



**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.

3. This Statement covers From: 7-20-20 to 8-24-20

1. Committee I.D. Number <u>C-2016-089</u> 2. Committee Name <u>Ken Magee for Sheriff</u>	4. Candidate Last Name <u>MAGEE</u> First Name <u>KENNETH</u> M.I. <u>W.</u> 4a. Office Sought Including District # or Community Served (if applicable) <u>SHERIFF OF WASHTENAW COUNTY</u> 4b. County of Residence <u>WASHTENAW</u>
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5. Committee's Mailing Address <u>8850 STOFER ROAD CHELSEA MI 48118</u> Area Code and Phone <u>(503) 781-3174</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 <u>Ken Magee 8850 STOFER ROAD CHELSEA MI, 48118</u> Area Code & Phone <u>(503) 781-3174</u>
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7. Treasurer's Business Address <u>(SAME AS #6)</u> <u>Ken Magee 8850 STOFER ROAD CHELSEA MI, 48118</u> Area Code and Phone <u>(503) 781-3174</u>	8. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper) <u>N/A</u> Area Code and Phone _____
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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
8-4-2020

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.

FILED
WASHTENAW COUNTY, MI
SEP - 3 10:25
KESBAUM
REGISTER

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/knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper <u>Ken Magee</u> Type or Print Name Candidate <u>Ken Magee</u> Type or Print Name	<u>Ken Magee</u> Signature <u>Ken Magee</u> Signature Date <u>8-20-20</u> Date <u>8-28-20</u>
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2016-089
2. Committee Name Ken Magee for Sheriff

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: <u>ALEX DEPARRY</u> <u>2593 W. Towne St #212</u> <u>Ann Arbor MI 48103</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-22-20</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUILDER</u> Employer <u>Self</u> Business Address <u>2593 W. Towne St #212 - Ann Arbor MI 48103</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 Name & Address: <u>MARGARET STURGIS</u> <u>2009 POWERS TRAIL</u> <u>Ann Arbor MI 48105</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-30-20</u>	\$ <u>250⁰⁰</u>	\$ <u>350⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Don Lupi</u> <u>4015 Emerson Dr.</u> <u>Saline MI 48176</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-31-20</u>	\$ <u>475⁰⁰</u>	\$ <u>825⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Police Officer</u> Employer <u>Saline Police Dept.</u> Business Address <u>100 N. HARRIS, SALINE MI 48176</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 #4 Name & Address: <u>Ken Magee</u> <u>4850 STUFEN RD</u> <u>Chelsea MI 48118</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-31-20</u>	\$ <u>200⁰⁰</u>	\$ <u>1025⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

1025⁰⁰
1025⁰⁰

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2016-089
2. Committee Name Rew Magg for Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>ATC</u> Address <u>7713 STONEY CREEK</u> <u>FAIRFAX STATION</u> <u>VA</u> <input type="checkbox"/> Fund Raiser <u>VERMONT, 22039</u>	Purpose: <u>Robo Calls</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-25-20</u> Date	\$ <u>1000⁰⁰</u>
Expenditure #2 Name <u>ATC</u> Address <u>7713 STONEY CREEK CT</u> <u>FAIRFAX STATION</u> <u>VERMONT</u> <input type="checkbox"/> Fund Raiser <u>22036</u>	Purpose: <u>Robo calls</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-31-20</u> Date	\$ <u>400⁰⁰</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 1900⁰⁰

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1900⁰⁰

Enter this total on line 8a of Summary Page



**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2016-089
2. Committee Name Ken Magee for Sheriff

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 Owed <u>to</u> or by: Corp? <input type="checkbox"/> Yes <u>KEN MAGEE</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>5-4-16</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0⁰⁰</u>	\$ <u>500⁰⁰</u> <input type="checkbox"/> FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Owed <u>to</u> or by: Corp? <input type="checkbox"/> Yes <u>KEN Magee</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>6-20-16</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2000⁰⁰</u>	<u>11-30-16</u> \$ <u>1149⁸⁶</u> \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>1149⁸⁰</u>	\$ <u>850²⁰</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Owed <u>to</u> or by: Corp? <input type="checkbox"/> Yes <u>KEN Magee</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>7-11-16</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2000⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0⁰⁰</u>	\$ <u>2000⁰⁰</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt) 3350²⁰

Grand Total of all Schedules 1E
(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.



**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2016-089
2. Committee Name Ken Magee for Sheriff

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) <input type="checkbox"/> FORGIVEN
Debt #1 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <u>Ken Magee</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>9-22-16</u> 6. <u>Original Amount of Debt:</u> \$ <u>3000⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0⁰⁰</u>	\$ <u>3000⁰⁰</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <u>Ken Magee</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10-13-16</u> 6. <u>Original Amount of Debt:</u> \$ <u>500⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0⁰⁰</u>	\$ <u>500⁰⁰</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <u>Ken Magee</u>	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11-1-16</u> 6. <u>Original Amount of Debt:</u> \$ <u>650⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0⁰⁰</u>	\$ <u>650⁰⁰</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 4150
Grand Total of all Schedules 1E 7500²⁰
(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.