



STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

September 16, 2014

Justin Hodge
1308 Haslett Road
Apartment 4
East Lansing, Michigan 48823

Dear Mr. Hodge:

The Department of State (Department) received a formal complaint filed by Barb Byrum against you, alleging that you violated section 47(1) of the Michigan Campaign Finance Act (MCFA), 1976 PA 388, MCL 169.247(1), by failing to include a complete and correct identification statement on certain campaign material. A copy of the complaint is provided as an enclosure with this letter.

The MCFA and corresponding administrative rules require a person who produces printed material that relates to an election to include the phrase "Paid for by [name and address of the person who paid for the item]." MCL 169.247(1), Mich. Admin. R 169.36(2). A knowing violation constitutes a misdemeanor offense punishable by a fine of up to \$1,000.00, imprisonment for up to 93 days, or both. MCL 169.247(5).

In support of her complaint, Ms. Byrum provided a postcard which states: "VOTE AUGUST 5TH JUSTIN HODGE DEMOCRAT FOR INGHAM COUNTY COMMISSIONER [.]". There does not appear to be a paid-for-by statement on the postcard.

The purpose of this letter is to inform you of the Department's examination of these matters and your right to respond to the allegations before the Department proceeds further. It is important to understand that the Department is neither making this complaint nor accepting the allegations as true.

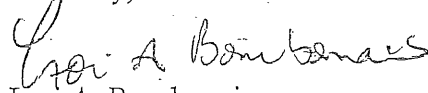
If you wish to file a written response to the complaint, you are required to do so within 15 business days of the date of this letter. Please include any evidence that reflects any corrective measures you have taken to bring your campaign material into compliance with the MCFA. Your response may include any written statement or additional documentary evidence you wish to submit. All materials must be sent to the Department of State, Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918. If you fail to submit a response, the Department will render a decision based on the evidence furnished by the complainant.

A copy of your reply will be provided to Ms. Byrum, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe

that a violation of [the MCFA] has occurred [.]” MCL 169.215(10). Note that the Department’s enforcement powers include the possibility of entering a conciliation agreement, conducting an administrative hearing, or referring this matter to the Attorney General for enforcement of the criminal penalty provided in section 47(5) of the Act.

If you have any questions concerning this matter, you may contact me at (517) 241-0395.

Sincerely,

A handwritten signature in cursive script, appearing to read "Lori A. Bourbonais".

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Justin Hodge



MAIN OFFICE
P.O. Box 179
341 South Jefferson
Mason, MI 48854
Phone: (517) 676-7201
Fax: (517) 676-7254

Barb Byrum
INGHAM COUNTY CLERK

BRANCH OFFICE
Veterans Memorial Courthouse
Lansing, MI 48933
inghamclerk@ingham.org
www.ingham.org

September 4, 2014

Michigan Department of State
Bureau of Elections
Richard H. Austin Building – 1st Floor
430 West Allegan Street
Lansing, Michigan 48918

To Whom It May Concern:

On September 2, 2014, I received an anonymous letter in my office that stated that Justin Hodge was disseminating campaign literature without the name and address of the person that paid for the literature. I have enclosed a copy of the anonymous letter and an original copy of the campaign literature in question.

Justin Hodge is in violation of Michigan Campaign Finance Act, specifically MCL § 169.247(1), because his campaign literature lacked the name and address of the person that paid for the material as required under law.

Mr. Hodge's candidate committee is "Friends of Justin Hodge," and I have enclosed a copy of his most recently amended Statement of Organization for your convenience.

Sincerely,


Barb Byrum
Ingham County Clerk

cc: Justin Hodge

DEPT OF STATE
2014 SEP -9 P 2:49
BUREAU OF ELECTIONS

**Michigan Department of State
Campaign Finance Complaint Form**

Reset Form

This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (the MCFA, 1976 PA 388, as amended; MCL 169.201 *et seq.*).

Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Barb Byrum, Ingham County Clerk	Daytime Telephone Number 517-676-7201	
Mailing Address Post Office Box 179		
City Mason	State MI	Zip 48854

Section 2. Alleged Violator		
Name Justin Hodge		
Mailing Address 1308 Haslett Road, Apartment 4		
City East Lansing	State MI	Zip 48823

Section 3. Alleged Violations (Use additional sheet if more space is needed.)
--

Section(s) of the MCFA violated: MCL 169.247(1)

Explain how those sections were violated:

The name and address of the person that paid for the printed material was not stated on the printed material.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

The printed material referring to a candidate is enclosed with this form.

Section 4. Certification (Required)

I certify that to the best of my knowledge, information, and belief, formed after a reasonable inquiry under the circumstances, each factual contention of this complaint is supported by evidence.

X

Signature of Complainant

Date

9/4/14

Section 5. Certification without Evidence (Supplemental to Section 4)

Section 15(6) of the MCFA (MCL 169.215) requires that the signed certification found in section 4 of this form be included in every complaint. However, if, after a reasonable inquiry under the circumstances, you are unable to certify that certain factual contentions are supported by evidence, you may also make the following certification:

I certify that to the best of my knowledge, information, or belief, there are grounds to conclude that the following specifically identified factual contentions are likely to be supported by evidence after a reasonable opportunity for further inquiry. Those specific contentions are:

Justin Hodge is in violation of the Michigan Campaign Finance Act,
specifically MCL 169.247(1), because he produced printed material,
which encouraged individuals to vote, that did not include the name
and address of the person that paid for the printed material.

X

Signature of Complainant

Date

9/4/14

Section 15(8) of the MCFA provides that a person who files a complaint with a false certification is responsible for a civil violation of the MCFA. The person may be required to pay a civil fine of up to \$1,000.00 and some or all of the expenses incurred by the Michigan Department of State and the alleged violator as a direct result of the filing of the complaint.

Mail or deliver the completed complaint form and evidence to the following address:

Michigan Department of State
Bureau of Elections
Richard H. Austin Building – 1st Floor
430 West Allegan Street
Lansing, Michigan 48918

Dear Clerk Barb Byrum,

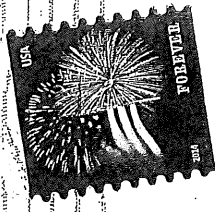
I read the enclosed article in the City Pulse about how campaign literature encouraging a voter to vote for a candidate is supposed to have a "paid for by.." disclaimer. The enclosed literature about a Justin Hodge for County Commissioner does NOT have the required information. It is clear that he is the one who sent it out because it has his contact information... but it does not have the required part about who actually paid for it.

I am asking that you file a complaint on this one like you are for the one in the City Pulse.

It is only fair that way, everyone should follow the rules.

Thank you,

An East Lansing voter.



POSTAGE WILL BE PAID BY ADDRESSEE
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

RECEIVED
SEP 02 2014
INGHAM COUNTY CLERK

BARB BYRUM
INGHAM COUNTY CLERK
P.O. BOX 179
MASON, MI 48854

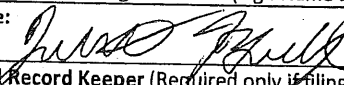
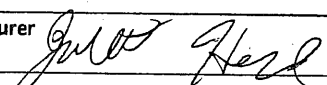
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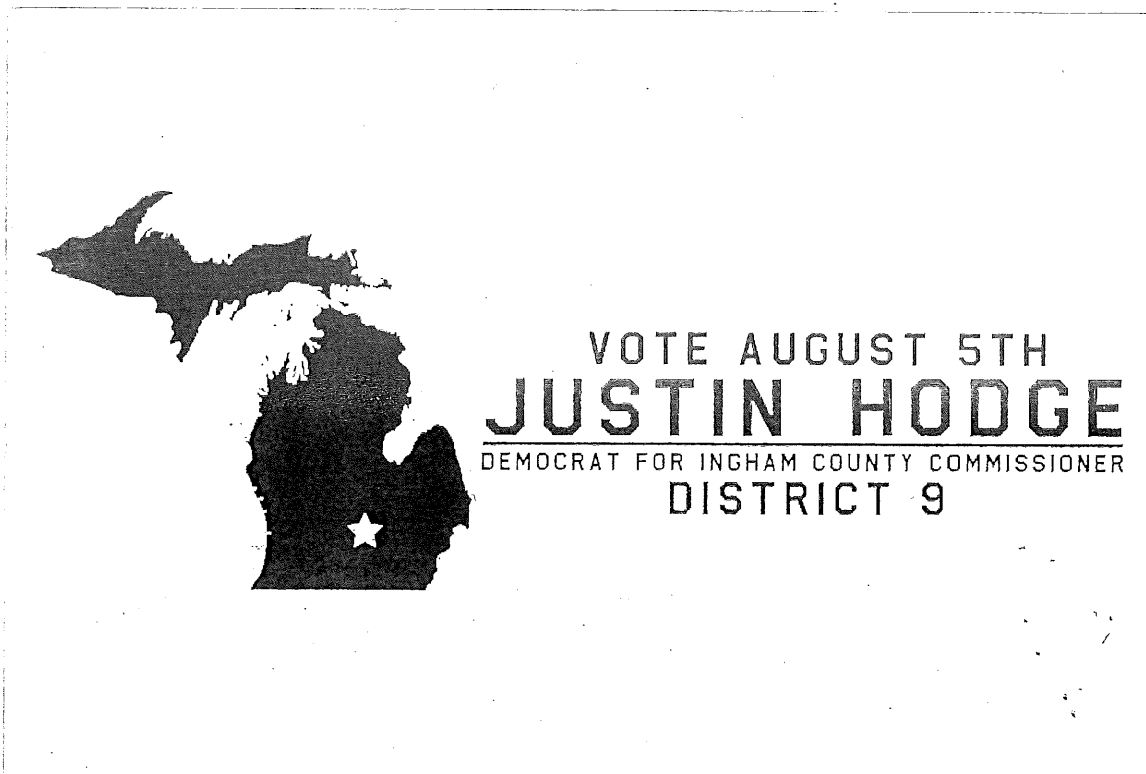
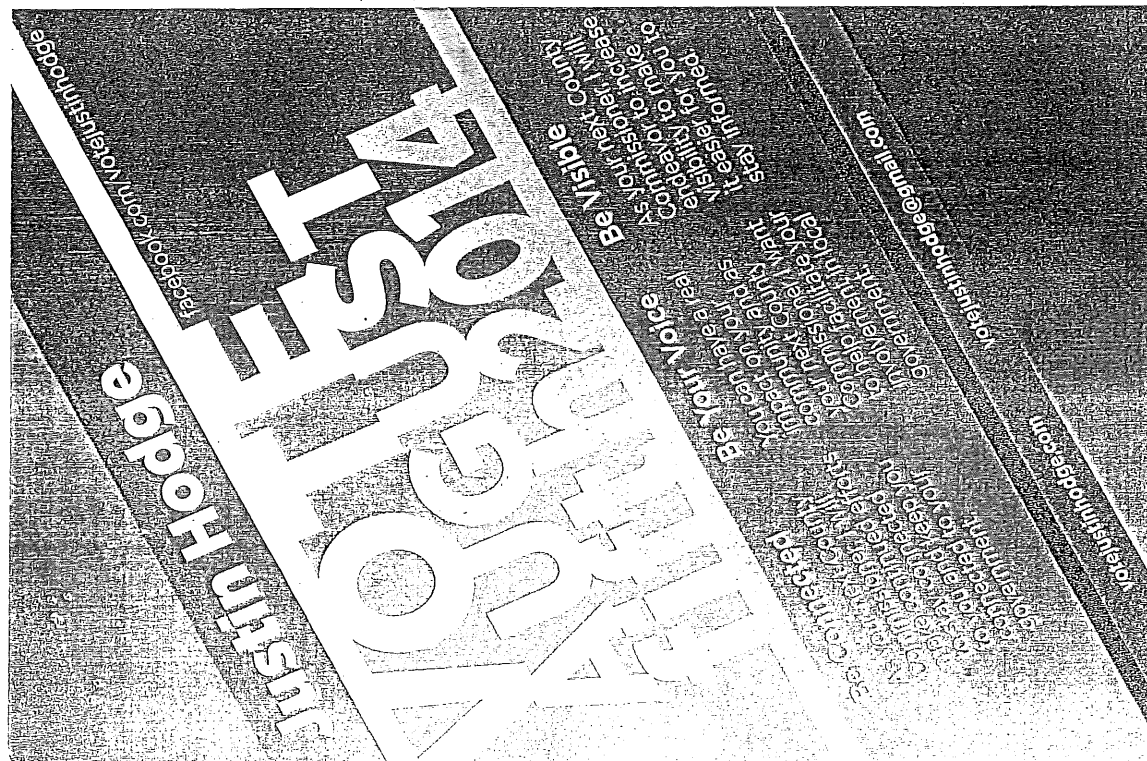
RECEIVED

JUN 30 2014

OK 67 7/2/14
INGHAM COUNTY CLERK

ORIGINAL OR AMENDED
STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

1. Committee ID #: 46454		*2. Type of Filing: <input type="checkbox"/> Original: <input checked="" type="checkbox"/> Amendment to Items: 1, 2, 7a, 7b, 8, 14		Eff. Date: 07/07/2014
*3. Full Name of Committee (must include Candidate's first and last name): Friends of Justin Hodge				
*4a. Candidate Full Name: Last Name Hodge		First Name Justin	M.I. D	
*4b. Political Party (if applicable): Democratic Party		*4c. County of Residence: INGHAM		
*4d. Office Sought: County Commissioner		*4e. District/Circuit # or Jurisdiction: District 9		
*5. Date Committee was Formed: 01/15/2014				
*6a. Committee Phone: (517) 203-9938		6b. Committee Fax #:		
6c. Committee Email Address: votejustinhodge@gmail.com		6d. Committee Website Address: www.votejustinhodge.com		
*7a. Complete Committee Mailing Address (May be PO Box): P.O. Box 4332, East Lansing, MI 48826				
*7b. Complete Committee Street Address (May not be PO Box): 1308 Haslett Rd, Apt 4, East Lansing, MI 48823				
*8. Treasurer Name and Complete Address: Justin Hodge, 1308 Haslett Rd, Apt 4, East Lansing, MI 48823 Phone #: (517) 203-9938 Email Address: votejustinhodge@gmail.com				
9. Designated Record Keeper Name and Complete Address: Phone #: Email Address:				
*10. REPORTING WAIVER REQUEST: <input type="checkbox"/> YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000 in an election, the committee does not owe Pre, Post and Annual Campaign Statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold and all required campaign statements must be filed. <u>A Reporting Waiver does not exempt a committee from filing Late Contribution Reports.</u> <input checked="" type="checkbox"/> NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000 in an election. I/We understand that the committee owes Pre, Post and Annual Campaign Statements even if the committee does not spend or receive in excess of \$1,000 in an election. I/We further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in <u>Appendix C</u> of the Committee Manual.				
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received. *Official Depository (name and address): MSUFCU, 3777 West Rd, East Lansing, MI 48823 Secondary Depository (name and address):				
12. <input type="checkbox"/> This item applies only to Gubernatorial Candidate Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.				
13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not apply to Candidate Committees that file with the County Clerk's office. <input type="checkbox"/> Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically. <input type="checkbox"/> Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily. Further information regarding Electronic Filing can be found in <u>Appendix D</u> of the Committee Manual.				
14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)				
*Candidate:  Date: 6/30/14		*Current Treasurer:  Date: 6/30/14		
Designated Record Keeper (Required only if filing electronically) Date:				





STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

September 26, 2014

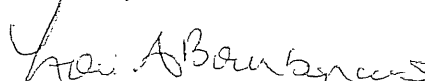
Barb Byrum
P.O. Box 179
Mason, Michigan 48854

Dear Ms. Byrum:

The Department of State received a response to the complaint you filed against Justin Hodge, which concerns an alleged violation of the Michigan Campaign Finance Act (MCFA), 1976 P.A. 388, MCL 169.201 *et seq.* A copy of the response is provided as an enclosure with this letter.

If you elect to file a rebuttal statement, you are required to send it within 10 business days of the date of this letter to the Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918.

Sincerely,


Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Justin Hodge

Justin Hodge
1308 Haslett Rd Apt 4
East Lansing, MI 48823

September 21, 2014

Michigan Department of State
Bureau of Elections
Richard H. Austin Building, 1st Floor
430 West Allegan Street
Lansing, MI 48918

Dear Lori A. Bourbonais:

I am writing in response to the letter that I received from the Department of State on September 20, 2014. The letter stated that Ingham County Clerk Barb Byrum had filed a formal complaint against me, alleging that I was in violation of Michigan Campaign Finance Act. Specifically, it stated that I violated MCL 169.247(1) because my campaign literature for the August 5, 2014 Primary Election lacked the name and address of the person that paid for the material.

Although the literature in question does lack that required information, I should not be held responsible as I was not aware of the requirement and Michigan Campaign Finance Act states that one is held liable only if they knowingly make the violation. Specifically, MCL 169.247(6) states:

A person who knowingly violates this section is guilty of a misdemeanor punishable by a fine of not more than \$1,000.00, or imprisonment for not more than 93 days, or both.

As this was my first attempt at running for office and prior to this campaign I had no political experience or background, I was truly not aware of this requirement. I in no way knowingly or purposefully violated this section of the Michigan Campaign Finance Act. Additionally, many of these cards were never distributed and none of them were mailed; consequently, they were not dispersed over a wide area.

I made it no secret that my candidate committee was responsible for the cards as the vast majority of the few that were distributed, were distributed personally by me when making face to face contact with potential voters. Additionally, I thought I had made the necessary documentation by reporting the purchase of the literature on my campaign finance report. Please find attached a copy of my Pre-Primary Election Campaign Finance Statement. On page 1 of the Itemized Expenditures Schedule 1B. (page 7 of the whole document), Expenditure #2, which I have circled, refers to the literature in question. As you can see, I appropriately listed my literature on my statement, which is all that I thought I needed to do.

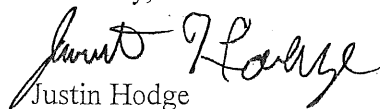
2014 SEP 25 PM 2:32

BUREAU OF ELECTIONS
MI DEPT OF STATE

As you saw on the copy of the literature that Ms. Byrum provided, my card was specifically for the August 5, 2014 election. Therefore, it has been more than a month since I had stopped distributing the cards. In the end, the literature in question had next to no impact on the election as I did not even garner 15% (fewer than 90 votes) of the vote.

Please let me know if you require further clarification or have other questions, you may contact me at (517) 203-9938.

Sincerely,


Justin Hodge



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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: 01/05/14 to 07/20/14

1. Committee I.D. Number

46454

2. Committee Name

Friends of Justin Hodge

4. Candidate Last Name

First Name

M.I.

Hodge

Justin

4a. Office Sought Including District # or Community Served (If applicable)

County Commissioner District 9

4b. County of Residence Ingham

RECEIVED

5. Committee's Mailing Address

PO 4332

East Lansing, MI 48826

6. Treasurer's Name & Residential Address

Justin Hodge

1308 Haslett Rd Apt 4

East Lansing, MI 48823

AUG 21 2014

INGHAM COUNTY CLERK

Area Code and Phone (517) 203-9938

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.

Area Code & Phone (517) 203-9938

7. Treasurer's Business Address

1308 Haslett Rd Apt 4

East Lansing, MI 48823

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone (517) 203-9938

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary ☐ General

☐ Convention ☐ School

☐ Special ☐ Caucus

Date of Election, Convention or Caucus

08/05/14

9c. ☐ Annual Statement (_____ Coverage Year)

9d. ☒ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 8, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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.

Current Treasurer or Designated Record keeper Justin Hodge

Type or Print Name

Signature

Date 8/20/2014

Candidate Justin Hodge

Type or Print Name

Signature

Date 8/20/2014



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 46454

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Friends of Justin Hodge

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>875.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$875.00</u>	(18.) \$ <u>\$875.00</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>\$875.00</u>	(20.) \$ <u>\$875.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$108.90</u>	(21.) \$ <u>\$108.90</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>\$805.38</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>\$805.38</u>	(23.) \$ <u>\$805.38</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. 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)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$300.00</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>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$875.00</u>	
	(15.) = \$ <u>\$875.00</u>	
15. SUBTOTAL Add lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$805.38</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$69.62</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 46454
2. Committee Name Friends of Justin Hodge

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/22/14</u></p> <p>Name & Address: Susan Robertson 6327 Haag Rd Lansing, MI 48911 United States</p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/23/14</u></p> <p>Name & Address: Karen Staller 2407 S Circle Dr Ann Arbor, MI 48103 United States</p> <p>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</p>		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/23/14</u></p> <p>Name & Address: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Developmental Disabilities Clinician</u> Employer <u>Community Mental Health</u> Business Address <u>812 E Jolly Rd, Lansing, MI 48910</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>200</u>	\$ <u>308.90</u>
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/10/14</u></p> <p>Name & Address: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Developmental Disabilities Clinician</u> Employer <u>Community Mental Health</u> Business Address <u>812 E Jolly Rd, Lansing, MI 48910</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>408.90</u>
		Click Here for Memo Itemization	

Page Subtotal \$450.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 46454
2. Committee Name Friends of Justin Hodge

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 Name & Address: Barbara Morin 56 Ardoene Street Providence, RI 02907 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/14</u>		\$ <u>10.00</u>	\$ <u>10.00</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 #2 Name & Address: Tajalli Kelley-Graves 4221 Southport Cir Apt 2D Okemos, MI 48864 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/14</u>		\$ <u>50.00</u>	\$ <u>50.00</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 Name & Address: Jacqueline Hodge 1349 Foxfire Street East Lansing, MI 48823 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/14</u>		\$ <u>40.00</u>	\$ <u>40.00</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 #4 Name & Address: Leslie Cunningham 06530 Brown Rd. Charlevoix, MI 49720 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/23/14</u>		\$ <u>150.00</u>	\$ <u>150.00</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	

Page Subtotal \$250.00

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 46454
2. Committee Name Friends of Justin Hodge

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: Marjorie Stokes 6162 Balfour Dr Lansing, MI 48911	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/09/14</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution #2 Name & Address: Rodney Pickett 2341 Abbot Rd East Lansing, MI 48823	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/25/14</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 3 Name & Address: Samuel Johnson 1016 Camden Dr Lansing, MI 48917	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/21/14</u>	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 4 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

Page Subtotal	\$175.00
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	\$175.00
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Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$875.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 46454

2. Committee Name Friends of Justin Hodge

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823 If over \$100.00 cumulative, please provide: Occupation: <u>Developmental Disabilities Clinician</u> Employer Name & Business Address: Community Mental Health 812 E Jolly Rd Lansing, MI 48910 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website Domain</u> 5. Date Of Receipt: <u>01/05/14</u> 6. Vendor Name & Address: Wix.com, Inc. PO box 40190 San Francisco, CA Click Here for Memo Itemization	\$ <u>9.90</u>	\$ <u>9.90</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823 If over \$100.00 cumulative, please provide: Occupation: <u>Developmental Disabilities Clinician</u> Employer Name & Address: Community Mental Health 812 E Jolly Rd Lansing, MI 48910 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website Hosting</u> 5. Date Of Receipt: <u>01/05/14</u> 6. Vendor Name & Address: Wix.com, Inc. PO box 40190 San Francisco, CA Click Here for Memo Itemization	\$ <u>99.00</u>	\$ <u>108.90</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal

\$108.90

\$408.90

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

\$108.90

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 46454
2. Committee Name Friends of Justin Hodge

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>MOO Inc.</u> Address <u>985 Waterman Avenue</u> <u>East Providence, RI 02914</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stickers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/24/14</u> Date	\$ <u>58.86</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>B-UNIQUE DESIGNZ</u> Address <u>3308 S Cedar St #6</u> <u>Lansing Charter Township, MI 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Card Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/12/14</u> Date	\$ <u>280.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>B & H Foto & Electronics Corp</u> Address <u>420 9th Ave</u> <u>New York, NY 10001</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Video Equipment</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/21/14</u> Date	\$ <u>79.99</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Michigan Farm Bureau</u> Address <u>7373 W. Saginaw Hwy.</u> <u>Lansing, MI 48917</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Banner</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/06/14</u> Date	\$ <u>83.22</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>B & H Foto & Electronics Corp</u> Address <u>420 9th Ave</u> <u>New York, NY 10001</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Video Equipment</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/14</u> Date	\$ <u>34.60</u> Click Here for Memo Itemization Type
Subtotal this page			\$ <u>536.67</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 46454
2. Committee Name Friends of Justin Hodge

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Vistaprint USA</u> Address <u>Vistaprint USA, Incorporated</u> <u>95 Hayden Avenue</u> <u>Lexington, MA 02421</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Magnet</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/14</u> Date	\$ <u>54.23</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>City of East Lansing</u> Address <u>410 Abbot Road</u> <u>East Lansing, MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Voter File</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/14</u> Date	\$ <u>12.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>City of East Lansing</u> Address <u>819 Abbot Road</u> <u>East Lansing, MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Room Rental for Filming</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/19/14</u> Date	\$ <u>87.50</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Stamprite Supersine</u> Address <u>154 S Larch St</u> <u>Lansing Charter Township, MI 48912</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Badge</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/11/14</u> Date	\$ <u>17.33</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Facebook</u> Address <u>1601 Willow Road</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisements</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/19/14</u> Date	\$ <u>84.25</u> Click Here for Memo Itemization Type

Subtotal this page **\$255.31**

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

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 46454
2. Committee Name Friends of Justin Hodge

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PayPal</u> Address <u>2211 North First Street</u> <u>San Jose, California 95131</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Transaction Fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/19/14</u> Date	<u>\$ 13.40</u>
Expenditure #2 Name 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	\$ _____
Expenditure #3 Name 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	\$ _____
Expenditure #4 Name 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	\$ _____
Expenditure #5 Name 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	\$ _____
Subtotal this page			\$13.40
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$805.38

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 46454
2. Committee Name Friends of Justin Hodge

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: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823	4. Type: <u>Loan for card printing</u> 5. <u>Date Debt Was Incurred:</u> <u>02/23/14</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200</u>	\$ \$ \$ \$ \$	\$	\$ 200 <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: Justin Hodge 1308 Haslett Rd Apt 4 East Lansing, MI 48823	4. Type: <u>Loan for equipment</u> 5. <u>Date Debt Was Incurred:</u> <u>3/10/14</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100</u>	\$ \$ \$ \$ \$	\$	\$ 100 <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)

\$300.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

\$300.00

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.



STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

January 28, 2015

Justin Hodge
1308 Haslett Road
Apartment 4
East Lansing, Michigan 48823

Dear Mr. Hodge:

The Department of State (Department) has completed its investigation of the complaint filed against you by Barb Byrum, which alleged that you violated section 47(1) of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.247(1), by failing to include a complete and correct identification statement on certain campaign-related material. This letter concerns the disposition of Ms. Byrum's complaint.

The MCFA and corresponding administrative rules require a person who produces printed material that relates to an election to include the phrase "Paid for by [name and address of the person who paid for the item]." MCL 169.247(1), R 169.36(2). A knowing violation constitutes a misdemeanor offense punishable by a fine of up to \$1,000.00, imprisonment for up to 93 days, or both. MCL 169.247(6).

The Act also requires the Department to "endeavor to correct the violation or prevent a further violation by using informal methods [.]" if it finds that "there may be reason to believe that a violation ... has occurred [.]". MCL 169.215(10). The objective of an informal resolution is "to correct the violation or prevent a further violation [.]". Id.

Ms. Byrum filed her complaint on September 9, 2014, and you filed a written response on September 25, 2014. Ms. Byrum did not file a rebuttal statement with the Department.

Ms. Byrum alleged that you failed to include a paid-for-by statement on certain campaign literature. In support of her complaint, Ms. Byrum provided a copy of a postcard which stated, "VOTE AUGUST 5TH JUSTIN HODGE DEMOCRAT FOR INGHAM COUNTY COMMISSIONER". It appeared that this postcard did not contain a paid-for-by statement.

In your response you indicated that you were unaware of the section 47 paid-for-by statement requirement, but you did disclose your expenditure for the literature on your 2014 Pre-Primary campaign statement.

While the Department believes that the evidence tends to show that your campaign material failed to contain a paid-for-by statement, section 15(10) of the MCFA requires the Department to "endeavor to correct the violation or prevent a further violation by using informal methods such

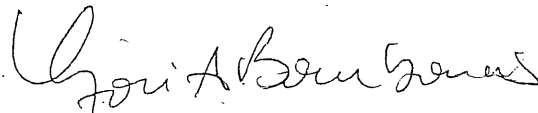
as a conference, conciliation, or persuasion [.]” Therefore, the Department is issuing this warning letter.

The Department is advising you that section 47(1) and R 169.36(2) require you to print a complete and accurate identification statement on all campaign materials, consisting of the phrase “paid for by” followed by the full name and address of your committee. Note that all printed materials that refer to an election or your candidacy produced in the future must include this identification statement.

Please be advised that this notice has served to remind you of your obligation under the Act to identify your printed matter, and may be used in future proceedings as evidence that tends to establish a knowing violation of the Act. A knowing violation is a misdemeanor offense and may merit referral to the Attorney General for enforcement action. MCL 169.247(6), 215(10).

The Department now considers this matter closed and will take no further action against you at this time.

Sincerely,

A handwritten signature in dark ink, appearing to read "Lori A. Bourbonais". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Barb Byrum