's request to dismiss the complaint for the following reasons:

- 1. The committee's answer admits that the expenditure was not disclosed, which supports the conclusion that a violation occurred.
- 2. The committee has apparently not yet filed a corrected statement with the filing official (the county clerk).

Sincerely,

Matthew R. Schonert

On Wed, Feb 8, 2023 at 10:56 AM MDOS-BOERegulatory < MDOS-BOERegulatory@michigan.gov> wrote:

Please see the attached.

Regulatory Section

Bureau of Elections

Michigan Department of State

Main: 517-335-3234

BOERegulatory@Michigan.gov



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE

DEPARTMENT OF STATE Lansing

March 23, 2023

Kip C. Walby 21611 Edgewood St St Clair Shores, MI 48080

Re: Schonert v. Walby

Campaign Finance Complaint No. 2022 - 12 - 225 - 226

Dear Mr. Walby:

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 alleged that you failed to report a contribution by your committee, "CTE Kip C. Walby," to Monique Owens' campaign for Eastpoint mayor. Such a contribution was reported by Ms. Owens on August 24, 2022, with a contribution date of August 15, 2021, but was not included in the "CTE Kip C. Walby" October 2021 Quarterly Campaign Statement.

Michele Walby, treasurer for your committee, responded to the complaint with a letter received by the Department on February 7, 2023. In that response, Ms. Walby stated that the \$100 expenditure was inadvertent and unintentional. Ms. Walby included an amended October 2021 Quarterly Campaign Statement in the letter to our office that noted the expenditure.

Mr. Schonert provided a rebuttal to your response in an email dated February 8, 2023. In that statement, he noted that as of February 8, 2023, the Macomb County Clerk's campaign finance website had not received an amended October 2021 Quarterly Campaign Statement for the "CTE Kip C. Walby" committee.

The MCFA requires a committee reporting expenditures for a candidate within only one county to file a statement with the clerk of that county. MCL 169.236(6). The campaign statement of a committee must itemize all expenditures made to other committees or candidates with the full name and street address of the candidate or committee, the amount disbursed, and the purpose of the expenditure. MCL 169.226(1)(j). A person who knowingly omits or underreports expenditures required to be disclosed by the Act is subject to a civil fine of not more than \$1,000 or the amount of the expenditures omitted or underreported, whichever is greater. MCL 169.233(11).

Kip Walby Page 2

The Department has independently reviewed your filings with the Macomb County Clerk as of March 19, 2023, and it does not appear that an amended campaign statement for October 2021 has been submitted. While you have submitted the amended report to the Department, it must also be amended with your filing official in order to address the violation.

Upon review of the evidence submitted, the Department 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*.

Given the steps that you have taken to address the violation, once you send evidence that the report has been amended with the Macomb County Clerk to BOERegulatory@Michigan.gov, the Department has determined that a formal warning is a sufficient resolution to the complaint and will consider this matter concluded. Please submit this evidence within one month of receipt of this letter.

Sincerely,

Jenny McInerney, Regulatory Attorney

Bureau of Elections

Michigan Department of State

c: Matthew Schonert Michele Walby
 From:
 Kip Walby

 To:
 Elections Clerk

 Cc:
 MDOS-BOERegulatory

Subject: Re: Campaign Finance Complaint No. 2022-12-225-226

Date: Monday, April 3, 2023 9:27:01 AM

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

Thank you for the clarification.

I will update all the statements.

Thank you

Kip Walby

On Mon, Apr 3, 2023 at 9:21 AM Elections Clerk <<u>elections@macombgov.org</u>> wrote: Mr. Walby,

An amended 2021 October Quarterly 4 page statement has been received. Based on this newly reported information, it appears your committee will also owe amendments to all statements from the 2021 Annual through the 2022 Annual.

Debra Williams Macomb County Election Department 32 Market St, Mount Clemens 586-469-5209

On Mon, Apr 3, 2023 at 9:12 AM Kip Walby kip.walby@gmail.com wrote:

Attached is my amended report for the time period (7-21-2021 - 10-20-2021) as well as the most recent letter from the Secretary of State.

Thank you

Kip Walby



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

LANSING

August 8, 2023

Kip Walby 21611 Edgewood St. Clair Shores, MI 48021

Re: Schonert v. Walby

Campaign Finance Complaint No. 2022-12-225-226

Dear Mr. Walby:

The Department of State (Department) has reviewed your amended 2021 October quarterly statement, as well as the other amended reports requested by the county, submitted in response to the Department's March 23, 2023 determination that there may be reason to believe that you violated the Michigan Campaign Finance Act (MCFA or Act), as well as the instructions from the Macomb County Election Department.

In your April 3, 2023 email exchanges, in which you cc'd the Department, you indicated to Macomb County that you had submitted your amended 2021 October quarterly statement. The county Election Department indicated that you needed to amend your 2021 annual statement, 2022 July quarterly statement, 2022 October quarterly statement, and 2022 annual statement as well. You did so on April 10, 2023.

Given this, the Department concludes that a formal warning is a sufficient resolution to the complaint and considers the matter concluded. Thank you for your prompt resolution of this matter.

Sincerely,

Jenny McInerney, Regulatory Attorney

Bureau of Elections

Michigan Department of State

c: Matthew Schonert