



**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: <u>08/26/19</u> to <u>10/20/19</u>										
1. Committee I.D. Number 46506 2. Committee Name People for Julee Rodocker	4. Candidate Last Name First Name M.I. Rodocker Julee M 4a. Office Sought Including District # or Community Served (If applicable) Lansing City Council, At-Large 4b. County of Residence INGHAM									
5. Committee's Mailing Address 4909 Devonshire Ave Lansing MI 48910 Area Code and Phone <u>(517) 243-4820</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 Melissa S. Quon Huber 3340 Gingersnap Lane Lansing, MI 48911 Area Code & Phone <u>(517) 394-3996</u> <div style="text-align: center; font-size: 24px; font-weight: bold; margin: 10px 0;">RECEIVED</div> <div style="text-align: center; font-size: 18px; font-weight: bold; margin: 5px 0;">OCT 25 2019</div> <div style="text-align: center; font-weight: bold; margin: 5px 0;">INGHAM COUNTY CLERK'S OFFICE</div>									
7. Treasurer's Business Address NA Area Code and Phone _____	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) NA Area Code and Phone _____									
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>11/05/19</u>	Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	9e. Dissolution of Candidate Committee <input type="checkbox"/> 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 lates 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%; border: none;"> <tr> <td style="width: 20%; border: none;">Current Treasurer or Designated Record keeper</td> <td style="width: 40%; border: none;"><u>Melissa S. Quon Huber,</u> Type or Print Name</td> <td style="width: 20%; border: none;"><i>Melissa S. Quon Huber</i> Signature</td> <td style="width: 20%; border: none;"><u>October 25, 2019</u> Date</td> </tr> <tr> <td style="border: none;">Candidate</td> <td style="border: none;"><u>Julee M. Rodocker</u> Type or Print Name</td> <td style="border: none;"><i>Julee M. Rodocker</i> Signature</td> <td style="border: none;"><u>October 25, 2019</u> Date</td> </tr> </table>			Current Treasurer or Designated Record keeper	<u>Melissa S. Quon Huber,</u> Type or Print Name	<i>Melissa S. Quon Huber</i> Signature	<u>October 25, 2019</u> Date	Candidate	<u>Julee M. Rodocker</u> Type or Print Name	<i>Julee M. Rodocker</i> Signature	<u>October 25, 2019</u> Date
Current Treasurer or Designated Record keeper	<u>Melissa S. Quon Huber,</u> Type or Print Name	<i>Melissa S. Quon Huber</i> Signature	<u>October 25, 2019</u> Date							
Candidate	<u>Julee M. Rodocker</u> Type or Print Name	<i>Julee M. Rodocker</i> Signature	<u>October 25, 2019</u> Date							



1. Committee I.D. Number 46506

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name People for Julee Rodocker

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>9,450.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>9,450.00</u>	(18.) \$ <u>\$15,613.24</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$9,450.00</u>	(20.) \$ <u>\$15,613.24</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$9,882.69</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>\$9,882.69</u>	(23.) \$ <u>\$15,497.40</u>
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.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$8,490.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$696.69</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$9,450.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$10,146.69</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$9,882.69</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$264.00</u>	*



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 46506

2. Committee Name People For Julee Rodocker

This Schedule itemizes:				
a <input type="checkbox"/> Debts and obligations owed <u>by</u> or forgiven the committee OR b. <input checked="" type="checkbox"/> Debts and obligations owed <u>to</u> or forgiven <u>by</u> 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? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>10/11/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 50.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>50.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>10/16/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$250.00**
Grand Total of all Schedules 1E **\$8,490.00**
(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 46506
2. Committee Name People For Julee Rodocker

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.	4. Type of Obligation (Description)	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)
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.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910 \$3,560.00 \$3,560.00 9/25/2019 10/3/2019	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>08/31/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 120.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>120.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>9/25/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,560.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>3,560.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>10/3/2019</u> 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>3,560.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$7,240.00**

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 46506
2. Committee Name People For Julee Rodocker

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? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>08/27/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	\$ _____ \$ _____	<u>\$ 500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>8/29/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100.00</u>	<u>08/29/19 \$ 100.00</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	\$ _____ \$ _____	<u>\$ 100.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>8/29/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 400.00</u>	<u>08/29/19 \$ 400.00</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	\$ _____ \$ _____	<u>\$ 400.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$1,000.00**

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.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46506
2. Committee Name People for Julee Rodocker

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name WAM Address 5510 33rd Street, Grand Rapids, MI 49512 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/19</u> Date	<u>\$ 3,560.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Great Lakes List Consulting LLC, Address Ralph Fiebig, 2207 College Road, Holt, MI 48842 <input type="checkbox"/> Fund Raiser	Purpose: <u>Data</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/19</u> Date	<u>\$ 125.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name WAM Address 5510 33rd Street, Grand Rapids, MI 49512 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/19</u> Date	<u>\$ 544.13</u> Click Here for Memo Itemization Type
Expenditure #4 Name Square Address 1455 Market Street, Suite 600, San Francisco, CA 94103, USA <input type="checkbox"/> Fund Raiser	Purpose: <u>Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/19</u> Date	<u>\$ 3.20</u> Click Here for Memo Itemization Type
Expenditure #5 Name Ingham County Clerk, Address 341 S. Jefferson, PO Box 179, Mason, MI 48854 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/19</u> Date	<u>\$ 125.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$4,357.33**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$9,882.69**

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46506
2. Committee Name People for Julee Rodocker

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Done Right Signs Address 119 N Saginaw St, Pontiac, MI 48342 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/05/19</u> Date	<u>\$ \$106.00</u>
Expenditure #2 Name Sawicki and Son, Inc. Address 1521 W Lafayette Blvd, Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/06/19</u> Date	<u>\$ \$293.82</u>
Expenditure #3 Name Sawicki and Son, Inc. Address 1521 W Lafayette Blvd, Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/06/19</u> Date	<u>\$ \$37.10</u>
Expenditure #4 Name Lowes Address 6821 S Cedar St, Lansing, MI 48911 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/19</u> Date	<u>\$ \$57.11</u>
Expenditure #5 Name City of Lansing City Clerk Address Lansing City Hall, 124 W Michigan Ave, Lansing, MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: <u>Data</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/19</u> Date	<u>\$ \$35.00</u>

Subtotal this page **\$529.03**

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 46506
2. Committee Name People for Julee Rodocker

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Done Right Signs Address 119 N Saginaw St, Pontiac, MI 48342 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/19</u> Date	<u>\$ 516.75</u> Click Here for Memo Itemization Type
Expenditure #2 Name Sawicki and Son, Inc. Address 1521 W Lafayette Blvd, Detroit, MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/19</u> Date	<u>\$ 292.83</u> Click Here for Memo Itemization Type
Expenditure #3 Name <small>8/31/2019 NAACP Freedom Fund Dinner, 530 S Pine St, Lansing, MI 48933 Advertisement - \$110.00</small> 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	<u>\$ 110.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Done Right Signs Address 119 N Saginaw St, Pontiac, MI 48342 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/19</u> Date	<u>\$ 516.75</u> Click Here for Memo Itemization Type
Expenditure #5 Name WAM 5 Address 510 33rd Street, Grand Rapids, MI 49512 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/19</u> Date	<u>\$ 3,560.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$4,996.33**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46506
2. Committee Name People for Julee Rodocker

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>09/25/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>\$3,560.00</u>	\$ <u>\$7,276.26</u>
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/03/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>\$3,560.00</u>	\$ <u>\$10,836.26</u>
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/11/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>\$50.00</u>	\$ <u>\$10,886.26</u>
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/16/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>\$200.00</u>	\$ <u>\$11,086.26</u>
Click Here for Memo Itemization		

Page Subtotal **\$7,370.00**

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

\$9,450.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46506
2. Committee Name People for Julee Rodocker

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>08/27/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u>	\$ <u>500</u>	\$ <u>\$3,096.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Click Here for Memo Itemization Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/29/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u>	\$ <u>100</u>	\$ <u>\$3,196.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Click Here for Memo Itemization Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/29/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u>	\$ <u>400</u>	\$ <u>\$3,596.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Click Here for Memo Itemization Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/31/19</u> Name & Address: <u>Julee Rodocker</u> <u>4909 Devonshire Ave</u> <u>Lansing, MI 48910</u>	\$ <u>120</u>	\$ <u>\$3,716.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Electric materials buyer</u> Employer <u>Consumers Energy</u> Click Here for Memo Itemization Business Address <u>1 Energy Plaza Drive Jackson, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal **\$1,120.00**

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 46506
2. Committee Name People for Julee Rodocker

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 _____ Name & Address: <u>George Brookover, 401 Southlawn Avenue, East Lansing, MI 48823</u>	\$ <u>300</u>	\$ <u>300</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	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: <u>Marie Weese, 1831 N. Walmont Rd., Jackson, MI 49203</u>	\$ <u>10</u>	\$ <u>10</u>
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	Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: <u>Kim Wilson, 759 Beverly Park Place, Jackson, MI 49203</u>	\$ <u>50</u>	\$ <u>150</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	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: <u>Kyle Bowman, 1357 Turner St., Lansing MI, 48906</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer <u>State of Michigan</u> Business Address <u>7119 N. Canal Rd., Lansing, MI 48913</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	

Page Subtotal **\$460.00**

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

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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46506
2. Committee Name People for Julee Rodocker

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>09/06/19</u> Name & Address: <u>Larry Rodocker, 121 Olympia Drive, Lansing, MI 48911</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	\$ <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>09/13/19</u> Name & Address: <u>Gary Gogarn, 4406 Devonshire, Lansing, MI 48910</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/20/19</u> Name & Address: <u>Sarah Yanez, 4916 Devonshire Ave, Lansing, MI 48910</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Massage Therapist</u> Employer <u>Meridian Massage</u> Business Address <u>5093 Brookfield Dr, East Lansing, MI 48823</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
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/20/19</u> Name & Address: <u>Lori Headley, 3791 E. Haslett, Rd, Perry, MI 48872</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	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization

Page Subtotal **\$275.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46506
2. Committee Name People for Julee Rodocker

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>09/06/19</u> Name & Address: <u>Mary Kast, 635 W Front St Grand Ledge, Mi 48837</u> 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>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/06/19</u> Name & Address: <u>Gladys Thomas, 2388 Burcham Dr, East Lansing, MI 48823</u> 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>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/06/19</u> Name & Address: <u>Marilyn Pell, 4175 Hancock St, Holt, MI 48842</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/06/19</u> Name & Address: <u>Nancy Whyte, 506 Venderveen Dr, Mason, MI 48854</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	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization

Page Subtotal **\$225.00**

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

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