

F2019-0735 10/25/19 4:52 PM Page 1 of 1 CAMP \$0.00 Barb Byrum, Ingham County Clerk

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

00121111102			
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	08/26/19 to 1	10/20/19
1. Committee I.D. Number	4. Candidate Last Name	First Name	M.I.
46506	Rodocker	Julee	М
2. Committee Name	4a. Office Sought Including Dis		(If applicable)
People for Julee Rodocker	4b. County of Residence ING	HAM	
5. Committee's Mailing Address	6. Treasurer's Name & Reside	ntial Address	-
4909 Devonshire Ave	Melissa S. Quon Hul	ber 📮 🗀	CEIVED
Lansing MI 48910	3340 Gingersnap La	ne	
	Lansing, MI 48911	00	CT 25 2019
Area Code and Phone (517) 243-4820		INGHAM CO	OUNTY CLERK'S OFFICE
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may	(517) 20		JOHN TOLLING OF THOS
be sent to this address by the filing official.	Area Code & Phone (517) 39 8. Designated Record keeper		/If the committee has a
7. Treasurer's Business Address	Designated Record keeper)	s warne and warring Address	(ii the committee has a
NA	NA (
1			
Area Code and Phone	Area Code and Phone		
9. TYPE OF STATEMENT		9e. Dissolution of Candid	ate Committee
	NLY if candidate ballot for the	by the committee to the can-	We certify any outstanding debt didate or his or her spouse is here
Pre-Election or Post-Election Statement relates to:		by discharged and forgiven, the committee. The commit	and no longer collectible from tee has no oustanding assets,
☐ Primary ☐ July Quart	erly	owes no lates fees or has an	y oustanding debt.
⊠General □ October G	tuarterly	Further, if the dissolution car	nnot be granted, that this be
Convention		considered a request for the	Reporting Waiver.
Special 9c. Annua	ol Statement ()		
School	Coverage Year	Effective date of d	lissolution
	dment to Campaign Statement		
i (Com)	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of resi	idual funds must be reported on
amend	ded.)	Schedule 1B and the Summ	lary Page.
Date of Election, Convention or Caucus			
11/05/19			
10. Verification: I\We certify that all reasonable diligence was used		l ent and attached schedules (i	if any) and to the best of
my\our knowledge and belief the contents are true, accurate and co	•	Vina di la	
Current Treasurer or Designated Record keeper Melissa S. Quon Huber	· Melissa S. G	lion alliher Date	October 25, 2019
Type or Print Name	Signature		
Candidate Julee M. Rodocker	, Julitt. Hel	` Date	October 25, 2019
Type or Print Name	Signature		

1. Committee I.D. Number 46506

SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name People for Julee Rodocker

	Oct.
Column 1 This Period	Column II Cumulative this election cycle
(3a.) \$ 9,450.00	
(3b.) \$NOT APPLICABLE	
(σο.) ψ	(18.) \$ \$15,613.24
(4.) \$ _\$0.00	(19.) \$ \$0.00
(5.) \$ \$9,450.00	(20.) \$ _\$15,613.24
(6.) 4	(21.) \$ \$0.00
(7.) \$ \$0.00	(22.) \$ \$0.00
	,
(8a.) \$ <u>\$9,882.69</u>	
(8b.) \$ _\$0.00	
(8c.) \$ \$0.00	
(9.) \$ \$9,882.69	(23.) \$ \$15,497.40
(10a.)\$ \$0.00	
(10b.)\$ \$0.00	
(11.) \$ \$0.00	(24.) \$ \$0.00
(12a.) \$_\$8,490.00	
(12b.)\$ \$0.00	
### STATEMENT ### (13.) \$ \$696.69 ### (14.) + \$ \$9,450.00 ### (15.) = \$ \$10,146.69 ### (16.) - \$ \$9,882.69	-
	(3a.) \$ 9,450.00 (3b.) \$ NOT APPLICABLE (3c.) \$ \$9,450.00 (4.) \$ \$0.00 (5.) \$ \$9,450.00 (6.) \$ \$0.00 (7.) \$ \$0.00 (8a.) \$ \$9,882.69 (8b.) \$ \$0.00 (8c.) \$ \$0.00 (9.) \$ \$9,882.69 (10a.) \$ \$0.00 (10b.) \$ \$0.00 (12a.) \$ \$0.00 (12b.) \$ \$0.00 BALANCE STATEMENT (13.) \$ \$696.69 (14.) + \$ \$9,450.00 (15.) = \$ \$10,146.69



DEBTS AND OBLIGATIONS SCHEDIII E 1E

1. Committee I.D. Number

46506

SCHEDOLL IL	People Fo	r Julee Rodocke	r	
CANDIDATE COMMITTEE 2. C	Committee Name Teople Te	T dalce Redecite		
This Schedule itemizes:	.			
a Debts and obligations owed by or forgiven the com (Che	nmittee OR b. 🚺 Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven by 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	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount	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)
provide information regarding the endorsers or guarantors, if any.	of debt		-	
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan to Committee	\$		
Julee Rodocker	5. Date Debt Was Incurred:	\$		
4909 Devonshire Ave	10/11/19	\$		50.00
Lansing MI 48910	6. Original Amount of Debt:	\$	\$	\$_50.00
	\$_50.00	\$]	FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan to Committee	\$\$		
Julee Rodocker	5. Date Debt Was Incurred:	\$		
4909 Devonshire Ave	10/16/2019	¢		200.00
Lansing MI 48910	6. Original Amount of Debt:		\$	\$_200.00
	\$ 200.00			FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		<u> </u>		
	6. Original Amount of Debt:	\$	\$	\$
	\$			FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$250.00
(C	complete on last page of Schedule s	Grand Total showing amounts owed by c	of all Schedules 1E or to the committee)	\$8,490.00
				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

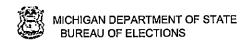


DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

CANDIDATE COMMITTEE 2. C.	ommittee Name People Fo	r Julee Rodocke	<u> </u>	
This Schedule itemizes:	-			
a Debts and obligations owed by or forgiven the come (Chec	nittee OR b. Debts k either a or b. Use only for the pu	and obligations owed <u>to</u> orpose checked.)	r forgiven <u>by</u> the con	mittee.
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: Jules Rodocker 4909 Devonshire Ave Lensing Mt 49910	4. Type: Loan to Committee 5. Date Debt Was Incurred: 08/31/19	\$ \$		
\$3,560.00 \$3,560.00 9/25/2019 10/3/2019	6. Original Amount of Debt:	\$ \$	\$	\$ 120.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	<u>.</u>
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan to Committee	\$		•
Julee Rodocker 4909 Devonshire Ave	5. <u>Date Debt Was Incurred</u> : 9/25/2019	\$!
Lansing MI 48910	6. Original Amount of Debt:	<u> </u>	\$	\$ 3,560.00
	\$_3,560.00	<u>\$</u> \$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Loan to Committee	\$		
Julee Rodocker	5. Date Debt Was Incurred:	\$		
4909 Devonshire Ave Lansing MI 48910	10/3/2019 6. Original Amount of Debt:	\$		_{\$} 3,560.00
Landing Will 100 to	\$	\$	· \$	FORGIVEN
	*	<u> </u>		TONOIVEIN
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$7,240.00
(Ca	omplete on last page of Schedule s	Grand Total howing amounts owed by o	of all Schedules 1E or to the committee)	
A debt or obligation must be shown on this Schedu			losing date of	on line 12a "owed by"" or line 12b "owed to" of the

Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 40000

46506

CANDIDATE COMMITTEE 2.C	ommittee Name People FC	Tulee Rodocke		
This Schedule Itemizes:	_	<u> </u>		
a Debts and obligations owed by or forgiven the com-	mittee 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	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: Loan to Committee	\$		
Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	5. <u>Date Debt Was Incurred</u> : 08/27/19 6. <u>Original Amount of Debt</u> : \$_500.00	\$ \$ \$ \$	\$	\$500.00
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan to Committee	08/29/19 \$ 100.00		
Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	5. Date Debt Was Incurred: 8/29/2019 6. Original Amount of Debt: \$100.00	\$ \$ \$	\$	\$_100.00
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Julee Rodocker 4909 Devonshire Ave Lansing MI 48910	4. Type: Loan to Committee 5. Date Debt Was Incurred: 8/29/2019 6. Original Amount of Debt: \$ 400.00	08/29/19 \$ 400.00	\$	\$_400.00
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		-	l (Outstanding debt)	\$1,000.00
(C	omplete on last page of Schedule	Grand Tota showing amounts owed by	of all Schedules 1E or to the committee)	
A debt or obligation must be shown on this Schedu	ule if there was an outstanding a	amount owed on it at the c	closing date of	Enter this total on line 12a "owed by"" or line 12b "owed to" of the

this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Summary Page



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		10/03/19	\$ \$3,560.00
Address 5510 33rd Street, Grand Rapids, MI 49512	Purpose: Campaign materials Click H	Date lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			-
Name Great Lakes List Consulting LLC,		10/19/19	\$ \$125.00
Address	Purpose: Data	Date	
Ralph Fiebig, 2207 College Road, Holt, MI 48842	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name WAM		10/14/19	\$ \$544.13
Address	Purpose: Campaign materials	Date	
5510 33rd Street, Grand Rapids, MI 49512	Click H	ere 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 Square		10/15/19	\$ \$3.20
Address	Purpose: Fees	Date	Ψ ΨΟ.ΖΟ
1455 Market Street, Suite 600, San Francisco, CA 94103, USA		ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Ingham County Clerk,		10/19/19	* \$405.00
Address	Purpose: Fees	Date	\$ <u>\$125.00</u>
341 S. Jefferson, PO Box 179, Mason, MI 48854	Check box if this expenditure is payment of	lere for Memo	Itemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subto	al this page	\$4,357.33
	Grand Total of all S (Complete on last page		\$9,882.69

Enter this total on line 8a of Summary Page

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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number	46506
2. Committee Name Peop	ole 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		09/05/19	\$ \$106.00
Address	Purpose: Campaign materials	Date	<u> </u>
119 N Saginaw St, Pontiac, MI 48342	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Sawicki and Son, Inc.		09/06/19	\$ \$293.82
Address	Purpose: Campaign materials	Date	-
1521 W Lafayette Blvd, Detroit, MI 48216	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
^{Name} Sawicki and Son, Inc.		09/06/19	\$ \$37.10
Address	_{Purpose:} Campaign materials	Date	
1521 W Lafayette Blvd, Detroit, MI 48216	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Lowes		09/12/19	\$ \$57.11
Address	Purpose: Campaign materials	Date	φογ.11
6821 S Cedar St, Lansing, MI 48911		ere for Memo	itemization Type
	Check box if this expenditure is payment of		Noninzation Type
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name City of Lansing City Clerk		09/25/19	. 405.00
Address	Purpose: Data	Date	\$ <u>\$35.00</u>
Lansing City Hall, 124 W Michigan Ave,	Click H	ere for Memo	Itemization Type
Lansing, MI 48933	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		^
	Subtot	al this page	\$529.03
	Grand Total of all S (Complete on last page		

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

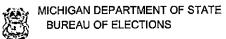
46506

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

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		08/30/19	\$ \$516.75
Address	Purpose: Campaign materials	Date	
119 N Saginaw St, Pontiac, MI 48342	Click H	lere for Memo	Itemization Type
-	Check box if this expenditure is payment of		7F =
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
Name Sawicki and Son, Inc.		08/30/19	. #000 00
Sawioki and Son, mo.	Campaign materials	Date	\$ \$292.83
Address	Purpose: Campaign materials		•
1521 W Lafayette Blvd, Detroit, MI 48216	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	otation		
Name a/31/2019 NAACP Freedom Fund Dinner, 530 S Pine St, Lansing, MI 48933 Advertisement -\$110.00			
		——————————————————————————————————————	\$ <u>\$110.00</u>
Address	Purpose:	240	
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Done Right Signs		09/03/19	\$ \$516.75
Address	Purpose: Campaign materials	Date	φ φυτυ.τυ
119 N Saginaw St, Pontiac, MI 48342	, αιμοσε		
1.0.1. Jugilian Ct, i Citido, Mi 10012	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name WAM 5		09/25/19	
Address	Purpose: Campaign materials	Date	\$ \$3,560.00
510 33rd Street, Grand Rapids, MI 49512	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of	SIS IOI MEIIIO	itomization Type
Fund Raiser	debt or obligation reported on previous statement		
	<u> </u>	al this page	\$4,996.33
		, •	ψ τ ,σσυ.υυ
	Grand Total of all S	CIECULIES ID	
I	(Complete on last page	of Schedule)	

Enter this total on line 8a of Summary Page

Page ____ of ___



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

committee I.D. Number 46506

SCHEDULE 1A 1. Committee 1.D. Numb	eı			
CANDIDATE COMMITTEE 2. Committee Name	People for Julee R	eople 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 Receipt 09/25/19 Name & Address:	_	-		
Julee Rodocker 4909 Devonshire Ave Lansing, MI 48910	\$3,560.00	_{\$} \$7,276.26		
5. If over \$100.00 cumulative, please provide: Occupation Electric materials buyer Employer Consumers Energy	Click Here fo	or Memo Itemization		
Business Address 1 Energy Plaza Drive Jackson, MI 49201	•			
Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/03/19 Name & Address	_			
Julee Rodocker 4909 Devonshire Ave Lansing, MI 48910	\$3,560.00	\$ 10,836.26		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization		
Occupation Electric materials buyer Employer Consumers Energy				
Business Address 1 Energy Plaza Drive Jackson, MI 49201				
Type of Contribution:				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/11/19 Name & Address:	-			
Julee Rodocker 4909 Devonshire Ave	\$50.00	_{\$} \$10,886.26		
Lansing, MI 48910	Click Here for	Memo Itemization		
5. If over \$100.00 cumulative, please provide: Consumers Energy				
Occupation Electric materials buyer Employer Consumers Energy Business Address 1 Energy Plaza Drive Jackson, MI 49201				
Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/16/19 Name & Address		_		
Julee Rodocker 4909 Devonshire Ave Lansing, MI 48910	_{\$} \$200.00	\$11,086.26		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization		
Occupation Electric materials buyer Employer Consumers Energy	_			
Business Address 1 Energy Plaza Drive Jackson, MI 49201				
Type of Contribution:				

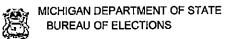
Page 5 of 5

Page Subtotal | All Schedules 1A

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

\$7,370.00 \$9,450.00

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

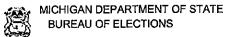
46506 1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name Peo	ople for Julee R	odocker
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? YES 4. Date of Receipt 08/27/19 Name & Address:		
Julee Rodocker		
4909 Devonshire Ave	_s 500	_{\$} \$3,096.26
Lansing, MI 48910 5. If over \$100.00 cumulative, please provide:	<u>,</u>	
Occupation Electric materials buyer Employer Consumers Energy	Click Here fo	r Memo Itemization
Business Address 1 Energy Plaza Drive Jackson, MI 49201		
Type of Contribution: ✓ Direct ✓ Loan from a person Fund Raiser	•	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/29/19 Name & Address		
Julee Rodocker 4909 Devonshire Ave Lansing, MI 48910	<u>\$ 100 </u>	_{\$} _\$3,196.26
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Electric materials buyer Employer Consumers Energy		
Business Address 1 Energy Plaza Drive Jackson, MI 49201		
Type of Contribution: ✓ Direct ✓ Loan from a person Fund Raiser		_
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/29/19 Name & Address:		
Julee Rodocker	_{\$} 400	_s \$3,596.26
4909 Devonshire Ave	<u> </u>	\$ 45,000.00
Lansing, MI 48910 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Electric materials buyer Employer Consumers Energy		
Business Address 1 Energy Plaza Drive Jackson, MI 49201		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/31/19 Name & Address		-
Julee Rodocker		
4909 Devonshire Ave	_{\$} 120	\$3,716.26
Lansing, MI 48910 5. If over \$100.00 cumulative, please provide:		
Occupation Electric materials buyer Employer Consumers Energy	Click Here for	Memo Itemization
Business Address 1 Energy Plaza Drive Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		,
Page Subtotal	\$1,120.00	-
_ ,		i .

Grand Total of All Schedules 1A

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

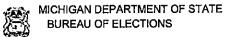
1. Committee I.D. Number 46506

2. Committee Name People for Julee Rodocker

line 3a of Summary

Page.

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: George Brookove	PAC Receipt?	Ш	4. Date of R	•		200	300
						_{\$} 300 _	_ \$300
5. If over \$100.00 cumul	ative, please pro	vide:				Click Here	for Memo Itemization
Occupation Retired		_ Employ	/er			Ollok Flore	Tor Morrie No
Business Address	.			_			
Type of Contribution:	Direct	Loan	from a person		Fund Raiser		
Contribution #2Name & Address	PAC Receipt?	YES	4. Date of R	leceipt			
Marie Weese, 18	31 N. Walm	ont Rd.	, Jackson, I	VII 49	9203	_{\$} _10	<u>\$ 10 </u>
5. If over \$100.00 cumula	ative, please pro	vide:				Click Here	for Memo Itemization
Occupation		Employer	T				
Business Address				_			
Type of Contribution:	Direct	Loan f	rom a person	<u> </u>	Fund Raiser	 	
Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of I	Receip	ot		
Kim Wilson, 759	Beverly Par	k Place	, Jackson, N	VI 49	9203	_{\$} 50	<u>\$ 1</u> 50
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization					
Occupation Retired		Employ	er				
Business Address							
Type of Contribution:	Direct	Loan f	from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of	Recei	pt		
Kyle Bowman, 13	57 Turner S	St., Lans	sing MI, 489	906		_{\$} 100	100
5. If over \$100.00 cumul	ative, please pro	vide:				Clieb Horo	for Momo Itomization
Occupation Law Enforcement Employer State of Michigan		Click Here for Memo Itemization					
Business Address 7119	N. Canal Ro	d., Lansi	ng, MI 48913	<u> </u>			
Type of Contribution:	Direct		from a person		Fund Raiser		
					Page Subtotal	\$460.00	
					nd Total of All Schedules 1A		
			(0	omple	ete on last page of Schedule)	Enter this total or	n .



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

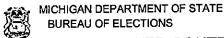
1. Committee I.D. Number 46506

2. Committee Name	People for Julee Rodocker
2. Committee Name	

		
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 Receipt 09/06/19 Name & Address:		
Larry Rodocker, 121 Olympia Drive, Lansing, MI 48911		
	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/13/19 Name & Address		
Gary Gogarn, 4406 Devonshire, Lansing, MI 48910	_{\$} 100	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
B. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/20/19 Name & Address:		
Sarah Yanez, 4916 Devonshire Ave, Lansing, MI 48910	_{\$} 100	_ _{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Massage Therapist Employer Meridian Massage		
Business Address 5093 Brookfield Dr, East Lansing, MI 48823		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/20/19 Name & Address		•
Lori Headley, 3791 E. Haslett, Rd, Perry, MI 48872	_{\$} 25	
5. If over \$100.00 cumulative, please provide:	Click Horo	for Memo Itemization
Occupation Retired Employer	Click Here	ioi Memo Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$275.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Page 2 of 5

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 46506

People for Julee Rodocker CANDIDATE COMMITTEE 2. Committee Name 7. Cumulative for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) PAC Receipt? YES 4. Date of Receipt 09/06/19 3. Contribution # 1 Name & Address: Mary Kast, 635 W Front St Grand Ledge, Mi 48837 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation _ Business Address __ Fund Raiser Type of Contribution: Loan from a person PAC Receipt? YES 4. Date of Receipt 09/06/19 3. Contribution #2 Name & Address Gladys Thomas, 2388 Burcham Dr, East Lansing, MI 48823 _{\$} 50 _s 50 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation ___ Business Address ___ Type of Contribution:

✓ Direct Fund Raiser Loan from a person PAC Receipt? 4. Date of Receipt 09/06/19 3. Contribution #3 YES Name & Address: Marilyn Pell, 4175 Hancock St, Holt, MI 48842 100 100 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Retired Employer_ Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/06/19 Name & Address Nancy Whyte, 506 Venderveen Dr, Mason, MI 48854 50 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer ______ Occupation_ Business Address Fund Raiser Type of Contribution: | | Direct Loan from a person

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

Enter this total on line 3a of Summary Page.

\$225.00

Page Subtotal