## CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

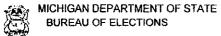
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	l signed by andidate.	3. This Statement covers From	· 07/27/2019 to 08	3/26/2019	
1, Committee I.D. Number		4. Candidate Last Name	First Name	M.I.	
46797		Jackson-Long	Yanice	Y	
	•	4a. Office Sought Including Dis	trict # or Community Served (I	f applicable)	
2. Committee Name					
Yanice Jackson for Lan	sing	4b. County of Residence ING	HAM		
5. Committee's Mailing Address	6. Treasurer's Name & Reside	ntial Address			
P.O. Box 27334, Lansing MI 48909		1407 Elmwood Lansing, MI 48917  RECEIVED		IVED	
Area Code and Phone 517-258-8310	*		<b>SEP</b> 26	<sup>3</sup> 2019	
If the address in this box is different from the comm mailing address on the Statement of Organization, be sent to this address by the filing official.	ittee mail may	Area Code & Phone	INGHAM COUNTY C	LERK'S OFFICE	
7. Treasurer's Business Address lan Sanwald 1407 Elmwood Lansing, MI 48917		8. Designated Record Keeper' Designated Record Keeper)	's Name and Address (If the co	ommittee has a	
Area Code and Phone 269-924-8183		Area Code and Phone	9e. Dissolution of Candida	to Committee	
9. TYPE OF STATEMENT	Required Of	NLY if candidate			
9a. Pre-Election OR 9b. Post-Election	is not on the current year	ballot for the	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is her		
Pre-Election or Post-Election Statement relates to:	Jan. o. A. your	•	by discharged and forgiven, a	and no longer collectible from	
  X Primary	July Quar	terly	owes no lates fees or has any		
General	October C	Quarterly	Further, if the dissolution can	not he arrested that this he	
Convention			considered a request for the l	Reporting Waiver.	
	9c. — ] .				
Special	Annu	al Statement () Coverage Year	Effective date of di	ssolution	
School	Amer	ndment to Campaign Statement			
Caucus	Com	plete Item 9a, 9b, 9c or 9e to ate which Statement is being	Note: The disposition of residual Schedule 1B and the Summa	dual funds must be reported on ary Page.	
Date of Election, Convention or Caucus		F2019-0572 9/26/19 7:53 AM Pag	 ge 1 of 1		
08/06/2019		CAMP \$0.00 Barb Byrum, Ingham			
10. Verification: I\We certify that all reasonable dilig my\our knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statem omplete.	ent and attached schedules (if	any) and to the best of	
Current Treasurer or Designated Record keeper		, and to	Date	09/26/2019	
Type or Print Name		Signature	/)		
Candidate Yanice Jackson-Long		, yourul you	KNON-SONGBate	09/26/2019	
Type or Print Name	9	V Signature V	/		

1. Committee I.D. Number 46798

#### **SUMMARY PAGE CANDIDATE COMMITTEE**

2. Committee Name Yanice Jackson for Lansing City Council

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 1250	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 1250	(18.) \$ 9541.45
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 287.88	(21.) \$ 287.88
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 1361.61	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 1361.61	(23.) \$ <b>8754.46</b>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)  11, TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	(44.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ <u>842.15</u>	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ 1,250.00	
(Line 5, Total Contributions & Other Receipts) 15, SUBTOTAL Add lines 13 and 14	(15.) = \$ 2092.15	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ 1361.61	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 730.54	•
,	, ,	



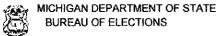
## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797

2. Committee Name Yanice Jackson for Lansing City Cc

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 Name & Address: IBEW Local 665	PAC Receipt?	YES 4. Date	of Receip	ot <u>07/30/2019</u>		
5205 S Pennsylvania	Δνο					
Lansing, MI 48911	-\vC,				050	250
Latising, wil 40311					<sub>\$</sub> 250	<sub>\$</sub> 250
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here t	for Memo Itemization
Occupation		_ Employer		·		
Business Address						
Type of Contribution:	Direct	Loan from a person	, <u> </u>	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date	of Receip	ot 07/22/2019		
Name & Address	•					
Schertzing Nancy					400	400
236 Kedzie St East Lansing, MI 4882	93				<sub>\$</sub> 100	<sub>s</sub> 100
Last Landing, Ini 4002						** * <u></u>
5. If over \$100.00 cumu					Click Here f	or Memo Itemization
Occupation Consulta	nt	Employer_Self				
Business Address		,_,_,_,				
Type of Contribution:	/ Direct [	Loan from a person		Fund Raiser		
3. Contribution # 3	PAC Receipt?	YES 4. Date	of Recei	pt 07/24/2019		
Name & Address:						
Hughes Carmen 17686 Veronica Ave					<sub>s</sub> 50	, 50
Eastpointe MI 48021					\$	_ \$
					Click Horo f	or Memo Itemization
5. If over \$100.00 cumu		vide:			Click Here II	or Michio Remization
Occupation Unemplo	yed	Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	)	Fund Raiser		
3. Contribution # 4	PAC Receipt?	YES 4. Date	e of Rece	eipt 07/28/2019		
Name & Address		,				
Zeineh Edwar 2800 E Grand River S	uito D					
Lansing	uite D				<sub>\$</sub> 100	<sub>s</sub> 100
5. If over \$100.00 cum	ılative, please pro	vide:			Oliela I I een f	
Occupation Attorney	1	Employer Self			Click mere ii	or Memo Itemization
				<del> </del>		
Business Address	<del></del>	<u> </u>		Fund Raiser		
Type of Contribution:	Direct	Loan from a person	n L			
			•	Page Subtotal	\$500.00	
				and Total of All Schedules 1A		
			(Comp	lete on last page of Schedule)	Enter this total on	
1 3					line 3a of Summa	ry
Pageof					Page.	



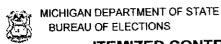
## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### CANDIDATE COMMITTEE

1. Committee I.D. Number 46797

2. Committee Name Yanice Jackson for Lansing City Cc

	box to indicate if cont	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 Name & Address: Carter Johnson Frar 302 Ferndale Place	PAC Receipt?	YES 4. Date of	of Receip	ot 07/30/2019		
Oxen Hill, MD 20745	5				<sub>\$</sub> 250	<sub>\$</sub> 250
5. If over \$100.00 cu	nulative, please pro	vide:			OBJE 24	
Occupation Resear	ch Analyst	Employer Nationa	l Instit	ute of Health	Click Here fo	or Memo Itemization
		e Ave SW, Washir	ngton,	DC 20201		
Type of Contribution:	<b>√</b> Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date o	f Receip	t 07/22/2019		
Hankerson, Shenika 10159 Marshall Pon Burke VA					ş <u>50</u>	<sub>\$</sub> 50
Eact Lancing ML 48 5. If over \$100.00 cur	e೧२ nulative, please pro				Click Here fo	or Memo Itemization
Occupation Profess	sor	Employer University	ot Ma	aryland		
Business Address				<del> </del>		
Typė of Contribution:	<b>✓</b> Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address: Corbin, Sally	PAC Receipt?	YES 4. Date	of Recei	pt 07/24/2019		
102 E Main Street, Harbor Springs, Mic	higan				<sub>\$</sub> 200	<sub>\$</sub> 200
o.oo. opinga, mio					Click Horo fo	r Memo Itemization
5. If over \$100.00 cu	nulative, please pro			- 4	Chick mere 10	WEND REPIZATION
Occupation Owner	0 D 18 "	Employer Union So				
Business Address 11  Type of Contribution:		, Suite 1A Lansing M	11 4891			
		Loan from a person	of Poss	Fund Raiser	N	·
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	or Rece	ipt 07/28/2019		
Amedeo, William 2800 E Grand River	Suite B				4 === =	
Lansing					<sub>\$</sub> 150	<sub>\$</sub> _300
5. If over \$100.00 cu	mulative, please pro	ovide:			Olinia Have fo	ar Blome Heminetian
Occupation Attorn	еу	Employer Ann A	rbor L	.egal	Click Here to	or Memo Itemization
21		ve, Ann Srbor MI				
Type of Contribution		Loan from a person		Fund Raiser		
				Page Subtotal	\$650.00	
				and Total of All Schedules 1A lete on last page of Schedule)		
2 of 3	_		, •	, ,	Enter this total on line 3a of Summar Page.	у



### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 46797

Yanice Jackson for Lansing City Cc

07111				tome first name 6	. Amount	7. Cumulative for
nter contributor's name and niddle initial. Check box to Committee (PAC) Report all	indicate if contrib	ntribution is from an Individu oution is from a Political Con gardless of amount.	ial, enter iasi mmittee or ai	name, first name, n Independent	Anoun	Election Cycle for Each Contributor (Through date of receipt)
O at the diam # 1	PAC Receipt?	YES 4. Date of Re	eceipt 08/0	06/2019		
3. Contribution # 1	-AC Receipt:			70,2010		
onham Jeruelia						
ne Locust Lane				•	100	. 100
ansing				4	100	\$
van Hill MD 2074도 I <b>f over \$100.00 c</b> umulati	ve, please prov	ide:			Click Here	for Memo Itemization
ccupation Retired		Employer				
usiness Address			<del></del>	<del></del>		
	Direct	Loan from a person	<b>√</b> Fund	Raiser		
Contribution #2	PAC Receipt?	YES 4. Date of Re	eceipt			
ame & Address	_					
lankerson, Shenika						
0159 Marshall Pond Ro	ad			:	\$	<u> </u>
Burke VA						
aet Laneina MI ARROS					Click Here	for Memo Itemization
. If over \$100.00 cumulat	ive, picase prov	/108:				
Occupation		Employer				
	<del></del>					
Business Address			Fur	nd Raiser		
Type of Contribution:	Direct	Loan from a person				
3. Contribution #3	PAC Receipt?	YES 4. Date of	Receipt			
Name & Address:		•				
Corbin, Sally					\$	\$
102 E Main Street,	an .					
Harbor Springs, Michiga	211				Click Here	for Memo Itemization
	niese niese nro	ovide:				
5. If over \$100.00 cumul	auve, piedso pri					
Occupation		Employer				
Business Address			<del></del>			
Type of Contribution:	Direct	Loan from a person		und Raiser		
	PAC Receipt?	YES 4. Date	of Receipt			
3. Contribution # 4 Name & Address	PAC ((Coc.p.)					
Amedeo, William						
2800 E Grand River St	uite B				\$	
Lansing						
_					Click Her	e for Memo Itemization
5. If over \$100.00 cumu	ılative, please p	rovide:			Olloit 1141	-
i		Employer				
Occupation						
Business Address				- 4 Deigot		
		Loan from a person	F	und Raiser	10400.00	
Type of Contribution:	LJDirect			Page Subtota	\$100.00	
			A	Total of All Schedules 1A	\$1,250	
			(Complete	on last page of Schedule	Fnter this total	al on
			(Oompion		line 3a of Su Page.	mmary



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

#### 46797

1. Committee I. D. Number

2. Committee Name	Yanice Jackson	for Lansing	City Counci

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Amazon.com		08/23/1!	s 26.38
Address	Purpose: Ink for Printer	Date	
410 Terry Ave. N,		Hom for Mom - 4	tomization Tuna
Seattle, WA 98109	Cilck	Here for Memo I	ternization Type
Fund Raiser	Check box if this expenditure is payment or debt or obligation reported on previous statement	<b>f</b>	
Expenditure #2			
Name The Chronicle News		08/22/19	s 500
	Purpose: Advertising Package	Date	*
Address 2836 E Grand River Ave	Purpose:		
East Lansing, MI 48823	Click	Here for Memo II	temization Type
	Check box if this expenditure is payment or	f	
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement	<del></del>	
·		00/06/4/	
Name Biggby Coffee	0.55 145	08/26/19	\$ <u>1.90</u>
Address	Purpose: Coffee Meeting	Date	<u></u>
500 E Michigan Ave, Lansing, MI 48912	Click	Here for Memo II	emization Type
<b>~</b>	Check box if this expenditure is payment o		,,
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name The City of Lansing		08/26/41	
THE City of Latishing		08/26/1!	s 10.00
Address	Purpose: Reports	Date	<del></del>
126 W Michigan Ave Lansing, MI	OE-L	Horn for Mana I	tomization Time
Carrotteg, 191		Here for Memo II	стикацон туре
	Check box if this expenditure is payment o debt or obligation reported on previous	f	
Fund Raiser	statement		
Expenditure #5			
Name Keystone Millbrook		7/26/19	. 450.00
Address	Purpose: Mailers/Postage	Date	\$ <u>458.90</u>
3540 Jefferson Hwy,	k 1 1	. Horo for Marra	tomination Trees
Grand Ledge, MI 48837	Click Check box if this expenditure is payment of	: Here for Memo I If	ениганоп туре
□ s p.;	debt or obligation reported on previous	•	
Fund Raiser	statement		0007.40
	Sub	total this page	\$997.18
	Grand Total of a (Complete on last pa	1	
	(Complete on last pa	ac or acreatie) [	Enter this total

Enter this total on line 8a of Summary Page

1 3 Page \_\_\_\_\_ of \_\_\_\_



## SCHEDULE 1B CANDIDATE COMMITTEE

46797

1. Committee I. D. Number

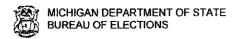
2. Committee Name

Yanice Jackson for Lansing City Council

		1 5 5-4-	C Amount
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Facebook.com	A. J	08/01/1!	\$ <u>24.22</u>
Address	Purpose: Advertising	Date	
1601 Willow Rd. Menlo Park, CA 94025	Clic	ck Here for Memo I	temization Type
Wello Faik, CA 54020			•
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #2			
Name Strange Matter		08/01/19	s 8.29
Address	Purpose: Coffee Meeting	Date	
Washington Square		-t.	tamination Torre
Lansing, MI 48912	Chi	ck Here for Memo I	енизацоп туре
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #3	Statement		
	1	00/00/4/	
Name Dan's Coney Island		08/02/1!	<b>\$6.36</b>
Address	Purpose: Coffee Meeting	Date	
5600 S Pennsylvania Ave Lansing, MI 48911	Clie	ck Here for Memo	temization Type
Lansing, Mi 40011			
<b></b>	Check box if this expenditure is payment debt or obligation reported on previous	· Ui	
Fund Raiser	statement		
Expenditure #4			
Name Keystone Millbrook		08/06/19	s 204.19
Address	Burnass Mailers	Date	
Address 3540 Jefferson Hwy,	Purpose:		
Grand Ledge, MI 48837	Cli	ck Here for Memo	temization Type
	Check box if this expenditure is payment	of	
Fund Raiser	debt or obligation reported on previous statement		
	Statement		
Expenditure #5			
Name Act Blue		08/08/19	\$23.44
Address	Purpose: Disbursement Fee	Date	
366 Summer Street, Somerville, MA 02144.	C	ick Here for Memo	Itemization Type
OUTER VIRIC, INICA OZ 1777.	Check box if this expenditure is paymen		,,
	debt or obligation reported on previous		
Fund Raiser	statement	ubtotal this page	\$266 E0
	5	ontotal tills hade	\$266.50
	Grand Total of (Complete on last)	fall Schedules 1B	
	(Complete of fast)		

Enter this total on line 8a of Summary Page

2 of 3



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

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

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Dollar Tree		08/06/1!	s 8.24
Address	Purpose: Advertising	Date	
4210 S Cedar St			is a continue of a continue of
Lansing Mi	Cilck	Here for Memo	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Meijer		08/20/19	\$ 39.69
•	Purpose: Labels	Date	\$ 00.00
Address 5125 W Saginaw Hwy	Purpose:		
Lansing Mi	Click	Here for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Trina Austin Morrison		07/23/19	50.00
	Campaign Work	Date	\$ <u>50.00</u>
Address 5600 S Pennsylvania Ave	Purpose: Campaign Work	Date	
Lansing, MI 48911	Click	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			
		Date	\$
Address	Purpose:	Date	
	Clink	Horo for Margo	temization Type
			ternization Type
<u> </u>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click  Check box if this expenditure is payment of		Itemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subt	otal this page	\$97.93
	Grand Total of all (Complete on last page		\$1,361.6°

Enter this total on line 8a of Summary Page