

**From:** [boeeasupport@zohomail.com](mailto:boeeasupport@zohomail.com)  
**To:** [DelRio, Irene \(MDOS\)](#)  
**Cc:** [Disclosure@michigan.gov](mailto:Disclosure@michigan.gov)  
**Subject:** Independent Expenditures Report for State Filers  
**Date:** Wednesday, September 3, 2025 1:40:54 PM

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

Hello ,

We have received your 'Independent Expenditures - State Filers' form.

If you have any questions, please contact the State of Michigan at 517-335-0170 or [disclosure@michigan.gov](mailto:disclosure@michigan.gov)

**User submitted data**

**Section**

<b>The Independent Expenditure was to:</b>	Support a Candidate
<b>Candidate's Name</b>	Nick Moroz
<b>Office Sought</b>	City Council
<b>County</b>	Wayne
<b>District/Jurisdiction</b>	Plymouth City Council Member - At Large
<b>Ballot Question Description</b>	
<b>Ballot Designation (If issued by Michigan Board of State Canvassers)</b>	
<b>Name</b>	Red Wine and Blue
<b>Address</b>	"3675 WARRENSVILLE CENTER ROAD #202359 CLEVELAND, OH 44120"
<b>Same as above</b>	Yes
<b>Contact Name</b>	
<b>Contact Address</b>	
<b>Email Address</b>	RWB@beecompliance.co
<b>1. Name</b>	Red Wine and Blue
	"3675 WARRENSVILLE CENTER

**1. Address**

ROAD #202359  
CLEVELAND, OH 44120"

**1. Employer Name and Address**

**1. Occupation**

**2. Add additional contributions**

No

**2. Name**

**2. Address**

**2. Occupation**

**2. Employer Name and Address**

**3. Add additional contributions**

**3. Name**

**3. Address**

**3. Occupation**

**3. Employer Name and Address**

**4. Add additional contributions**

**4. Name**

**4. Address**

**4. Occupation**

**4. Employer Name and Address**

**5. Add additional contributions**

**5. Name**

**5. Address**

**5. Occupation**

**5. Employer Name and Address**

**Add additional contributions**

**1. Name**

Red Wine and Blue

**1. Address**

"3675 WARRENSVILLE CENTER  
ROAD #202359  
CLEVELAND, OH 44120"

**1. Date of Expenditure / Purchase Date (mm-dd-yyyy)**

08-25-2025

**1. Dollar Amount of Expenditure (xxxx.xx)**

11.66

**1. Purpose of Expenditure**

Staff Time for Digital and Graphic Design  
Services

**2. Add additional expenditures**

No

- 2. Name**
- 2. Address**
- 2. Date of Expenditure / Purchase Date**
- 2. Dollar Amount of Expenditure**
- 2. Purpose of Expenditure**
- 3. Add additional expenditures**
- 3. Name**
- 3. Address**
- 3. Date of Expenditure / Purchase Date**
- 3. Dollar Amount of Expenditure**
- 3. Purpose of Expenditure**
- 4. Add additional expenditures**
- 4. Name**
- 4. Address**
- 4. Date of Expenditure / Purchase Date**
- 4. Dollar Amount of Expenditure**
- 4. Purpose of Expenditure**
- 5. Add additional expenditures**
- 5. Name**
- 5. Address**
- 5. Date of Expenditure / Purchase Date**
- 5. Dollar Amount of Expenditure**
- 5. Purpose of Expenditure**
- Add additional expenditures**

**Please check this box to certify your report:**

Certified