# CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE						
Report must be legible, typed or printed in ink and s the treasurer (or designated record keeper) and car	signed by adidate.	3. This Statement covers From:	08/27/19	to 10/20		
1. Committee I.D. Number		4. Candidate Last Name		irst Name	M.I.	
45328		Wood	Carol		<b>E</b>	
7. Committee blome		4a. Office Sought Including Dist			plicable)	Design
2. Committee Name		Council Member At-La	irge Lansing	I		
Re-Elect Carol Wood for Cou	ncil	4b. County of Residence ING	HAM			
5. Committee's Mailing Address		6. Treasurer's Name & Resider	ntial Address			
1019 Most Langer		Charlie Creamer		RE(	CEIVED	
1018 West Lapeer Lansing, MI 48915		3016 S. Cambridge				
Landing, Mi 400 to	į	Lansing, MI 48910		00	T 25 2019	
Einden 2012				MALLE		.
Area Code and Phone 517 482.0213 If the address in this box is different from the commit	tee			INGHAM CO	UNTY CLERK'S OFFICE	•
mailing address on the Statement of Organization, m be sent to this address by the filing official.	ail may	Area Code & Phone (517) 4	85-3811	٠ ٠ ٠ ٠ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ		
7. Treasurer's Business Address		8. Designated Record Keeper		dress (If the comm	nittee has a	
		Designated Record Keeper)				
Retired		Charles Hallman				l
		1014 West Lapeer				
		Lansing, MI 48914				
		_				
Area Code and Phone		Area Code and Phone 51	7 897-2	508		
9. TYPE OF STATEMENT			9e. Dissolutio	on of Candidate (	Committee	
		NLY if candidate ballotfor the	By checkir	ng this item I/We o	ertify any outstanding	debt
	current year:		by the committe	ee to the candidal	e or his or her spouse no longer collectible fr	is here
Pre-Election or Post-Election Statement relates to:	July Quart	ter <b>iv</b>	the committee.	The committee hees or has any ou	ias no oustanding asse	ets,
Primary		·	DWG9 IIU IBIES I	Juan Haa ally Uu	sanding oos	
⊠ General	October C	Quarterly	Further, if the d	issolution cannot	be granted, that this be orting Waiver.	3
Convention			considered a re	dest int ase web	orang waiver.	
Special	9c. Annua	ai Statement ()				
School		Coverage Year	Effec	tive date of disso	lution	
		ndment to Campaign Statement				
[]Caucus	(Com	plete Item 9a, 9b, 9c or 9e to Ite which Statement is being			funds must be reporte	ed on
	amen		Schedule 1B a	nd the Summary	Page.	
Date of Election, Convention or Caucus		F2019-0709			_	
		10/25/19 9:07 AM Pa CAMP \$0.00 Barb Byrum, Ingham	_			
				CH MERINALAS		
			1			
10. Verification: I\We certify that all reasonable dilige	ence was used	in the preparation of this statem	ent and attached	d schedules (if an	y) and to the best of	
my/our knowledge and belief the contents are true, a	accurate and c	unipiate.	1.			
Current Treasurer or Charles Halln Designated Record keeper	nan	, Chall to	allr-	 Date	10/23/19	_
Type or Print Name		Signature				
Carol Wood		Maralela	ac/	Date	10/23/19	
CandidateType or Print Name		Signature	7	Date		<del>-</del>
1 Jpc of Cities (400)		<u>~</u>				

1. Committee I.D. Number 45328

# **SUMMARY PAGE**

2. Committee Name Re-Elect Carol Wood for Council

CANDIDATE COMMITTEE	z. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 12,015.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$26,265.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$12,015.00	(20.) \$ \$26,265.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$75.00
7. In-Kind Expenditures (Schedule 1B-iK, Column 6)	(7.) \$ \$0.00	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$11,883.12	
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.) \$ _\$11,883.12	(23.) \$ \$21,475.20
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.)\$	-
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	-
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	- 1
13. Ending Balance of last report filed	(13.) \$ \$4,999.43	<u> </u>
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ \$12,015.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ \$17,014.43	
15. SUBTOTAL Add lines 13 and 14		<del></del>
<ol> <li>Amount expended during reporting period (Add lines 9 and 11)</li> </ol>	(16.) - \$ \$11,883.12	<u></u>
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$5,131.31	*
,		



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

45328

1. Committee I. D. Number

2. Committee Name Re-Elect Carol Wood for Council

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5, Date	6. Amount
Expenditure #1 Name Lawson	B.A.:II:	09/10/19 Date	\$ <u>2,488.52</u>
Address 685 W. Columbia Battle Creek, MI 49015	Purpose: Mailing Click		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2  Name The Chronicle		09/17/19	\$ <u>.800.00</u>
Address 2843 E. Grand River	Purpose: ad Click	Date Here for Memo	temization Type
East Lansing, MI 48823	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Lawson Address	Purpose: Mailing	09/30/19 Date	s <u>760.54</u>
685 W. Columbia Battle Creek, MI 49015	Click  Check box if this expenditure is payment of debt or obligation reported on previous statement		temization Type
Expenditure #4	statement		
Name Lawson Address	Purpose: Mailing	09/30/19 Date	\$ <u>1,231.72</u>
685 W. Columbia Battle Creek, MI 49015	Click		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Address 685 W. Columbia	Purpose: Mailing	10/10/19 Date	\$ <u>5248.34</u>
Battle Creek, MI 49015	Click Check box if this expenditure is payment of debt or obligation reported on previous statement		Itemization Type
	<u> </u>	otal this page	\$10,529.12

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

45328

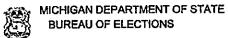
1. Committee I. D. Number

Re-Elect Carol Wood for Council

CANDIDATE COMMITTEE 2. Co	ommittee Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Verizon		10/10/19	\$ 804.00
	Purpose: office expense	Date	
Address 5202 W Saginaw Hwy			
Lansing, MI, 48917	Click h	tere for Memo I	temization Type
1	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Sugarion		
		10/10/19	
Name Lawson			s <u>550.00</u>
Address	Purpose: signs	Date	
685 W. Columbia			
Battle Creek, MI 49015	Click P	tere for iviento i	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	betomen	<del></del>	
Name			
Mano			\$
Address	Purpose:	Date	-
	Click i	lora for Memo I	temization Type
	ļ <u> </u>		
,	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			e.
		Date	\$
Address	Purpose:		
	Click I	lere for Memo l	temization Type
	Check box if this expenditure is payment of		
[ <del></del>	debt or obligation reported on previous		
Fund Raiser	statement	<del></del>	
Expenditure #5			
Name			•
Address	Purpose:	Date	\$
. (64) 000			(h
	l		Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	\$1,354.00

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

45328

2. Committee Name

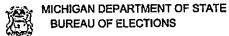
Re-Elect Carol Wood for Council

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 09/10/19  Name & Address:  Gregory Eaton 1739 Chester Lansing, MI 48912	<sub>\$</sub> 500.00	<sub>\$</sub> 500.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Business Owner Employer Self-employed		
Business Address 2510 N Martin Luther King Jr Blvd, Lansing, MI 48906		
Type of Contribution: Direct Loan from a person Fund Raiser		<u></u>
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/10/19  Name & Address		
Kevin McKinney 216 N. Chestnut Lansing, MI 48933	<u>\$250.00</u>	ş 250.00
5 If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Business Employer McKinney & Associates		
Business Address 216 N Chestnut St, Lansing, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/10/19 Name & Address:		
Michigan Realtor PAC 720 N. Washington Lansing, MI 48906	\$ 1000.00	<sub>\$</sub> 1000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/10/19 Name & Address		
Joel Maatman 9111 Williams Dewitt, MI 48820	<sub>\$</sub> 100.00	<sub>\$</sub> 100.00
5. If over \$160.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer	<u> </u>	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	·	·
Page Subtotal	\$1,850.00	_
Grand Total of All Schedules 1A	12.015.00	

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

Page 1 of 4 .



# **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

1. Committee I.D. Number

45328

**CANDIDATE COMMITTEE** 

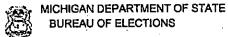
2. Committee Name Re-Elect Carol Wood for Council

<u> </u>		
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 09/12/19  Name & Address: Shirley Murray 1720 Bradley Lansing, MI 48910	<sub>\$</sub> 100.00	<sub>\$</sub> 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/12/19  Name & Address  George Contompasis	25.00	25.00
2813 Tulane Drive	<sub>\$</sub> 25.00	<sub>\$</sub> 25.00
Lansing, MI 48912	OII 1-11 5-	
5. If over \$100.00 cumulative, please provide:	Click Here to	or Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/12/19  Name & Address:  R Cole Bouck	50.00	450.00
321 N. Jenison	<sub>\$</sub> 50.00	<sub>s</sub> 150.00
Lansing, MI 48915	Click Here fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Administrator Employer State of Michigan		
Business Address 430 W Allegan St, Lansing, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser	,	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/12/19 Name & Address		
Sandra Zerkle 1216 Goodrich Lansing, MI 48910	<sub>\$</sub> 50.00	<sub>\$</sub> 50.00
5. If over \$100,00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<u>., </u>	<del>,</del>
Page Subtotal	\$225.00	_
	1 -	1

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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# SCHEDULE 1A

1. Committee I.D. Number

45328

CANDIDATE COMMITTEE 2. Committee I

2. Committee Name Re-Elect Carol Wood for Council

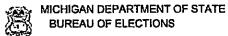
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/13/19  Name & Address: Elaine Womboldt 4815 Tressa Dr. Lansing, MI 48910	<sub>\$</sub> 150.00	<sub>\$</sub> 150.00
5. If over \$100.00 cumulative, please provide:  Occupation Retired Employer Retired	Click Here fo	or 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 George Brookover 401 Southlawn Ave. East Lansing, MI 48823	<sub>\$</sub> 1000.00	<sub>\$</sub> 1000.00
5. If over \$100.00 cumulative, please provide:  Occupation Attorney Employer Self-employed  Business Address 1005 Abbot Rd, East Lansing, MI 48823	Click Here fo	r Memo Itemization
Type of Contribution: Direct Coan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? V YES 4. Date of Receipt 09/16/19  Name & Address:  Michigan Laborers Political 1118 Centennial Suite 100  Lansing, MI 48917  5. If over \$100.00 cumulative, please provide:	s 250.00 Click Here for	\$ 250.00  Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? VES 4. Date of Receipt 09/16/09 Name & Address Michigan Retailers Assoc. 603 S. Washington Lansing, MI 48933  5. If over \$100.00 cumulative, please provide:	\$100.00	\$100.00
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,500.00	

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

Enter this total on

line 3a of Summary Page.



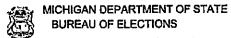
# ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

1. Committee I.D. Number 45328

**CANDIDATE COMMITTEE** 

Re-Elect Carol Wood for Council

Enter contributor's name middle initial. Check box Committee (PAC) Report	to Indicate if contr ail contributions r	ibution is egardless	from a Political Co	ual, ent mmitte	ter last name, first name, e or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: UAW V-PAC 8000 E. Jefferso Detriot, MI 4821		YES	4. Date of R	eceipt	09/17/19	<sub>\$</sub> 1500.00	<sub>\$</sub> 1500.00
5. If over \$100.00 cumul	ative, please pro	vide:				Click Here fo	or Memo Itemization
Occupation		_ Employ	yer			Ollow Field IV	or morno romandion
Business Address				<del></del>			
Type of Contribution:	Direct	Loan	from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of R	eceipt	09/25/09		
Rene Rosenbau 6227 W. Parks St. Johns, MI 48						<u>\$50.00</u>	<sub>\$</sub> 50.00
5. If over \$180,00 cumul		vide:				Click Here fo	r Memo Itemization
Occupation		Employe	Γ		·		
Business Address							
Type of Contribution:	Direct [	Loan	from a person		Fund Raiser		·
3. Contribution # 3 Name & Address: Ron Boji 5334 Trillium Court West Bloomfield To	PAC Receipt? wnship, MI 48	YES	4. Date of F	Receipt	09/25/19	<sub>\$</sub> 250.00	<sub>\$</sub> 250.00
5. If over \$100.80 cumul	ative, please pro	vide:				Click Here to	r Memo Itemization
Occupation Develope	er	Employ	<sub>/er</sub> Self-empl	oyed			•
Business Address 124 V	V Allegan St S	uite 210	0, Lansing, MI	4893	3		
Type of Contribution:	Direct .	Loan	from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of	Receip	10/01/19		
Dale Schrader 4519 Gull Lansing, MI 489	17					<sub>\$</sub> 200.00	<sub>\$</sub> 200.00
5, If over \$100.00 cumul	ative, please pro	vide:				Click Here fo	r Memo Itemization
Occupation Retired		_ Em	ployer Retired				
Business Address					<del></del>		
Type of Contribution:	Direct	Loan	from a person		Fund Raiser		· · · · · · · · · · · · · · · · · · ·
4 /			(0		Page Subtotal nd Total of All Schedules 1A te on last page of Schedule)	2.015 Enter this total on line 3a of Summary Page.	20
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### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A** CANDIDATE COMMITTEE

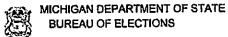
1. Committee I.D. Number 45328

2. Committee Name Re-Elect Carol Wood for Council

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 PAC Receipt? YES 4. Date of Receipt 10/10/19  Name & Address:  James Phelps  7517 Washington Ave. South Edina, MN 55439	<sub>\$</sub> 5000.00	<sub>\$</sub> 5000.00
5. If over \$100.00 cumulative, please provide:  Occupation President Employer Northcrest Corporation  Business Address 7517 Washington Ave S, Edina, MN 55439	Click Here fo	or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/19 Name & Address		
Kenric Hall 1230 Straboard Ave. Okemos, MI 48864	<sub>\$</sub> 200.00	<sub>\$</sub> 200.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation General Manager Employer Radisson		, a
Business Address 111 N Grand Ave, Lansing, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/19 Name & Address:		
Marilyn Latterman 3911 Roxbury	<u>\$200.00</u>	<sub>\$</sub> 200.00
Okemos, MI 48864	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/18/19 Name & Address Guillermo Lopez		
1927 Pleasant View Lansing, MI 48910	<sub>\$</sub> 40.00	<sub>s</sub> 40.00
5. If over \$190.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		The state of the s
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal	\$5,440.00	_
Grand Total of Ali Schedules 1A (Complete on last page of Schedule)	/2.0/5.0 Enter this total on	Ø



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## **ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_45328

2. Committee Name Re-Elect Carol Wood for Council

line 3a of Summary

Page.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/19/19  Name & Address:	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Operating Engineers Local 324 500 Hulet Drive Bloomfield Townshio, MI 48302	<sub>\$</sub> 1000.00	<sub>\$</sub> 1000.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	<b>\$</b>
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Paralaura		
Occupation		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
,	\$	
5. If over \$100.00 cumulative, please provide:	Click Here to	or Memo Itemization
Occupation Employer	Click Here to	or Memo Itemization
	Click Here to	or Memo Itemization