

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED
FEC MAILCENTER

2026 JUL 31 PM 12:00
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MARY WATERS FOR CONGRESS

ADDRESS (number and street)

1276 NAVARRE PLACE



Check if different than previously reported. (ACC)

DETROIT

MI

48207

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C 00867960

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MI

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY
08 / 04 / 2026

MM / DD / YYYY
08 / 04 / 2026

MM / DD / YYYY
08 / 04 / 2026

in the State of

MI

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY
08 / 04 / 2026

MM / DD / YYYY
08 / 04 / 2026

MM / DD / YYYY
08 / 04 / 2026

in the State of

MI

5. Covering Period

MM / DD / YYYY
07 / 01 / 2026

MM / DD / YYYY
07 / 01 / 2026

MM / DD / YYYY
07 / 01 / 2026

through

MM / DD / YYYY
07 / 15 / 2026

MM / DD / YYYY
07 / 15 / 2026

MM / DD / YYYY
07 / 15 / 2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MICHELLE STORY-STEWART

Signature of Treasurer

Michelle Story-Stewart

Date

MM / DD / YYYY
07 / 27 / 2026

MM / DD / YYYY
07 / 27 / 2026

MM / DD / YYYY
07 / 27 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Page 2

Write or Type Committee Name

MARY WATERS FOR CONGRESS

Report Covering the Period:

From:

07 / 01 / 2026

To:

07 / 15 / 2026

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

1 1 , 5 5 0

1 1 , 5 5 4 . 8 0

(b) Total Contribution Refunds
(from Line 20(d))

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

1 1 , 5 5 0

1 1 , 5 5 4 . 8 0

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

5 , 7 1 7 . 9 4

1 5 , 5 3 4 . 1 4

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

5 , 7 1 7 . 9 4

1 5 , 5 3 4 . 1 4

8. Cash on Hand at Close of
Reporting Period (from Line 27)

8 , 4 8 6 . 8 0

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0 . 0 0

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0 . 0 0

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

20260715 11:41 AM

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Page 3

Write or Type Committee Name

MARY WATERS FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 15 / 2026

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)

1 1 , 5 5 0

1 1 , 5 5 4 . 8 0

(ii) Unitemized

(iii) TOTAL of contributions
from individuals

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d)) ..

1 1 , 5 5 0

1 1 , 5 5 4 . 8 0

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate

0

1 2 , 0 0 0

(b) All Other Loans

(c) TOTAL LOANS
(add Lines 13(a) and (b))

0

1 2 , 0 0 0

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)

1 1 , 5 5 0

2 3 , 5 5 4 . 8 0

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

Page 4

II. DISBURSEMENTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

5 , 7 1 7 . 9 4

1 5 , 5 3 4 . 1 4

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:
(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ►

5 , 7 1 7 . 9 4

1 5 , 5 3 4 . 1 4

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

2 , 6 5 4 . 7 4

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

1 1 , 5 5 0

25. SUBTOTAL (add Line 23 and Line 24)

1 4 , 2 0 4 . 7 4

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

5 , 7 1 7 . 9 4

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

8 , 4 8 6 . 8 0

2025 RELEASE UNDER E.O. 14176

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE	OF
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MARY WATERS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GLADNEY, KELLY			Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
Mailing Address 280 ALFRED ST				
City DETROIT	State MI	Zip Code 48201		
FEC ID number of contributing federal political committee. C 00867960			Amount of Each Receipt this Period 1 0 0 . 0 0	
Name of Employer NOT EMPLOYED		Occupation NOT EMPLOYED	☒ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 2 0 0 . 0 0		
Full Name (Last, First, Middle Initial) B. HADEN, PIERRE			Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
Mailing Address 2020 CHICAGO				
City DETROIT	State MI	Zip Code 48206		
FEC ID number of contributing federal political committee. C 00867960			Amount of Each Receipt this Period 2,450	
Name of Employer SELF-EMPLOYED		Occupation CONSULTANT	☐ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 2 , 4 5 0		
Full Name (Last, First, Middle Initial) C. TAMEKA HADEN			Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
Mailing Address 2020 CHICAGO				
City DETROIT	State MI	Zip Code 48206		
FEC ID number of contributing federal political committee. C 00867960			Amount of Each Receipt this Period 2 , 4 5 0	
Name of Employer HADEN HOLDINGS		Occupation INVESTMENTS	☐ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 2 , 4 5 0		
SUBTOTAL of Receipts This Page (optional)			5 , 1 0 0	
TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF	
(check only one)					
☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 12	☐ 13a
☐ 12	☐ 13a	☐ 13b	☐ 14	☐ 15	

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NAME OF COMMITTEE (In Full)
MARY WATERS FOR CONGRESS

Full Name (Last, First, Middle Initial) LARSOSA, KRYSTAL		Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
A. Mailing Address 13964 FORRER			
City DETROIT	State MI	Zip Code 48227	
FEC ID number of contributing federal political committee. C 00867960		Amount of Each Receipt this Period 100.00	
Name of Employer DMM	Occupation NOT PROFIT	☐ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) LARSOSA, JASAHN		Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
B. Mailing Address 13964 FORRER			
City DETROIT	State MI	Zip Code 48227	
FEC ID number of contributing federal political committee. C 00867960		Amount of Each Receipt this Period 100.00	
Name of Employer GREENLIGHT FUND	Occupation EXECUTIVE DIRECTOR	☐ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) PILOT, KELLAN		Date of Receipt MM / DD / YYYY 07 / 01 / 2026	
C. Mailing Address 1187 EDISON ST			
City DETROIT	State MI	Zip Code 48202	
FEC ID number of contributing federal political committee. C 00867960		Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED	Occupation ACCOUNTANT	☐ Memo Item	
Receipt For: ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE OF

(check only one)

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY WATERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Constance Bailey

A.

Mailing Address
2445 Atkinson St

City State Zip Code
DETROIT MI 48206

FEC ID number of contributing
federal political committee. C 00867960

Name of Employer Occupation
NOT EMPLOYED NOT EMPLOYED

Receipt For: Election Cycle-to-Date
☒ Primary ☐ General
☐ Other (specify) ▼ 200.00

Date of Receipt

MM / DD / YYYY
07 / 01 / 2026

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMANDA ELIAS

B.

Mailing Address
2829 BRUSH ST

City State Zip Code
DETROIT MI 48201

FEC ID number of contributing
federal political committee. C 00867960

Name of Employer Occupation
GOVERNMENT CITY OF DETROIT

Receipt For: Election Cycle-to-Date
☒ Primary ☐ General
☐ Other (specify) ▼ 3,300.00

Date of Receipt

MM / DD / YYYY
07 / 03 / 2026

Amount of Each Receipt this Period

3,300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JULIAN CHEEK

C.

Mailing Address
9090 DWIGHT ST

City State Zip Code
DETROIT MI 48213

FEC ID number of contributing
federal political committee. C 00867960

Name of Employer Occupation
IT ARCHITECT LPC SOLUTIONS

Receipt For: Election Cycle-to-Date
☒ Primary ☐ General
☐ Other (specify) ▼ 2,500.00

Date of Receipt

MM / DD / YYYY
07 / 15 / 2026

Amount of Each Receipt this Period

2,500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

6,000.00

11,550.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MARY WATERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. The Glenn-Story Group

Mailing Address
2036 W Boston Blvd

City
DETROIT

State
MI

Zip Code
48206

Purpose of Disbursement
CAMPAIGN STRATEGY AND MESSAGING

0 0 1

Candidate Name
MARY WATERS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2026

FEC Identification Number

C 00867960

Amount of Each Disbursement this Period

4,750

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE

Mailing Address
20501 Livernois Avenue

City
DETROIT

State
MI

Zip Code
48221

Purpose of Disbursement
QUARTERLY REPORT MAILING

001

Candidate Name
MARY WATERS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2026

FEC Identification Number

C 00867960

Amount of Each Disbursement this Period

7180

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rusas Printing

Mailing Address
26770 GRAND RIVER AVE

City
REDFORD

State
MI

Zip Code
48240

Purpose of Disbursement
Campaign Post Cards

006

Candidate Name
Mary Waters

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2026

FEC Identification Number

C 00867960

Amount of Each Disbursement this Period

439.90

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5,261.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MARY WATERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2026

A. ACT BLUE

Mailing Address
PO BOX 962017

City
BOSTON

State
MA

Zip Code
02196

Purpose of Disbursement
DONATION PROCESSING FEE

003

FEC Identification Number

C 00867960

Candidate Name
MARY WATERS

Category/
Type

Amount of Each Disbursement this Period

456.24

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

☐ Memo Item

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

☐ Memo Item

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

☐ Memo Item

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

456.24

TOTAL This Period (last page this line number only).....▶

5717.94

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

13a
13b

NAME OF COMMITTEE (In Full)

MARY WATERS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Mary Waters

☐ Memo Item

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

1276 NAVARRE PLACE

City

DETROIT

State

MI

ZIP Code

48207

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

% (apr)

☐ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

**Supplementary for
Information found on
Page _____ of Schedule C**

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER C	
LENDING INSTITUTION (LENDER) Full Name Mailing Address City State Zip Code		Amount of Loan Interest Rate (APR) %	
Date Incurred or Established Date Due		M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred M M / D D / Y Y Y Y Y Y			
B. If line of credit, Amount of this Draw: Total Outstanding Balance:			
C. Are other parties secondarily liable for the debt incurred? ☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? ☐ No ☐ Yes If yes, specify: _____		What is the value of this collateral? Does the lender have a perfected security interest in it? ☐ No ☐ Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: _____		What is the estimated value? 	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: M M / D D / Y Y Y Y Y Y		Location of account: Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE M M / D D / Y Y Y Y Y Y	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE M M / D D / Y Y Y Y Y Y	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE OF
FOR LINE NUMBER:
(check only one) ☐ 9
☐ 10

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)



**UNITED STATES
POSTAL SERVICE®**

**MAIL
EXPRESS®**

Mary Waters for Congress
Navarre Place
T, MI 48307



Retail

E

US POSTAGE PAID

\$35.90

Origin: 48221
07/29/26
2525020221-50

PRIORITY MAIL EXPRESS®

LOPE

MARY WATERS
FOR CONGRESS
1276 NAVARRE PL
DETROIT MI 48207-3014

0 Lb 3.30 Oz
RDC 07

SCHEDULED DELIVERY DAY: 07/30/26 08:00 PM

SHIP
TO:

FEDERAL ELECTION COMMISSION
1050 1ST ST NE
WASHINGTON DC 20002-5859

C062



USPS TRACKING® #



9570 1108 6213 6210 6949 91

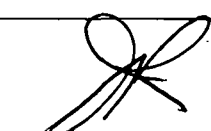
ber 2023
9 1/2



GUARANTEED* - TRACKED - INS

Shipments, the maximum weight is 70 lbs. For international shipments, the maximum weight is 20 lbs.

2025 RELEASE UNDER E.O. 14176

Federal Election Commission		
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS		
The FEC added this page to the end of this filing to indicate how it was received.		
☐ Hand Delivered	Date of Receipt	
☐ USPS First Class Mail	Date of Receipt	
☐ USPS Registered/Certified	Postmarked (R/C)	
☒ USPS Priority Mail	Postmarked 07/29/26	
☐ USPS Priority Mail Express	Postmarked	
☐ Postmark Illegible		
☐ No Postmark		
☐ Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
	Next Business Day Delivery	☐
☐ Received via FAX	Date of Receipt	
☐ Received via Email	Date of Receipt	
☐ Received from Electronic Filing Office	Date of Receipt	
☐ Other (Specify):	Date of Receipt or Postmarked	
 PREPARER	07/31/26 DATE PREPARED	

(4/2023)