



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 139768 2. Committee Name Melody Magee for Warren City Council 5. Committee's Mailing Address P.O. Box 5422 Warren, MI 48090 Area Code and Phone (313) 779-1666 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. 7. Treasurer's Business Address Area Code and Phone _____		3. This Statement covers From: 07/24/2023 to 08/28/2023 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">4. Candidate Last Name Magee</td> <td style="width:25%;">First Name Melody</td> <td style="width:25%;">M.I. S</td> </tr> </table> 4a. Office Sought Including District # or Community Served (If applicable) 4b. County of Residence MACOMB 6. Treasurer's Name & Residential Address P.O. Box 5422 Warren, MI 48090 Area Code & Phone (313) 779-1666 8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____		4. Candidate Last Name Magee	First Name Melody	M.I. S																	
4. Candidate Last Name Magee	First Name Melody	M.I. S																					
9. TYPE OF STATEMENT 9a. ☐ Pre-Election OR 9b. ☒ Post-Election Pre-Election or Post-Election Statement relates to: ☒ Primary ☐ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement (_____) Coverage Year 9d. ☒ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)																					
9e. Dissolution of Candidate Committee ☐ 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. <table style="width:100%;"> <tr> <td style="width:40%;">Current Treasurer or Designated Record keeper</td> <td style="width:30%;">Melody Magee</td> <td style="width:10%;">Signature</td> <td style="width:20%;">Date</td> <td style="width:10%;">9/11/23</td> </tr> <tr> <td></td> <td>Type or Print Name</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Candidate</td> <td>Melody Magee</td> <td>Signature</td> <td>Date</td> <td>9/11/23</td> </tr> <tr> <td></td> <td>Type or Print Name</td> <td></td> <td></td> <td></td> </tr> </table>		Current Treasurer or Designated Record keeper	Melody Magee	Signature	Date	9/11/23		Type or Print Name				Candidate	Melody Magee	Signature	Date	9/11/23		Type or Print Name			
Current Treasurer or Designated Record keeper	Melody Magee	Signature	Date	9/11/23																			
	Type or Print Name																						
Candidate	Melody Magee	Signature	Date	9/11/23																			
	Type or Print Name																						



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139768

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Melody Magee for Warren City Council

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,464.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$1,464.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$1,464.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$828.08</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$828.08</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>\$8,946.32</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$799.46</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$1,464.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$2,263.46</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$828.08</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$1,435.38</u> *	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139768
2. Committee Name Melody Magee for Warren 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? ☐ YES 4. Date of Receipt <u>07/30/2023</u> Name & Address: Yvette Anderson 17669 Annchester Rd. Detroit, MI		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/03/2023</u> Name & Address: Teri Dennings 25196 Independence Trail Warren, MI 48089		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Circuit Court Judge</u> Employer <u>Macomb County District Court</u> Business Address <u>40 N Main St Mt Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/17/2023</u> Name & Address: Joel Rutherford 5683 Storrow Court Warren, MI 48092		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/21/2023</u> Name & Address: Bryan James 3494 Audubon Detroit, MI 48224		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$225.00

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

\$1,464.00

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 139768
2. Committee Name Melody Magee for Warren 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? ☐ YES 4. Date of Receipt <u>08/23/2023</u> Name & Address: Jeremy Fisher 31428 Saratoga Warren, MI 48093		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/24/2024</u> Name & Address: Klaudia Psari 946 Crescent Ln Grosse Pointe Woods, MI 48236		\$ <u>38.00</u>	\$ <u>38.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/24/2023</u> Name & Address: Kimberly Garner 10704 Silverbrook Drive Cincinnati, OH 45240		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/25/2023</u> Name & Address: Teri Dennings 25196 Independence Trail Warren, MI 48089-2087		\$ <u>103.00</u>	\$ <u>103.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Circuit Court Judge</u> Employer <u>Macomb District Court Judge</u> Business Address <u>40 N Main St Mt Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$191.00

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

\$1,464.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139768
2. Committee Name Melody Magee for Warren 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? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Zvonko Blazeovski</u> <u>31253 Gay Street</u> <u>Roseville, MI 48066</u>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>George Chapp</u> <u>4753 Stiwell Drive</u> <u>Warren, MI 48092</u>		\$ <u>36.00</u>	\$ <u>36.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Mai Xiong</u> <u>32820 Newcastle Dr</u> <u>Warren, MI 48083</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>County Commisioner</u> Employer <u>Macomb County</u> Business Address <u>40 N Main St Mt Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Christine Bertrand</u> <u>4817 La Chene Dr.</u> <u>Warren, MI 48092</u>		\$ <u>103.00</u>	\$ <u>103.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Washtenaw Country Prosecutor's Office</u> Business Address <u>200 N Main St Ann Arbor, MI 48104</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$314.00

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

\$1,464.00

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 139768
2. Committee Name Melody Magee for Warren 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? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: Felicia Johnson 26000 Knollwood South Drive New Baltimore, MI 48051		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: Lisa Blazeovski 31253 Gay Roseville, MI 48066		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: George Higgins 18331 Breezeway Fraser, MI 48026		\$ <u>103.00</u>	\$ <u>103.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Senior Field Organizer</u> Employer <u>For Our Future Michigan</u> Business Address <u>27600 Northwestern Hwy Southfield, MI, 48034-2184</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: Helen Springer 24647 Spring LN Harrison Township, MI 48045		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$254.00

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

\$1,464.00

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 139768

2. Committee Name Melody Magee for Warren 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? ☐ YES 4. Date of Receipt <u>08/17/2023</u> Name & Address: <u>Birdie Nash</u> <u>P.O. Box 46541</u> <u>Mount Clemens, MI 48046</u>		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Mary Kathleen Swan</u> <u>31720 Lexington St.</u> <u>Warren, MI 48092</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Kevin Hertel</u> <u>22401 Lavon St.</u> <u>St. Clair Shores, MI 48081</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Senator</u> Employer <u>State of Michigan</u> Business Address <u>Post Office Box 30036 Lansing, MI 48909-7536</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/2023</u> Name & Address: <u>Marie Adkins</u> <u>13742 Hobart Ave</u> <u>Warren, MI 48089</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$240.00

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

\$1,464.00

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 139768
2. Committee Name Melody Magee for Warren 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 <u>08/27/2023</u> Name & Address: <u>Camela Finn</u> <u>32631 Desmond Dr.</u> <u>Warren, MI 48093</u>		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/29/2023</u> Name & Address: <u>Angela Rogensues</u> <u>13254 Common Rd</u> <u>Warren, MI 48088</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>Playworks Michigan</u> Business Address <u>2990 W Grand Blvd Suite 231 Detroit, MI 48202</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$240.00

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

\$1,464.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139768
2. Committee Name Melody Magee for Warren 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>Dollar Tree</u> Address <u>28776 Gratiot Ave.</u> <u>Roseville, MI</u> ☐ Fund Raiser	Purpose: <u>Campaign Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/2023</u> Date	\$ <u>38.43</u> Click Here for Memo Itemization Type v
Expenditure #2 Name <u>Michaels Store</u> Address <u>32471 Gratiot Ave.</u> <u>Roseville, MI</u> ☐ Fund Raiser	Purpose: <u>Campaign T-shirts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/25/2023</u> Date	\$ <u>32.52</u> Click Here for Memo Itemization Type v
Expenditure #3 Name <u>Facebook</u> Address <u>1601 Willow Rd.</u> <u>Menlo park, CA</u> ☐ Fund Raiser	Purpose: <u>Facebook Ad</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/2023</u> Date	\$ <u>1.46</u> Click Here for Memo Itemization Type v
Expenditure #4 Name <u>FEDEX Office</u> Address <u>7900 Legacy Dr.</u> <u>Plano, TX</u> ☐ Fund Raiser	Purpose: <u>Campaign Flyers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/2023</u> Date	\$ <u>59.63</u> Click Here for Memo Itemization Type v
Expenditure #5 Name <u>Godaddy.com</u> Address <u>2155 E. Godaddy way</u> <u>Tempe, AZ</u> ☐ Fund Raiser	Purpose: <u>Website Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/27/2023</u> Date	\$ <u>60.00</u> Click Here for Memo Itemization Type v
Subtotal this page			\$ <u>192.04</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$ <u>828.08</u>

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139768
2. Committee Name Melody Magee for Warren 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>Dollar Tree</u> Address <u>26696 Ryan rd</u> <u>Warren, MI</u> ☐ Fund Raiser	Purpose: <u>Snacks for Walkers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/01/2023</u> Date	\$ <u>21.20</u> Click Here for Memo Itemization Type v
Expenditure #2 Name <u>Fiverr Inc.</u> Address <u>38 Greene St.</u> <u>New York, NY</u> ☐ Fund Raiser	Purpose: <u>Flyer</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/02/2023</u> Date	\$ <u>13.05</u> Click Here for Memo Itemization Type v
Expenditure #3 Name <u>PayPal</u> Address <u>San Jose, CA</u> ☐ Fund Raiser	Purpose: <u>Service Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/02/2023</u> Date	\$ <u>8.00</u> Click Here for Memo Itemization Type v
Expenditure #4 Name <u>EBay</u> Address <u>2535 North First St.</u> <u>San Jose, CA</u> ☐ Fund Raiser	Purpose: <u>Signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/2023</u> Date	\$ <u>122.95</u> Click Here for Memo Itemization Type v
Expenditure #5 Name <u>Fiverr Inc.</u> Address <u>38 Greene St.</u> <u>New York, NY</u> ☐ Fund Raiser	Purpose: <u>Create Flyer</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/2023</u> Date	\$ <u>7.78</u> Click Here for Memo Itemization Type v

Subtotal this page \$ 172.98

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

\$ 828.08

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139768
2. Committee Name Melody Magee for Warren 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>Shirtspace.com</u> Address <u>7509 South 5th St.</u> <u>WA</u> ☐ Fund Raiser	Purpose: <u>Campaign T-shirts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/2023</u> Date	\$ <u>167.29</u> Click Here for Memo Itemization Type v
Expenditure #2 Name <u>Lape Soul Food Kitchen</u> Address <u>5812 Twelve mile rd.</u> <u>Warren, MI</u> ☐ Fund Raiser	Purpose: <u>Campaign walkers lunch</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/2023</u> Date	\$ <u>23.32</u> Click Here for Memo Itemization Type v
Expenditure #3 Name <u>Dollar General</u> Address <u>John R. Rd</u> <u>Hazel Park, MI</u> ☐ Fund Raiser	Purpose: <u>Poll Workers Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/2023</u> Date	\$ <u>16.96</u> Click Here for Memo Itemization Type v
Expenditure #4 Name <u>Dollar Tree</u> Address <u>23201 John R. Rd</u> <u>Hazel Park, MI</u> ☐ Fund Raiser	Purpose: <u>Poll Workers Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/2023</u> Date	\$ <u>16.70</u> Click Here for Memo Itemization Type v
Expenditure #5 Name <u>Olgas Kitchen</u> Address <u>1853 E. Big Beaver rd.</u> <u>Troy, MI</u> ☐ Fund Raiser	Purpose: <u>Food</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/2023</u> Date	\$ <u>14.99</u> Click Here for Memo Itemization Type v

Subtotal this page **\$239.26**

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

\$828.08

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139768
2. Committee Name melody Magee for Warren 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>Famous Fried Chicken</u> Address <u>29590 Orchard Lake Rd.</u> <u>Farmington Hills, MI</u> ☐ Fund Raiser	Purpose: <u>Lunch for Canvassers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/10/2023</u> Date	\$ <u>19.91</u>
Expenditure #2 Name <u>Motor Soul Food</u> Address <u>24790 Greenfield Rd.</u> <u>Oak Park, MI</u> ☐ Fund Raiser	Purpose: <u>Lunch for Canvassers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/11/2023</u> Date	\$ <u>14.00</u>
Expenditure #3 Name <u>Fiverr Inc.</u> Address <u>38 Greene St.</u> <u>New York, NY</u> ☐ Fund Raiser	Purpose: <u>Revision of Flyer</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/24/2023</u> Date	\$ <u>23.60</u>
Expenditure #4 Name <u>Fiverr Inc.</u> Address <u>38 Greene St.</u> <u>New York, NY</u> ☐ Fund Raiser	Purpose: <u>Create Flyer</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/24/2023</u> Date	\$ <u>23.60</u>
Expenditure #5 Name <u>Costco</u> Address <u>30550 Stephenson Hwy.</u> <u>Madison Heights, MI</u> ☐ Fund Raiser	Purpose: <u>Office Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/26/2023</u> Date	\$ <u>25.41</u>

Subtotal this page **\$106.52**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$828.08**

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139768
2. Committee Name melody Magee for Warren City Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Big Lots Address 26800 Dequindre Warren, MI ☐ Fund Raiser	Purpose: <u>Snacks Door Knockers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/2023</u> Date	\$ <u>96.09</u> Click Here for Memo Itemization Type v
Expenditure #2 Name FedEX Office Address 150 John R Rd. Madison Heights, MI ☐ Fund Raiser	Purpose: <u>Campaign Business Cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/2020</u> Date	\$ <u>21.19</u> Click Here for Memo Itemization Type v
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type v
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type v
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type v

Subtotal this page **\$117.28**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$828.08**

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139768
2. Committee Name Melody Magee for Warren City Council

This Schedule itemizes:

a ☐ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing 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 endorser 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: Melody Magee 25800 Timberline Dr. Warren, MI 48091	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>5/2-7/21</u> 6. <u>Original Amount of Debt:</u> <u>\$ 6,268.40</u>	\$ \$ \$ \$ \$	\$	\$ <u>6,268.40</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: Melody Magee 25800 Timberline Dr Warren, MI 48091	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>7/22- 8/26</u> 6. <u>Original Amount of Debt:</u> <u>\$ 770.55</u>	\$ \$ \$ \$ \$	\$	\$ <u>770.55</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: Melody Magee 25800 Timberline Dr Warren, MI 48091	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>8/27-10/20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,807.37</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,807.37</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 8,826.32

Grand Total of all Schedules 1E 8,826.32
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139768
2. Committee Name Melody Magee for Warren City Council

This Schedule itemizes:

☐ Debts and obligations owed by or forgiven the committee OR ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing 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 endorser 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 5 minus Item 8)
Debt #1 Owed to or by: Melody Magee 25800 Timberline Dr. Warren, MI 48091 Corp? ☐ Yes	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>5/2-7/21</u> 6. Original Amount of Debt: <u>\$ 6,268.40</u>	\$ \$ \$ \$	\$	\$ 6,268.40 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: <u>Melody Magee</u> <u>25800 Timberline Dr</u> <u>Warren, MI 48091</u> Corp? ☐ Yes	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>7/22-8/26</u> 6. Original Amount of Debt: <u>\$ 770.55</u>	\$ \$ \$ \$	\$	\$ 770.55 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: <u>25800 Timberline Dr</u> <u>Warren, MI 48091</u> <u>Melody Magee</u> Corp? ☐ Yes	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>3/27-10/20</u> 6. Original Amount of Debt: <u>\$ 1,807.37</u>	\$ \$ \$ \$	\$	\$ 1,807.37 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 8,846.32
Grand Total of all Schedules 1E 8,846.32

(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding 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 "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139768
2. Committee Name Melody Magee for Warren City Council

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>08/26</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>15</u>	5. Type of Fund Raising Activity <u>Home Event</u>	6. Address and Name (If any) of the place where the activity was held. <u>31428 Saratoga</u> <u>Warren, MI 48093</u> ☒ Private Residence
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7. Total Contributions \$875.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$0.00
10. Total Cost of Event \$875.00
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.