CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

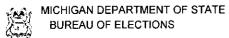
Report must be legible, typed or printed in ink and s the treasurer (or designated record keeper) and cal	signed by ndidate.	3. This Statement covers From	[:] 07/22/19 _{to}	08/26/19		
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.		
46506		Rodocker	Julee	М		
		4a. Office Sought Including District # or Community Served (If applicable)				
2. Committee Name		Lansing City Council,	At-Large			
People for Julee Rodock	er	4b. County of Residence ING	НАМ			
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address			
4909 Devonshire Ave		Melissa S. Quon Hul	per			
Lansing MI 48910		3340 Gingersnap Lane				
		Lansing, MI 48911				
Area Code and Phone (517) 243-4820						
If the address in this box is different from the commit						
mailing address on the Statement of Organization, mobe sent to this address by the filing official.	all may	Area Code & Phone (517) 39	4-3996			
7. Treasurer's Business Address		8. Designated Record keeper's	s Name and Mailing Addres	s (If the committee has a		
NA		Designated Record keeper) NA		· 🗅		
		'*'	RECEIVE	: レ		
			SEP 13 2019			
			INGHAM COUNTY CLERK'S	OFFICE		
Area Code and Phone		Area Code and Phone	9e. Dissolution of Candi			
9. TYPE OF STATEMENT	Required ON	NLY if candidate				
9a. Pre-Election OR 9b. Post-Election	is not on the current year:	by the committee to the candidate or his or her spous by discharged and forgiven, and no longer collectible the committee. The committee has no oustanding as				
Pre-Election or Post-Election Statement relates to:				i, and no longer collectible from ittee has no oustanding assets,		
⊠ Primary	July Quart	erly	owes no lates fees or has a	iny oustanding debt.		
General	October C	Quarterly	Further, if the dissolution or	annot be granted, that this be		
Convention			considered a request for the	e Reporting Waiver.		
Special	9c	al Statement ()				
School		Coverage Year	Effective date of	dissolution		
Caucus		dment to Campaign Statement		<u> </u>		
		plete Item 9a, 9b, 9c or 9e to te which Statement is being		sidual funds must be reported on		
	amen	ded.)	Schedule 1B and the Sumi	mary Page.		
Date of Election, Convention or Caucus		F2019-0566	1			
08/06/19		9/13/19 8:21 AM Page 1 CAMP \$0.00 Barb Byrum, Ingham Cour				
				°her'⊅la Mikuk. ■1111		
			1			
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a		omi''		(ii any) and to the best of		
Current Treasurer or Melissa S. Que	on Hubei	Melissa & G) wn duber	September 12, 2019		
Designated Record keeper Type or Print Name		/ / / / / Signature	Date			
-		1.1.45	1300			
Candidate Julee M. Rodocker		1 Juliant	Date	September 12, 2019		
Type or Print Name		Signature				

1. Committee I.D. Number 46506

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name People for Julee Rodocker

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 649.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$649.00	(18.) \$ _\$6,163.24
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$649.00	(20.) \$ \$6,163.24
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _\$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$751.03	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _\$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$751.03	(23.) \$ \$5,614.71
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _\$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _\$750.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	### STATEMENT ### (13.) \$ \$798.72 ### (14.) + \$ \$649.00 ### (15.) = \$ \$1,447.72 ### (16.) - \$ \$751.03 ### (17.) \$ \$696.69	*

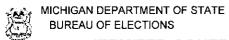


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

Committee LD	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 all contributions regardless of amount.					6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 Name & Address:	PAC Receipt?	YE:	S 4. Date of Re	eceipt	07/31/19		
Judith Niles, 15	981 Pretty La	ke. Di	r., Mecosta, M	1 49:	332, Retired		
,	,	,			·	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cur	nulative, please pro	vide:				Click Here fo	or Memo Itemization
Occupation Retired		_ Emp	loyer				
Business Address				_			
Type of Contribution:	√ Direct	Loa	n from a person		Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Re	ceipt -	08/15/19		
Judith A Rodoo	ker, 3197 Pro	mena	de Drive, Kala	amaz	zoo, MI 49009	_{\$} 75.00	_{\$} 75.00
5. If over \$100.00 cur	nulative, please pro	vide:				Click Here fo	or Memo Itemization
Occupation		_ Emplo	yer	· ·			
Business Address			ule-				
Type of Contribution:	✓ Direct	Loa	n from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YE	S 4. Date of R	eceipt	08/15/16		
Steve Dougan,	2455 Pine Tr	ee Ro	I, Holt, MI 488	42		_{\$} 99.00	_{\$} _99.00
1						Click Here fo	r Memo Itemization
5. If over \$100.00 cui	nulative, please pro	vide:					
Occupation		_ Emp	loyer				
Business Address Type of Contribution:	Direct	l oa	an from a person	П	Fund Raiser		
3. Contribution # 4	PAC Receipt?			Recein	t 08/19/19		
Name & Address		Ш.	1. 54.6 0.7	1000.p	00/10/10		
Gina Gardner,	908 Kendon, I	Drive,	Lansing MI 48	8910)	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cu	mulative, please pro	ovide:				Click Here fo	r Memo Itemization
Occupation		E	mployer				
Business Address							
Type of Contribution	Direct	Lo	an from a person		Fund Raiser		
					Page Subtotal	\$209.00	
			(C		d Total of All Schedules 1A te on last page of Schedule)	Enter this total on	<u> </u>
Page	_					line 3a of Summar Page.	y



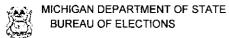
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

Committee LD	Number	4650

06

	-		
2. Committee Name	People for J	ulee Rodocke	er

Enter contributor's name and address. If a middle initial. Check box to indicate if con Committee (PAC) Report all contributions	tribution is from a Political Com		6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Rec	eipt 08/19/19		
Anne Ordiway, 1500 Pierce I	Rd, Lansing MI 48910	0, Retired		
.,,	, <u> </u>		_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please pro	ovide:		Clink Horn f	or Memo Itemization
Occupation	Employer		Click Here i	or wemo itemization
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Rec	eipt 08/19/19		
Kirk Hewitt, 5026 Delbrook A	ve, Lansing, MI 4891	10	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please pro	ovide:		Click Here fo	or Memo Itemization
Occupation	_ Employer	······································		
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Re	ceipt 08/19/19		
Kim Wilson, 759 Beverly Par	k Place, Jackson, Ml	1 49203	_{\$} 100.00	_{\$} 100.00
			Click Here fo	or Memo Itemization
5. If over \$100.00 cumulative, please pro	ovide:			
Occupation Retired	_ Employer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Re	9ceipt 08/23/19		
Mary Kay Bancroft, 4908 De	vonshire Ave, Lansin	ig MI 49910	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please pr	ovide:		Click Hore fo	or Momo Itomization
Occupation Payroll & Benefits Specia	Employer The Christ	tman Company	Click Here to	or Memo Itemization
Business Address 208 N Capitol Av	re 48933			
Type of Contribution:	Loan from a person	Fund Raiser	<u>-</u>	
		Page Subtotal	\$245.00	
		Grand Total of All Schedules 1A mplete on last page of Schedule)	Enter this total on	
Page 2 of 3			line 3a of Summar Page.	у



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 all contributions regardless of amount.						6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt?	YES	4. Date of Re	ceipt	08/23/19		
Name & Address: Edward J Hayes	2715 Tamm	anv Ave	Lansing M	11 49	9810: Range		
•		-	-		Cedar St., Mason,	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cum	ulative, please pro	vide:				Oliali Hana &	
Occupation		_ Employer				Click Here to	or Memo Itemization
Business Address							
Type of Contribution:	√ Direct	Loan fro	m a person		Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Re	ceipt	08/23/19		
Suzy Khoury, 2203 H Michigan Attorney Ge W. Ottawa Street, P.C Christian College, 62	neral, Consumer I D. Box 30212, Lan	Protection D sing, MI 489	ivision, G. Men 09; Adjunct Pro	nen \	Williams Building, 525	_{\$} 75.00	_{\$} 75.00
5. If over \$100.00 cum	ulative, please pro					Click Here fo	or Memo Itemization
Occupation See above	ve	_Employer_	See above				
Business Address Sec							
Type of Contribution:	✓ Direct	Loan from	n a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of Re	eceipt	^t 08/23/19		
Karen Salinas, 550 Jessup Ave, Lansing, MI 48910						_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cum	ulative, please pro	vide:				Click Here fo	r Memo Itemization
Occupation		Employer					
Business Address							
Type of Contribution:	√ Direct	Loan fro	m a person		Fund Raiser		
3. Contribution # 4	PAC Receipt?	YES	4. Date of R	Receip	ot		
Name & Address							
						•	
						\$	\$
5. If over \$100.00 cumulative, please provide:						Click Here fo	r Memo Itemization
Occupation		_ Emplo	yer				
Business Address							
Type of Contribution:	Direct	Loan fro	m a person		Fund Raiser		
					Page Subtotal	\$195.00	
					nd Total of All Schedules 1A	\$649.00	-
(Complete on last page of Schedule)					Enter this total on line 3a of Summary Page.	<u>,</u>	



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

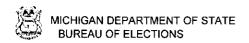
46506 1. Committee I. D. Number

2. Committee Name	People	for Julee	Rodockei
-------------------	--------	-----------	----------

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
^{Name} Square		07/31/19	\$ 1.03
Address	Purpose: Fee	Date	<u></u>
1455 Market Street, Suite 600, San Francisco, CA			Managia and an III.
94103, USA	Cilck	mere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Julee Rodocker		08/09/19	750.00
	Daymant of annualist dakt	———— Date	\$ 750.00
Address	Purpose: Payment of campaign debt	- 4.0	
	Click	Here for Memo	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		•
Expenditure #3	Statement		
Name			
Teamo			\$
Address	Purpose:	Date	
	01:44		As asia aktion Tooloo
			temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			!
Name			
		Date	\$
Address	Purpose:		
	Click I	Here for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
			\$
Address	Purpose:	Date	
	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		,
La raison	statement	otal this see-	A75 4.05
	Subto	otal this page	\$751.03
	Grand Total of all		\$751.03

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

46506

CANDIDATE	COMMITTEE
CANDIDAIL	COMMINITIES

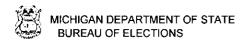
People For Julee Rodocker

CANDIDATE COMMITTEE 2. C	Committee Name			
This Schedule itemizes:				
Debts and obligations owed by or forgiven the com (Che	nmittee OR b. 🚺 Debt	ts and obligations owed <u>to</u> ourpose checked.)	or forgiven <u>by</u> the con	nmittee.
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 endorsers 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	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Retirement of Debt	08/09/19 _{\$} 350.00		
Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	5. <u>Date Debt Was Incurred</u> : 05/04/19 6. <u>Original Amount of Debt</u> : \$ 350.00	\$ \$ \$ \$	\$ 350.00	\$_0.00
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Retirement of Debt	08/09/19 \$ 40.00		
Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	5. <u>Date Debt Was Incurred</u> : 5/22/2019 6. <u>Original Amount of Debt</u> : \$ 40.00	\$ \$ \$ \$	\$ 40.00	\$_0.00 FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave	4. Type: Retirement of Debt 5. Date Debt Was Incurred: 6/22/2019	08/09/19 \$ 350.00 \$	0.50.00	. 0.00
Lansing MI 48910	6. Original Amount of Debt:	\$\$	\$ 350.00 mount Endorsed: \$_	\$_0.00 FORGIVEN
<u> </u>				<u>Ф7</u> ЕО ОО
		Page Subtota	I (Outstanding debt)	\$750.00
(0	Complete on last page of Schedule	Grand Tota showing amounts owed by	l of all Schedules 1E or to the committee)	-
				Enter this total on line 12a "owed by"" or line 12b

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.

"owed to" of the Summary Page

Page 1 of 2



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

SCHEDULE 1E	Doonlo Ed	vr. Julaa Dadaaka	_	
CANDIDATE COMMITTEE 2. C	committee Name People FC	r Julee Rodocke	<u> </u>	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o rpose checked.)	r forgiven <u>by</u> the cor	nmittee.
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 endorsers 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? Yes Owed to or by:	4. Type: Payment o Debt	08/09/19 \$ 10.00		
Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	5. <u>Date Debt Was Incurred</u> : 04/20/19 6. <u>Original Amount of Debt</u> : \$ 37.05	\$ \$ \$ \$	\$ <u>10.00</u>	\$ _27.05
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:5. Date Debt Was Incurred:	s		
	6. Original Amount of Debt:	\$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:			nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) 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.				\$10.00
				4.00.00
				Enter this total on line 12a "owe by"" or line 12b "owed to" of the Summary Page

Page 2 of 2