



**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: 08/27/2019 to 10/20/2019

1. Committee I.D. Number
46797

2. Committee Name
Yanice Jackson for Lansing

4. Candidate Last Name **Jackson-Long** First Name **Yanice** M.I. **Y**

4a. Office Sought Including District # or Community Served (If applicable)

4b. County of Residence **INGHAM**

5. Committee's Mailing Address
P.O. Box 27334, Lansing MI 48909

Area Code and Phone **517-258-8310**

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.

6. Treasurer's Name & Residential Address
**Ian Sanwald
1407 Elmwood
Lansing, MI 48917**

Area Code & Phone **269-924-8183**

**RECEIVED
OCT 24 2019
INGHAM COUNTY CLERK'S OFFICE**

7. Treasurer's Business Address
**Ian Sanwald
1407 Elmwood
Lansing, MI 48917**

Area Code and Phone **269-924-8183**

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone _____

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
11/05/2019

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.

F2019-0690
10/24/19 8:02 AM Page 1 of 1
CAMP \$0.00
Barb Byrum, Ingham County Clerk

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.

Current Treasurer or Designated Record keeper **Ian Sanwald** Signature _____ Date 10/24/2019

Candidate **Yanice Jackson-Long** Signature _____ Date 10/24/2019



1. Committee I.D. Number 46797

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Yanice Jackson for Lansing

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>3,580.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>3,580.00</u>	(18.) \$ <u>13,121.45</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>3,580</u>	(20.) \$ <u>3580</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>100</u>	(21.) \$ <u>387.88</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u> </u>	(22.) \$ <u> </u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2,952.81</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2,952.81</u>	(23.) \$ <u>11,707.27</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u> </u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u> </u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u> </u>	(24.) \$ <u> </u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u> </u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u> </u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>730.54</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>3580.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4310.54</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>2989.53</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1321.01</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/27/2019</u></p> <p>Name & Address: Covert Joshua 737 Jessop Lansing MI 48910</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Covert Law</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p>	<p>\$ <u>100</u></p> <p style="text-align: center;">Click Here for Memo Itemization</p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u></p> <p>Name & Address: Lightfoot, Joyce 3333 Kilberry Road Lansing</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>US Postal Service</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p>	<p>\$ <u>50</u></p> <p style="text-align: center;">Click Here for Memo Itemization</p>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u></p> <p>Name & Address: Carter Larry 3205 Dody Ave Apt 4 Michigan City IN,</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Publisher</u> Employer <u>The Chronicle</u></p> <p>Business Address <u>2843 E Grand River Ave East Lansing, MI 48823</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>80</u></p>	<p>\$ <u>160</u></p> <p style="text-align: center;">Click Here for Memo Itemization</p>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u></p> <p>Name & Address: Miles Martha 417 Carrier Street</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>NA</u></p> <p>Business Address <u>NA</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p>	<p>\$ <u>175</u></p> <p style="text-align: center;">Click Here for Memo Itemization</p>

Page Subtotal **\$280.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Greer 3147 Boston Blvd	\$ <u>30</u>	\$ <u>70</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Sales</u> Employer <u>Dep Hats</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Hill Sharon 9651 Oglesby Ave	\$ <u>60</u>	\$ <u>85</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Student</u> Employer <u>NA</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Fox Alan 3333 Moores River Dr Apt 107 Lansing MI 48911 3205 Dody Ave Apt 4 Michigan City IN	\$ <u>50</u>	\$ <u>130</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Deputy Treasurer</u> Employer <u>Ingham County</u> Business Address <u>341 S Jefferson Mason MI 48832</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Hernandez Florenio 1423 Ohio Ave Lansing MI 48906	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Program Manager</u> Employer <u>Michigan State University</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal \$ 155.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Rivera 323 Moores River Dr Lansing MI 48910 5. If over \$100.00 cumulative, please provide: Occupation <u>Stylist</u> Employer <u>Self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>75</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Barron Wendell 2576 Saranac Lane Okemos MI 48864 5. If over \$100.00 cumulative, please provide: Occupation <u>Car Dealer</u> Employer <u>Courtesy Ford</u> Business Address <u>1830 W Grand River Ave, Okemos, MI 48864</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Rodriguez Nino 2513 Dunbar Drive Lansing MI 48906 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>40</u>	\$ <u>40</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Lopez 1927 Pleasant View Ave Lansing MI 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>40</u>	\$ <u>90</u> Click Here for Memo Itemization

Page Subtotal **\$305.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>9/4/2019</u> Name & Address: Carter 86 W. Yale Avenue Pontiac 5. If over \$100.00 cumulative, please provide: Occupation <u>State Rep</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Covert 737 Jessop Lansing MI 48910 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Covert Law</u> Business Address <u>1129 N Washington Ave, Lansing, Michigan 48906</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Jackson 3011 Cambridge Road Lansing MI 48911 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>70</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Walker 2924 Mersey Lane Apt 6 Lansing MI 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>15</u>	\$ <u>15</u> Click Here for Memo Itemization

Page Subtotal **\$215.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Basore 3316 Sheatham Road Dansville MI 48819 5. If over \$100.00 cumulative, please provide: Occupation <u>Business Development</u> Employer <u>Michigan Cannabis Industry Assc</u> Business Address <u>1129 N Washington Ave, Lansing, Michigan 48906</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Monti 1713 Stanley Court Lansing 5. If over \$100.00 cumulative, please provide: Occupation <u>Care Giver</u> Employer <u>Covert Law</u> Business Address <u>1713 Stanley Court Lansing</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>600</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Collison 1114 E Kalamazoo St, Lansing, MI 48912 5. If over \$100.00 cumulative, please provide: Occupation <u>Driver</u> Employer <u>Self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>40</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Hollenbeck Jeff 2613 Montego Drive Lansing MI 48912 5. If over \$100.00 cumulative, please provide: Occupation <u>Student</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>10</u>	\$ <u>10</u> Click Here for Memo Itemization

Page Subtotal \$215.00 ~~\$480~~

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Chunev 5780 Holt Rd Holt	\$ <u>40</u>	\$ <u>120</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Sales Agent</u> Employer <u>Coldwell Banker</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Handy 204 S Foster Ave	\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Care Giver</u> Employer <u>Self</u> Business Address <u>204 S Foster Ave</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: McGill James 1514 Drexel Rd Lansing, MI, 48915-1208	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Attorney</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/25/2019</u> Name & Address: Amedeo William	\$ <u>150</u>	\$ <u>600</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Attorney</u> Employer <u>Ann Arbor Legal</u> Business Address <u>2500 Packard Ave Suite 106 Ann Arbor MI 48104</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal \$400.00 \$390

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Jackson-Long Yanice 534 E MT Hope Ave Lansing, MI 48910	\$ <u>30</u>	\$ <u>355</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Account Clerk III</u> Employer <u>Ingham County Treasurer</u> Business Address <u>313 W Kalamazoo Street, Lansing MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Ramos Anastacio 1005 W Shiawassee Lansing MI 48915	\$ <u>80</u>	\$ <u>80</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Forklift</u> Employer <u>Quality Dairy</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Nolan David 924 West Street Lansing MI 48915	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Assembly</u> Employer <u>GM</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Leek P.O. Box 15033 Lansing MI 48901	\$ <u>70</u>	\$ <u>70</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation <u>Inventor</u> Employer <u>Self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **\$280.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/05/2019</u> Name & Address: Vincent Jay 216 Denver St Lansing MI 48910 5. If over \$100.00 cumulative, please provide: Occupation <u>Author</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	\$ <u>150</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Hassell Willow 501 S Fairview Ave Lansing 5. If over \$100.00 cumulative, please provide: Occupation <u>Clerk</u> Employer <u>Spicer Gourp</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/31/2019</u> Name & Address: Hammer 524 Sherman Dr 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	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2019</u> Name & Address: Jackson-Long Yanice 5. If over \$100.00 cumulative, please provide: Occupation <u>Account Clerk III</u> Employer <u>Ingham County Treasurer</u> Business Address <u>313 W Kalamazoo Street Lansing MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>70</u> Click Here for Memo Itemization

Page Subtotal \$280.00 / 300.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Neal Ayanna 2212 Rossiter Place 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Grewal Law</u> Business Address <u>2290 Science Pkwy, Okemos, MI 48864</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>75</u>	\$ <u>175</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Inman Timothy 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Spicer Gourp</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>300</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Swope 1402 N Genesee 5. If over \$100.00 cumulative, please provide: Occupation <u>City Clerk</u> Employer <u>City of Lansing</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2019</u> Name & Address: Lynn 1133 S Washington Ave #4 5. If over \$100.00 cumulative, please provide: Occupation <u>Account Clerk III</u> Employer <u>Ingham County Treasurer</u> Business Address <u>313 W Kalamazoo Street Lansing MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u> Click Here for Memo Itemization

Page Subtotal \$220.00 245.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Cain Maxine 3418 Cambrey Drive Lansing MI 48933 2212 Rossiter Place 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>320</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Manchester Steve 514 Westmoreland Ave 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Pratt 416 Everett Drive 5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy Drain Comissior</u> Employer <u>Ingham County</u> Business Address <u>707 Buhl Street Mason, MI 48854</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>400</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2019</u> Name & Address: Nyamfukudza Takura 2514 Barstow Rd 5. If over \$100.00 cumulative, please provide: Occupation <u>Account Clerk III</u> Employer <u>Ingham County Treasurer</u> Business Address <u>313 W Kalamazoo Street Lansing MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal ~~\$228.00~~ \$400
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Jackson 3011 N Cambridge Lansing	\$ <u>20</u>	\$ <u>140</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Ingham County</u> Click Here for Memo Itemization Business Address <u>320 North Washington Square, Suite 100, Lansing, MI 48901</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Greene 3147 Boston Blvd	\$ <u>20</u>	\$ <u>70</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Dep Hats</u> Click Here for Memo Itemization Business Address <u>3147 Boston Blvd</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/2019</u> Name & Address: Pehlivanoglu Trinidad 3408 Inverary dr	\$ <u>20</u>	\$ <u>220</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Assistant</u> Employer <u>MI Department of Attorney Gener</u> Business Address <u>525 W Ottawa St 7th Floor, Lansing, MI 48909</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2019</u> Name & Address: Martinez 306 Leslie Street	\$ <u>100</u>	\$ <u>350</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **\$160.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/2019</u> Name & Address: Greer <u>Elena</u> 753 Audubon rd 5. If over \$100.00 cumulative, please provide: Occupation <u>Student</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/2019</u> Name & Address Eastwood Tom 1523 Picadilly Dr 5. If over \$100.00 cumulative, please provide: Occupation <u>Business Manager</u> Employer <u>IBEW</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/11/2019</u> Name & Address: Ash-Shakoor <u>Tanisha</u> 732 Wisconsin Avenue 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>220</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2019</u> Name & Address Brewer <u>Fonda</u> 5702 Castlebury Circle Lansing MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</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	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization

Page Subtotal \$105.00 / 20.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing

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? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2019</u> Name & Address: Moore <u>CHARLES</u> 2745 Hopkins Avenue Lansing MI 48912 5. If over \$100.00 cumulative, please provide: Occupation <u>Accountant</u> Employer <u>CL Moore and Associates</u> Business Address <u>530 S Pine St, Lansing, MI 48933</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>300</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/2019</u> Name & Address: Covert <u>Joshua</u> 737 Jessop Lansing MI 48910 5. If over \$100.00 cumulative, please provide: Occupation <u>Business Manager</u> Employer <u>IBEW</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>300</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/2019</u> Name & Address: Fox <u>ALAN</u> 3333 Moores River Dr Apt 107 5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy Treasurer</u> Employer <u>Ingham County</u> Business Address <u>341 S Jeffer</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>180</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: Brewer 6762 Castlebury Circle Lansing MI 48193 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal ~~\$420.00~~ \$250.00

Grand Total of All Schedules 1A \$3580.00
(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 46797
2. Committee Name Yanice Jackson for Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Zoup Address Washington Square 214 S. Washington Square Lansing, MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Meeting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/28/19</u> Date	<u>\$ 25.32</u>
Expenditure #2 Name USPS Address 4800 COLLINS LANSING MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: <u>P.O. BOX</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/3/19</u> Date	<u>\$ 46.00</u>
Expenditure #3 Name Act Blue Address 366 Summer Street, Somerville, MA 02144. <input type="checkbox"/> Fund Raiser	Purpose: <u>Distribution Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/10/19</u> Date	<u>\$.50</u>
Expenditure #4 Name Facebook Address 1 Hacker Way, Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/16/19</u> Date	<u>\$ 25.00</u>
Expenditure #5 Name USPS Address 4800 COLLINS LANSING MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/16/19</u> Date	<u>\$ 33.00</u>

Subtotal this page **\$129.82**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46797
2. Committee Name Yanice Jackson for Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Postmaster General Address 3311 N Saginaw St, Flint, MI 48505 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage for Mailers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/19</u> Date	<u>\$ 1450.28</u> Click Here for Memo Itemization Type
Expenditure #2 Name Act Blue Address 366 Summer Street, Somerville, MA 02144. <input type="checkbox"/> Fund Raiser	Purpose: <u>Distribution Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/2/19</u> Date	<u>\$ 4.65</u> Click Here for Memo Itemization Type
Expenditure #3 Name Act Blue Address 366 Summer Street, Somerville, MA 02144. <input type="checkbox"/> Fund Raiser	Purpose: <u>Distribution Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/19</u> Date	<u>\$ 6.32</u> Click Here for Memo Itemization Type
Expenditure #4 Name Eastside Fish Fry Address 2417 E Kalamazoo St, Lansing, MI 48912 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/19</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name Curtis Printing Address 2171 Lodge Rd Flint, MI 48532 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Literature</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/19</u> Date	<u>\$ 791.82</u> Click Here for Memo Itemization Type

Subtotal this page **\$200.76**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46797
2. Committee Name Yanice Jackson for Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name Postmaster General Address 3311 N Saginaw St, Flint, MI 48505 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage for Mailers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/19</u> Date	<u>\$ 1450.28</u>
Expenditure #2 Name Act Blue Address 366 Summer Street, Somerville, MA 02144. <input type="checkbox"/> Fund Raiser	Purpose: <u>Distribution Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/2/19</u> Date	<u>\$ 4.65</u>
Expenditure #3 Name Act Blue Address 366 Summer Street, Somerville, MA 02144. <input type="checkbox"/> Fund Raiser	Purpose: <u>Distribution Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/19</u> Date	<u>\$ 6.32</u>
Expenditure #4 Name Eastside Fish Fry Address 2417 E Kalamazoo St, Lansing, MI 48912 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/19</u> Date	<u>\$ 100.00</u>
Expenditure #5 Name Curtis Printing Address 2171 Lodge Rd Flint, MI 48532 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Literature</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/19</u> Date	<u>\$ 791.82</u>

Subtotal this page **2353.07**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46797
2. Committee Name Yanice Jackson for Lansing

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Michigrain Distillery Address 523 E Shiawassee St, Lansing MI 48912 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Cost of Venue</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/19</u> Date	<u>\$ 250.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name USPS Address 730 Merril St, Lansing MI 48912 <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/16/19</u> Date	<u>\$ 2.75</u> Click Here for Memo Itemization Type
Expenditure #3 Name Blue Owl Coffee Address 1149 S Washington Ave, Lansing, MI 48910 <input type="checkbox"/> Fund Raiser	Purpose: <u>Meeting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/19</u> Date	<u>\$ 7.42</u> Click Here for Memo Itemization Type
Expenditure #4 Name Quality Dairy Address 615 E Kalamazoo St, Lansing, MI 48912 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Soda</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/19</u> Date	<u>\$ 8.99</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Quality Dairy Dollar General</u> Address <u>3125 S MLK</u> <u>Lansing, MI 48910</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food and beverages</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/24/19</u> Date	<u>\$ 36.72</u> Click Here for Memo Itemization Type

Subtotal this page **\$269.16**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) ~~\$2,952.81~~

\$ 2989.53 Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing City Cou

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>9/24/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>16</u>	5. Type of Fund Raising Activity <u>Meet and Greet</u>	6. Address and Name (If any) of the place where the activity was held. <u>Covert Law</u> <u>1129 N Washington</u> <u>Lansing 48906</u> <input type="checkbox"/> Private Residence
--	---	---	---

7. Total Contributions \$ 1055.00
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) \$ 1055.00
10. Total Cost of Event \$ 36.72
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing City Cou

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>9/4/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>27</u>	5. Type of Fund Raising Activity <u>Viva La Comunidad Campaign Kickoff</u>	6. Address and Name (If any) of the place where the activity was held. <u>Gregory's Soul Food</u> <input type="checkbox"/> <u>2570 N MLK Blvd</u> Private Residence <u>48906</u>
---	---	---	--

7. Total Contributions \$700.00
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) \$700.00
10. Total Cost of Event \$140.00
(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 (1-1K), 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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing City Cou

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/3/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>21</u>	5. Type of Fund Raising Activity <u>Diversity Matters Fundraiser</u>	6. Address and Name-(If any) of the place where the activity was held. <u>Michigan</u> <u>523 E Shawwassee</u> <u>Lansing, 48912</u> <input type="checkbox"/> Private Residence
--	---	---	---

7. Total Contributions \$ ~~75.00~~ 765.00
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) \$ 765.00
10. Total Cost of Event \$ 350.00
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797
2. Committee Name Yanice Jackson for Lansing City Cou

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/10/2019</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>18</u>	5. Type of Fund Raising Activity <u>And Justice for all Fundraiser</u>	6. Address and Name (if any) of the place where the activity was held. <u>307 N Spicamore</u> <u>Lansing MI</u> <input checked="" type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions \$805.00 48933
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) \$805.00
10. Total Cost of Event \$100.00
(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 (1-1K), 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.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 46797

CANDIDATE COMMITTEE

2. Committee Name Yanice Jackson for Lansing

3. Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were purchased

7. Amount or Fair Market Value

8. Cumulative for Election Cycle (Through date in Item 5)

Contribution # 1 PAC Receipt? Yes

Name & Address:
Eastside Fish Fry and Grill
2417 E Kalamazoo Street
Lansing, MI 48912

If over \$100.00 cumulative, please provide:
Occupation:
Employer Name & Business Address:

4. Endorsement or Guarantee of Bank Loan
 Goods Donated or Loaned Services Donated
 Goods or Services Purchased by Candidate or Others
 Goods or Services Purchased by Candidate or Others- LOAN

Description Food for Fundraiser

5. Date Of Receipt: 10/3/2019

6. Vendor Name & Address:

\$ 100 \$ 387.88

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

Name & Address:

If over \$100.00 cumulative, please provide:
Occupation:
Employer Name & Address:

4. Endorsement or Guarantee of Bank Loan
 Goods Donated or Loaned Services Donated
 Goods or Services Purchased by Candidate or Others
 Goods or Services Purchased by Candidate or Others- LOAN

Description _____

5. Date Of Receipt: _____

6. Vendor Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes

Name & Address:

If over \$100.00 cumulative, please provide:
Occupation:
Employer Name & Address:

4. Endorsement or Guarantee of Bank Loan
 Goods Donated or Loaned Services Donated
 Goods or Services Purchased by Candidate or Others
 Goods or Services Purchased by Candidate or Others- LOAN

Description _____

5. Date Of Receipt: _____

6. Vendor Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Page Subtotal \$100.00

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) \$100.00

Enter this total on line 6 of Summary Page