

Michigan Department of State

Campaign Finance Complaint Form
BUREAU OF ELECTIONS • RICHARD H. AUSTIN BUILDING - 1* Floor
430 W. ALLEGAN STREET • LANSING, MICHIGAN 48918

2019 BET 24 PM 2: 00

This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (MCFA). For instructions on how to complete this form, see the Campaign Finance Complaint Guidebook & Procedures document. All spaces are required unless otherwise indicated.

Section 1. Complainant				
Your Name		Daytime Telephone Number		
James Warner		517-962-3845		
710 4Th 5T				
	State	Zip		
Jackson	mi	49203		
Email (optional)				
Email (optional) James Warner 8907@ Xa 400.	Com			
Section 2. Alleged Violator				
Name Jevany + 1 grander Mailing Address				
Mailing Address 817 CCOPENST City TOCKSON, MAI Email (optional)				
City	State	Zip		
Jackson, Mi	Mi	49203		
Email (optional)				
Section 3. Allegations (Use additional sheets if more	space is needed.)			
Section(s) of the MCFA alleged to be violated:	26 + 37	7		
Explain how those sections were violated:				
sec arrached				
•				
Evidence included with the submission of the complaint	that supports the	e allegations:		
See arrached, Campaign Finance Graremonis				
J. C. T. C. TEOL, CYAINAIS	V) 1-101011	ive c, i schence i)		

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.

Date tion 4) certify that certain factual ethe following certification: belief, there are
certify that certain factual e the following certification:
e the following certification:
belief, there are
ied factual reasonable s are:
Date

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.

Section 6. Submission

Once completed, mail or hand deliver the complaint form with your evidence to the address below. The complaint is considered filed upon receipt by the Bureau of Elections.

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

Pre-election statement (primary)

- Report was submitted after the deadline
- Cover page item 9 does not list the date of the primary election
- Cover page does not bear candidate's signature (MCL 169.237)
- Contribution schedule errors
 - Page 1 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 1 Contribution #2 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 1 Contribution #3 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 1 Contribution #4 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 2 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 2 Contribution #1 indicates an incorrect cumulative total (MCL 169.226(e))
 - Page 2 Contribution #2 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 2 Contribution #2 does not include contributor's business address (MCL 169.226)
 - Page 2 Contribution #3 indicates a contribution from multiple individuals (MCL 169.226)
 - Page 2 Contribution #4 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 3 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - Page 3 Contribution #2 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
 - o Page 3 Contribution #2 indicates an incorrect cumulative total (MCL 169.226(e))
 - Page 3 Contribution #3 indicates a contribution from multiple individuals (MCL 169.226)
 - Page 3 Contribution #4 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))

- Page 4 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- Page 4 Contribution #3 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- Page 4 Contribution #4 indicates a contribution from multiple individuals (MCL 169.226)
- Page 5 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- Page 5 Contribution #3 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- Page 5 Contribution #3 indicates an incorrect cumulative total (MCL 169.226(e))
- Page 6 Contribution #3 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- Page 6 Contribution #3 indicates a contribution from multiple individuals (MCL 169.226)
- Page 6 Contribution #3 does not include contributor's occupation (MCL 169.226)
- Page 6 Contribution #3 does not include contributor's employer (MCL 169.226)
- Page 6 Contribution #3 does not include contributor's business address (MCL 169.226)

Expenditure schedule errors

- Page 1 Expenditure #1 does not include recipient's address (MCL 169.226(j))
- Page 1 Expenditure #2 does not include recipient's address (MCL 169.226(j))
- Page 1 Expenditure #3 does not include recipient's address (MCL 169.226(j))
- Page 1 Expenditure #5 does not include recipient's address (MCL 169.226(j))
- Page 2 Expenditure #1 does not include recipient's address (MCL 169.226(j))
- Page 2 Expenditure #2 does not include recipient's address (MCL 169.226(j))
- Page 2 Expenditure #3 does not include recipient's address (MCL 169.226(j))
- o Page 2 Expenditure #4 does not include recipient's address (MCL 169.226(j))
- Page 2 Expenditure #5 does not include recipient's address (MCL 169.226(j))
- Page 2 Expenditure #5 indicates expenditure was for a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))

Post-election statement (primary)

- Cover page item 9 does not list the date of the primary election
- Cover page does not bear candidate's signature (MCL 169.237)
- Contribution schedule errors
 - Page 1 Contribution #1 does not include contributor's street address (MCL 169.226)

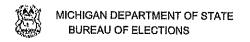
- Page 1 Contribution #1 does not include contributor's occupation (MCL 169.226)
- Page 1 Contribution #1 does not include contributor's employer (MCL 169.226)
- Page 1 Contribution #1 does not include contributor's business address (MCL 169.226)
- Page 1 Contribution #1 indicates contribution was not a direct contribution but rather was received at a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))
- In-kind contribution schedule errors
 - Page 1 Contribution #1 does not include contributor's street address (MCL 169.226)
 - Page 1 Contribution #1 does not include contributor's occupation (MCL 169.226)
 - Page 1 Contribution #1 does not include contributor's business address (MCL 169.226)
 - Page 1 Contribution #1 does not include vendor's business address (MCL 169.226(j))
- Expenditure schedule errors
 - Page 1 Expenditure #1 does not include recipient's address (MCL 169.226(j))
 - Page 1 Expenditure #2 does not include recipient's address (MCL 169.226(i))
 - Page 1 Expenditure #2 indicates expenditure was for a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	t signed by andidate.	3. This Statement covers From	^{1:} 04/05/19	to 07/21/19		
1. Committee I.D. Number	· · · · · · · · · · · · · · · · · · ·	4. Candidate Last Name		First Name	M.I.	
2019-003		Alexander	Jero	my	D	
·		4a. Office Sought Including Dis	trict # or Comm	unity Served (If applicable))	
2. Committee Name		Mayor				
Committee to Elect Jeromy Alexander for	r Mayor	4b. County of Residence JAC	KSON			
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address				
817 Cooper St Jackdon, MI 49202		Christina Alexander				
packdon, Wii 49202		1012 Rolling Green Lane				
		Lansing, MI 48917				
(547) 760 4745						
Area Code and Phone (517) 769-4745 If the address in this box is different from the comm	ittee			•		
mailing address on the Statement of Organization, be sent to this address by the filing official.	mall may	Area Code & Phone (517) 2	40-9680			
7. Treasurer's Business Address		8. Designated Record Keeper	* * * * * * * * * * * * * * * * * * * *	dress /if the committee he	p 9	
1012 Rolling Green Lane	·	Designated Record Keeper)	o Hullio alla Ac	dicas (ii the committee na	3 0	
Lansing, MI 48917						
. •						
(517) 240-9680						
Area Code and Phone (517) 240-9680		Area Code and Phone	Oc Discoluti	on of Candidate Committ		
9. TYPE OF STATEMENT		NLY if candidate	Je. Dissoluti	on or Candidate Committe	œ	
9a. Pre-Election OR 9b. Post-Election	is not on the current year	ballot for the	by the commit	ng this item i/We certify an tee to the candidate or his c	or her engues le here	
Pre-Election or Post-Election Statement relates to:	12/12/11/	•	by discharged	and forgiven, and no longe . The committee has no ou	r collectible from	
 X Primary	July Quar	lerly	owes no lates	fees or has any oustanding	debt.	
	October C	Quarterly				
General	hammed 5 5 5 5 5 5		Further, if the c	lissolution cannot be grante equest for the Reporting W	ad, that this be	
Convention		÷				
Special	9c. Annua	al Statement ()				
School		Coverage Year	Effec	ctive date of dissolution		
Caucus		dment to Campaign Statement				
		plete Item 9a, 9b, 9c or 9e to te which Statement is being		osition of residual funds m	ust be reported on	
	amend	ded.)	Schedule 1B a	and the Summary Page.		
Date of Election, Convention or Caucus				1		
10. Verification: I\We certify that all reasonable diligormy\our knowledge and belief the contents are true, or	ence was used accurate and co	In the preparation of this statement of the preparation of this statement in the preparation of the preparat	ent and attached	schedules (If any) and to	the best of	
Current Treasurer or	1 1	. 00:00	0	4/00		
Designated Record keeper Christina A Type or Print Name	<u>lexander</u>	/ Charleton U	iveyandi	er Date 7/29	1/19	
i ype oi Finit Maine		oignature				
Candidate		1		Fb . A -		
Type or Print Name		Signature		Date	ALLA CALLA C	



1. Committee I.D. Number ZUTY-UU3

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jeromy Alexander for mayor

CANDIDATE COMMITTEE		oromy / noxumed for mayor
RECEIPTS	Column I This Period	Column II
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 2,830.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$2,830.00	(18.) \$ \$2,830.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.)\$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$2,830.00	(20.) \$ \$2,830.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.)\$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,983.09	
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.) \$ \$1,983.09	(23.) \$ \$1,983.09
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	#0.00	\$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ \$0.00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$2,830.00	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$_\$2,830.00	
(Add Ilnes 9 and 11)	(16.) - \$ \$1,983.09	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$846.91	*
	V	·



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 2019-003

2.	Committee Name	Committee to Elect Jeromy Alexander for May	O

Name and address of person or vendor to whom pald	4. Purpose (Required Information)	5, Date	6. Amount
Expenditure #1			
Name Gordons Food Store	·	05/29/19	. 474.05
Address	Purpose: food for parade	Date	s <u>174.95</u>
Jackson, MI			-
	Click F	lere for Mem	o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name dirt cheap signs.com		06/18/19	. GO7 22
Address	Purpose: yard signs	Date	\$ <u>697.23</u>
online	Purpose: 3		
	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 Office Depot		06/19/19	
Address	Purpose: stationary & postage	Date	\$ <u>105.85</u>
Jackson, MI	Purpose; Stationary & postage	Date	
	Click He	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} Facebook	C	07/01/19	
Address	Purpose: advertising	Date	\$ <u>87.99</u>
online .	Purpose: dayorkioling		;
	Click He	re for Memo	Itemization Type
<u> </u>	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name GoFundMe		7104440	
Address	Purpose: fundraiser	7/01/19	\$45.53
online	Purpose:	Date	
	Click He	re for Memo	Itemization Type
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement.		
	Subtota	l this page	\$1,111.55
	Grand Total of all Sc	hedules 1B	
	(Complete on last page of		\$1,983.09

Enter this total on line 8a of Summary Page



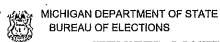
ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 2019-003

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5, Date	6. Amount
r. II. II.	, , , , , , , , , , , , , , , , , , , ,	0, 50,0	O. Altiodik
Expenditure #1			
Name Rescue Themes		04/09/19	\$ 49.99
Address	Purpose: website - wordpress	Date	
online			
	Click	. Here for Memo	Itemization Type
and the same of th	Check box if this expenditure is payment o	f	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name GoDaddy		04/11/19	
- Cobaday			\$ 36.34
Address	Purpose: domain registration	Date	
online			
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	f	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
^{Name} Vistaprint			
νισιαριπτ		04/16/19	\$311.61
Address	Purpose: advertising	Date	
online			
	 		Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	İ	v.
Fund Raiser	statement		
Expenditure #4			
Name Alexander Enterprises		04/29/19	
		Date	\$ 300.00
Address	Purpose: website hosting	Date	
817 Cooper St Jackson, MI 49202	Ottot		–
Jackson, IVII 49202			Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
^{Name} esigns.com			
	hanner	05/23/19	\$173.60
Address Online	Purpose: banner	Date	170,00
OTHER	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
·	Subte	otal this page	871.54
	Grand Total of all		
	(Complete on last pag	e of Schedule)	

Enter this total on line 8a of Summary Page



CANDIDATE COMMITTEE

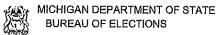
1. Committee I.D. Number 2019-

2019-003

TE COMMITTEE 2. Committee Na

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

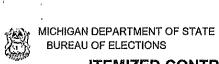
Enter contributor's nan middle initial. Check b Committee (PAC) Rep	ox to indicate if con	tribu	ibution is from an individual, enter last name, first name, tion is from a Political Committee or an Independent ardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Tim Huffman 1107 E Main St Flushing, MI 484	PAC Receipt?		YES 4. Date of Recelpt <u>04/05/19</u>	§30.00	_s 30.00
5. If over \$100.00 cum		vld	9;		
Occupation			Employer	Click Here for	or Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>04/05/19</u>		
Hassan Ahmad 2605 S St Antho Jackson, MI 492				_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cum	ulative, please pro	viđ	e:	Click Here fo	or Memo Itemization
Occupation		_ E	nployer		
Business Address					
Type of Contribution:	Direct		Loan from a person 📝 Fund Ralser	<u> </u>	
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 04/05/19		
Amanda Weber 1612 Woodbridg Jackson, MI 492				§ 10.00	_{\$} 10.00
5. If over \$100.00 cum	ulative, please pro	vid	9:	Click Here fo	r Memo Itemization
Occupation		_	Employer		
Business Address					•
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	L	YES 4. Date of Receipt <u>04/05/19</u>		
Jesse Jacques 12338 Renaud S Teumseh, Ontar		8N	1P6	§30.00	_{\$} 30.00
5. If over \$100.00 cum	ulative, please pro	vid	9 :	Cliek Horo fo	r Memo Itemization
Occupation			Employer	Click Here to	i wemo itemization
Business Address					
Туре of Contribution:	Direct	L	Loan from a person 🔽 Fund Raiser	T	
1 de			Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$90,00 Enter this total on line 3a of Summary	



CANDIDATE COMMITTEE

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 <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 04/05/19 Name & Address: Robert Tulloch 7629 Coon Hill Rd		
Munith, MI 49259	_{\$} 100.00	\$400.00
5. If over \$100.00 cumulative, please provide:	*	
Occupation retired Employer retired	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/06/19 Name & Address		
Thomas Beals 9266 Allen Rd Allen Park, MI 48101	\$ <u>200.00</u>	§ 200.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation shop Employer Ford Motor Co		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/07/19		
Name & Address: Jeff & Noi Feahr		
764 Union St	_{\$} 100.00	.100.00
Jackson, MI 49203		Ψ
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation retired Employer retired		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		2.000
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/08/19 Name & Address		
Ralph McGonegal		
205 S Sandstone Rd Jackson, MI 49201	_{\$} 100.00	° 100.00
5. If over \$100.00 cumulative, please provide:	<u> </u>	\$
Occupation Landlord Employer Self	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	*500.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 2 of 4	Ilne 3a of Summary Page.	

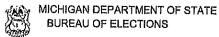


CANDIDATE COMMITTEE

1. Committee I.D. Number 2019-003

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 <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 04/08/19 Name & Address: John Henegar 1206 E North St		
Jackson, MI 49202	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:	011111111	
Occupation Employer HB Fuller	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person		•
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/10/19 Name & Address		
Tom Hillard 10130 Cooper St Pleasant Lake, MI 49272	_{\$} 150.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Landlord Employer self	Ollow Hele Ic	, Metrio Reffización
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/10/19 Name & Address:		
Chris & Mike Olds 4220 Locust lane	_{\$} 75.00	_{\$} 75.00
Jackson, MJ 49201	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 04/17/19		
Name & Address		
Steve valdez 924 Spring St Jackson, MI 49202	§30.00	_{\$_} 30.00
5. If over \$100.00 cumulative, please provide:	03.141	
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser	554 W.ID-	
Page Subtotal	\$265,00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



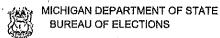
CANDIDATE COMMITTEE

1. Committee I.D. Number __

2019-003

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 04/18/19 Name & Address: lan hall		
7811 Smiths Creek Rd	400.00	400.00
Wales, MI 48027	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Robert Bosch LLC	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 04/25/19 Name & Address		
Jay Thornsberry		
1413 Waterloo St	_{\$} 200.00	_s 200.00
Jackson, MI 49202		*
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Landford Employer self		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/27/19 Name & Address:		
Susan Murdie	05.00	
224 W Wesley St	_{\$} 25.00	_{\$} 25.00
Jackson, MI 49201		Y
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 V Fund Raiser	Name of the state	
3. Contribution # 4 PAC Receipt? YES 4, Date of Receipt 04/29/19 Name & Address		
Dave & Annette ostrander		
633 Oakhill Ave Jackson, MI 49201	_{\$} 500.00	_s 500.00
5. If over \$100.00 cumulative, please provide:		Y
Occupation Landlord Employer Self	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Uniform Loan from a person Fund Raiser		
Page Subtote	\$825.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule	Enter this total on	
Page 4 of 6	line 3a of Summary Page.	

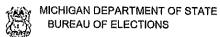


CANDIDATE COMMITTEE

Page.

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

Enter contributor's name and address. If contribution is from an individual, entemiddle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report <u>all</u> contributions regardless of amount.	er 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 PAC Receipt? YES 4. Date of Receipt Name & Address: Bob Kokoczka 1030 Williams St Jackson, MI 49203	04/30/19	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		Click Hora to	r Memo Itemization
OccupationEmployer		Click Here to	r iviento itemization
Business Address	· · · · · · · · · · · · · · · · · · ·		
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt (Name & Address)5/08/19		
Sarah Arnold 2214 E Ganson St Jackson, MI 49202		§50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt Name & Address: Robert Tulloch 76929 Coon Hill Rd Munith, MI 49259	05/09/19	\$ 100.00	\$200.00
5. If over \$100.00 cumulative, please provide:		Click Here for	iviemo itemization
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 Name & Address Tom Hillard 10130 Cooper St Pleasant Lake, MI 49272	05/10/19	_{\$} 250.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	e.	Click Here for	Memo Itemization
Occupation landlord Employer self			
Business Address			•
	und Raiser		
	Page Subtotal	450.00	
	Total of All Schedules 1A on last page of Schedule)	Enter this total on	
5 <i>L</i>		line 3a of Summary	



CANDIDATE COMMITTEE

2 Committee Name Committee to Elect Jeromy Alexander for Mayor

	AITOIDAIL	<u> </u>	\1811A13 1 1 1" 1"		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.					nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/12/19 Name & Address: Michael Wisniewski 1406 Locust St Jackson, MI 49203						_s 100.00	_{\$} 100.00	
5. If over \$100.00 cum Occupation landlord		ovle 	de: Employer_self			Click Here for Memo Itemization		
Business Address Type of Contribution:	✓ Direct		Loan from a person	П	Fund Ralser			
3. Contribution #2 Name & Address	PAC Recelpt?		YES 4. Date of F	Receipt	06/19/19	C 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1		
Tom Hillard 10130 Cooper S Pleasant Lake, I						<u>\$ 100.00</u>	_{\$} 500.00	
5. If over \$100.00 cum _{Occupation} landlord			e: _{mployer} self			Click Here for	Memo Itemization	
Business Address						•		
Type of Contribution:	Direct		Loan from a person		Fund Raiser		,	
3. Contribution #3 Name & Address: Beth & Al Thorre	PAC Receipt?		YES 4. Date of i	Recelp	^t 06/23/19	§ 500.00	§ 500.00	
5. If over \$100.00 cum	ulative, please pro	vld	e:			Click Here for	Memo Itemization	
Occupation		-	Employer					
Business Address	Direct							
Type of Contribution:			Loan from a person	<u> </u>	Fund Raiser			
3. Contribution # 4 Name & Address	PAC Receipt?	L	YES 4. Date of	Recelp	ot			
5. If over \$100.00 cum	ilativa nlasca nro	.uld				\$	\$	
	rigited, hiedae hit	VIU				Click Here for	Memo Itemization	
Occupation		-	Employer				Laborated 1	
Business Address								
Type of Contribution:	Direct		Loan from a person		Fund Ralser			
The second secon	American Company of the Company of t			and the state of t	Page Subtotal	\$700.00	,	
			15	Gran	d Total of All Schedules 1A	\$2,830.00		
Page 6 of 6	·		(C	vou ihi6i	te on last page of Schedule)	Enter this total on line 3a of Summary Page.	1	



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

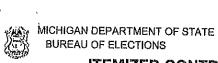
Report must be legible, typed or printed in ink a the treasurer (or designated record keeper) and	3. This Statement covers Fro	m: 07/22/10	08/06/40				
1. Committee I.D. Number		4. Candidate Last Name		to 08/26/19			
2019-003		Alexander	Jeron		M.I. D		
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)					
Committee to Elect Jeromy Alexander for	or Mayor	4b. County of Residence JA					
5. Committee's Mailing Address	-,	1		<u> </u>			
817 Cooper St		6. Treasurer's Name & Residential Address Christina Alexander					
Jackson, MI 49202		1012 Rolling Green	Lane				
		Lansing, MI 48917					
Area Code and Phone (517) 769-4745 If the address in this box is different from the com-							
mailing address in this pox is different from the commailing address on the Statement of Organization be sent to this address by the filing official.	mittee , mail may	Area Code & Phone (517)	240-9680				
7. Treasurer's Business Address	_	8. Designated Record Keepe	r's Name and Add	ress (If the committee	has a		
1012 Rolling Green Lane		Designated Record Keeper)		(** **** * ***************************			
Lansing, MI 48917			•				
·							
Area Code and Phone (517) 240-9680		Area Code and Phone					
9. TYPE OF STATEMENT			9e, Dissolution	of Candidate Comm	ittee		
9a. Pre-Election OR 9b. Post-Election	Is not on the current year:		By checking	this item I/We certify a	any outstanding debt s or her spouse is here		
Pre-Election or Post-Election Statement relates to:			TOV discharded an	nd forgiven, and no long The committee has no	gar collactible from		
X. Primary	July Quarte	əriy	owes no lates fee	es or has any oustandir	oustanding assets, ng debt.		
General	October Q	uarterly	Further if the disc	eclution cannot be are	atad that this ha		
Convention			Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Walver.				
Special	9c	Statement ()					
School	IIIII MIII Wa	Coverage Year	Effective date of dissolution				
Caucus	9d. Amend	lment to Campaign Statement					
	(Comp	lete item 9a, 9b, 9c or 9e to e which Statement is being	Note: The disposition of residual funds must be reported or				
	amend		Schedule 1B and	the Summary Page.	The Politica off		
Date of Election, Convention or Caucus							
- And Andrews -					-		
,							
Verification: I\We certify that all reasonable diligency\our knowledge and bellef the contents are true, and the contents are true, and the contents are true, and the contents are true.	l ence was used in accurate and cor	n the preparation of this stateme	ent and attached so	chedules (if any) and to	the best of		
Current Treasurer or Christina Alox			, 1				
Designated Record keeper Type or Print Name	Adi lubi	Chellina (10	Lyande	/L Date9/	5/19		
Type of Flint Name		Signature	1				
Candidate		1					
Type or Print Name		Signature		Date			
A							

1. Committee I.D. Number 2019-003

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

CANDIDATE COMMITTEE		
RECEIPTS 3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 200.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$200.00	(18.) \$ \$3,030.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$200.00	(20.) \$ \$3,030.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$445.40	(21.) \$ \$445.40
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES	•	
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$256.10	
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.) \$ \$256.10	(23.) \$ \$2,239.19
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ \$0.00	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.) \$_\$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$ 0.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	### ### ##############################	*



CANDIDATE COMMITTEE

1. Committee I.D. Number ______2019-003

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

Committee (PAC) Rep	iox to indicate if co	contribution is from an Ind ntribution is from a Politica s regardless of amount.	ividual, I Comm	enter last name, first name, littee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: John Domin	PAC Receipt	YES 4, Date	of Rece	lpt 08/01/19		
GoFundMe don	ation				_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cum	ıulative, please pr	ovide:				W. W
Occupation	·	Employer			Click Here for	or Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	6	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	f Recei	pt		<u> </u>
					\$	\$
5. If over \$100.00 cum	ulative, please pro	ovide:			Click Horo fo	r Memo Itemization
Occupation					Olick Hele Io	i wemo itemization
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
. Contribution # 3 lame & Address:	PAC Receipt?	YES 4. Date of	of Recei			
					\$	\$
i. If over \$100.00 cumu	ilative, please pro	vide:			Click Here for	Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
. Contribution # 4 ame & Address	PAC Receipt?	YES 4. Date of	f Recei	pt		
					\$	\$
. If over \$180.00 cumu	lative, please pro-	vide:				
					Click Here for	Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
				Page Subtotal	\$200.00	
			Gran	nd Total of All Schedules 1A	\$200.00	
		(Comple	te on last page of Schedule)	Enter this total a	

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS **SCHEDULE 1-IK**

1. Committee I. D. Number 2019-003

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 (Throug date in Item 5) 8. Cumulative for Election Cycle (Throug date in Item 5) 8. Cumulative for Election Cycle (Throug date in Item 5) 8. Cumulative for Election Cycle (Throug date in Item 5)			• •		Commissible a fee E	1		
Solidade Contribution Face Contribution Solidade Contribution Contribution Solidade Contribution Contribution Solidade Contribution Contributi		CANDIDATE COM		2. Committee Name	V	lect Je	romy Alexand	er for Mayor
Name & Address: Goods Donated or Loaned Services Donated \$445.40 \$	is from a Political (Committee (Both a	box to indicate if contribution Committee or an independent are commonly called PACs).	5. Date of Red 6. Name & Ad	ceipt		3 were	Fair Market	8. Cumulative for Election Cycle (Throug date in Item 6
Fover \$100.00 cumulative, please provide: Description E-shirts Description E-shirts Description E-shirts Description Descrip	Name & Address:	Lane, med	Goods Do	onated or Loaned 5	Services Donated andidate or Others	Ψ	445.40	_{\$} 445.40
Malachi Printing 6. Vendor Name & Address: Malachi Printing Click Here for Memo Itemization Fund Raiser Contribution	Occupation:		Description t-	shirts	andreade of Others- L			
Contribution # 2 Name & Address PAC Receipt?			6. Vendor Na	ıme & Address:		Clic	ok Here for Memo	Itemization
Name & Address Goods Onated or Loaned Services Donated	Fund Ralser C	Contribution						
Cocupation: Employer Name & Address: 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization Contribution Pund Raiser Contribution Contribution #3 PAC Receipt? Yes 4. Endorsement or Guarantee of Bank Loan Name & Address: Goods Donated or Loaned Services Donated Services Donated Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN If over \$100.00 cumulative, please provide: Description Employer Name & Address: 6. Vendor Name & Address: Click Here for Memo Itemization		PAC Recelpt? Tyes	Goods Do	onated or Loaned Se Services Purchased by Ca	ervices Donated andidate or Others			\$
Employer Name & Address: G. Vendor Name & Address: Click Here for Memo Itemization Fund Raiser Contribution Fund Raiser Contribution #3	if over \$100,00 cu Occupation:	mulative, please provide:						
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes A. Endorsement or Guarantee of Bank Loan Name & Address: Goods Donated or Loaned Services Donated \$ Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN If over \$100.00 cumulative, please provide: Occupation: 5. Date Of Receipt: Employer Name & Address: 6. Vendor Name & Address: Click Here for Memo Itemization	Employer Name &	Address:						
Contribution #3 PAC Receipt? Yes 4. Endorsement or Guarantee of Bank Loan Name & Address: Goods Donated or Loaned Services Donated \$						Click	k Here for Memo	Itemization
Name & Address: Goods Donated or Loaned Services Donated \$\$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	Fund Raiser Co	ntribution						
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization		PAC Recelpt? Yes	Goods Don	nated or Loaned Sen ervices Purchased by Car	vices Donated	· 		ß
6. Vendor Name & Address: Click Here for Memo Itemization Fund Raiser Contribution		ıulative, please provide:						
	Employer Name & A					Click	Here for Memo I	temization
Page Subtotal \$445 40	Fund Ralser Con	tribution						
					Page Su	btotal	\$445.40	

Enter this total on line 6 of Summary Page

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) \$445.40

Page 1 of 1



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 2019-003

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

Name and address of person or vendor to whom paid	4 Dunger (Sandalla)		
Expenditure #1	4. Purpose (Required Information)	5. Date	6. Amount
Name Facebook			
		08/07/19	s 250.00
Address Online	Purpose: Advertising	Date	
Offilite	Click	Here for Mer	no Itemization Type
	Check box if this expenditure is payment of		The internation (year
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name GoFundMe		08/01/19	
Address	fundraising	Date	- \$ <u>6.10</u>
Online	Purpose: fundraising	Dato	
	Click I	lere for Mem	no Itemization Type
_	Check box if this expenditure is payment of		·· ,
Fund Ralser	debt or obligation reported on previous statement		
Expenditure #3	Securion		-
Name			
Address			_ \$
	Purpose:	Date	
	Click H	ere for Memo	o Itemization Type
□ .	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4 Name			
NGI NO			
Address	Burney	Date	\$
	Purpose:		
	Click He	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
expenditure #5		· · · · · · · · · · · · · · · · · · ·	
Name			
Address	Purpose:	Date	\$
	i diposo,	Date	
	Click He Check box if this expenditure is payment of	re for Memo	Itemization Type
Fund Ralser	debt or obligation reported on previous		
	statement		
	Subtotal	l this page	\$256.10
	Grand Total of all Sci	hedules 1B	\$256.10
	(Complete on last page o	i ਕchedule)	Ψ <u></u>

Enter this total on line 8a of Summary Page



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

November 5, 2019

Jeromy Alexander 817 Cooper Street Jackson, Michigan 49203

Re:

Warner v. Alexander

Campaign Finance Complaint

No. 2018-08-48-26

Dear Mr. Alexander:

The Department of State (Department) received a formal complaint filed by James Warner against you alleging that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq*. A copy of the complaint and supporting documentation is enclosed with this letter.

Mr. Warner filed his complaint with the Department on October 24, 2019 and alleges various contributions schedule, expenditure schedule, fundraising schedule, and in-kind contribution schedule errors to the August Pre-Primary and Post-Primary reports and that you as the candidate have failed to sign the reports.

The MCFA requires candidates and committees file contributions and expenditures with the appropriate filing official by specific dates. MCL 169.233(1) – (3). The MCFA requires a committee that receives or expends more than \$1,000 during any election to file campaign finance reports in compliance with the Act. MCL 169.233(6). Section 26 of the Act details the requirements of each report required to be filed including the disclosure requirements for contributions and expenditures. MCL 169.226. Section 37 requires the candidate to sign all submitted reports attesting to the accuracy of the report. MCL 169.237. A person who knowingly omits or underreports expenditures required to be disclosed by the Act is subject to a civil fine of not more than \$1,000 or the amount of the expenditures omitted or underreported, whichever is greater. MCL 169.233(11).

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. The investigation and resolution of this complaint is governed by section 15 of the Act and the corresponding administrative rules, R 169.51 et seq. An explanation of the investigation process is enclosed with this letter and a copy is available on the Department's website.

Jeromy Alexander November 5, 2019 Page 2

If you wish to file a written response to this complaint, you are required to do so within 15 business days of the date of this letter. 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 answer will be provided to Mr. Warner, 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 penalty provided in section 33(11) of the Act.

If you have any questions concerning this matter, you may contact me at (517) 335-3234.

// /

Adam/Fracassi

Michigan Department of State

c: James Warner

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

RE: Warner vs Alexander

Waitlet VS Michallaci

Campaign Finance Complaint

No. 2018-08-48-26

To Who It May Concern,

I have received a copy of the complaint filed with the Bureau of Elections concerning several violation errors and am filing my written response by addressing the majority of the complaints.

I would like to extend my thanks to Mr. Warner for his diligent oversight of a public official.

The majority of the filing errors seem to be due to the fundraiser box being checked for GoFundMe donations received. This was a misunderstanding on the part of my campaign Treasurer, as it was not a physical fundraiser but donations were given directly to the campaign thru a fundraising website. The second most common error was missing addresses of the online vendor expenses without physical business locations. We have now realized that we need to include the corporate headquarters address for those vendors and will do so going forward.

To note: there were no omissions or underreporting of contributions or expenses – in fact, all of the contributions and expenses amounts were recorded correctly; the errors were clerical in nature.

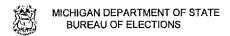
I have enclosed new amended copies of the August Pre-Primary and Post-Primary reports with the necessary corrections. I hope that this satisfies the complaint at hand.

Thank you for your consideration on this,

Jeromy Alexander 817 Cooper Street

Jackson, MI 49202

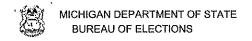
517-769-4745



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and co	signed by	3. This Statement covers From	: to			
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.		
		Alexander Jeromy				
			trict # or Community Served (If applicable)			
2. Committee Name		,	,			
		4b. County of Residence JAC	KSON	2-3		
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address	V32		
817 Cooper St		Christina Alexander				
Jackson, MI 49202		1870 Olympia Dr		70		
		Howell, MI 48843		1		
Area Code and Phone (517) 769-4745 If the address in this box is different from the comm			·			
If the address in this box is different from the comm mailing address on the Statement of Organization, is	ittee nail mav	/E / T\ 0	40.000			
be sent to this address by the filing official.		Area Code & Phone (517) 2	40-9680			
7. Treasurer's Business Address		8. Designated Record Keeper	's Name and Address (If the committee has a	U 05		
1870 Olympia Dr		Designated Record Keeper)				
Howell, MI 48843						
,						
(547) 240 0690						
Area Code and Phone (517) 240-9680		Area Code and Phone		·		
9. TYPE OF STATEMENT	Required Oh	LY if candidate	9e. Dissolution of Candidate Committee			
9a. Pre-Election OR 9b. Post-Election	is not on the current year:	ballot for the	By checking this item I/We certify any c by the committee to the candidate or his or	her snouse is here		
Pre-Election or Post-Election Statement relates to:		. 4	by discharged and forgiven, and no longer of the committee. The committee has no oust	collectible from anding assets.		
Primary	July Quart	eny	owes no lates fees or has any oustanding de			
General	October Q	uarterly	Further, if the dissolution cannot be granted,	. that this be		
Convention			considered a request for the Reporting Walv	er.		
☐ Special	9c. Annua	il Statement ()				
School		Coverage Year	Effective date of dissolution			
Caucus		dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to				
·		te which Statement is being	Note: The disposition of residual funds mus	t be reported on		
	amend	led.)	Schedule 1B and the Summary Page.			
Date of Election, Convention or Caucus						
11.5-19						
		·				
10. Verification: I/We certify that all reasonable diligramy/our knowledge and belief the contents are true, or	ence was used accurate and co	in the preparation of this statement of the preparation of this statement in the preparation of the preparat	ent and attached schedules (if any) and to the	e best of		
Current Treasurer or Designated Record keeper Chaiston Ale	سره لم م	alint an.	James A. E.	_10		
Type or Print Name Signature Date						
A1	1			g		
Candidate Jeromy Alexano	ev	1 / 1	Date 11-26	,-19		
Type or Print Name		Signature (1	and the state of t			

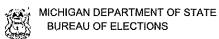


1. Committee I.D. Number 2019-003

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

SUMMARY PAGE CANDIDATE COMMITTEE

CANDIDATE COMMITTEE	2. Committee Name Committee to Lite	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 200.00	_
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$ \$200.00	(18.) \$ \$3,030.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$200.00	(20.) \$ \$3,030.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$445.40</u>	_ (21.) \$ \$445.40
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	_ (22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$256.10	
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.) \$ \$256.10	(23.) \$ \$256.10
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	_
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		- to 00
DEBTS AND OBLIGATIONS	(11.) \$ \$0.00	\$0.00
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$_\$0.00	_
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
A. A	BALANCE STATEMENT	'
13. Ending Balance of last report filed	(13.) <u>\$</u> \$846.91	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$200.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$1,046.91	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period		
(Add lines 9 and 11)	_{(16.) - \$} \$256.10	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$790.81	*
(outside in to not into to)	1.77 Y	· .



CANDIDATE COMMITTEE

1. Committee I.D. Number

2019-003

2. Committee Name

Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution is f Committee (PAC) Report all contributions regardless	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 PAC Receipt? YES Name & Address: John Domin 2393 Spencer Dr Jackson, MI 49202	4. Date of Receip	08/01/19	_{\$} 200.00	°200.00
5. If over \$100.00 cumulative, please provide:			Ψ	\$
Occupation retired Employ	or		Click Here fo	or Memo Itemization
	ei			
Business Address Type of Contribution: Direct Loan f				
	rom a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES Name & Address	Date of Receipt			
			\$	\$
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution: Direct Loan fr	om a person	Fund Raiser	rá.	
3. Contribution #3 PAC Receipt? YES	4. Date of Receip	t		
Name & Address:				
			\$	
			Φ	\$ <u></u>
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
	مو			
Occupation Employe Business Address				
	om a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES				
Name & Address	,, = 110 o			
			\$	\$
E. Marian 6400.00 arrandative relative				Ψ
5. If over \$100.00 cumulative, please provide:		•	Click Here for	Memo Itemization
Occupation Empl	oyer	***************************************		
Business Address				:
	om a person	Fund Raiser		
		Page Subtotal	\$200.00	
	Gran	d Total of All Schedules 1A	\$200.00	
		te on last page of Schedule)	Enter this total on]
Page of			line 3a of Summary Page.	



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2019-003

OUINEDULE I'II		-	
CANDIDATE COMN	11TTEE 2. Committee Name Committee to Elec	ct Jeromy Alexande	∍r for Mayor
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). Reportall 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 w purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Derek Fankhauser 228 W Wilkins St	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	_{\$} 445.40	_{\$} 445.40
Jackosn, MI 49202 If over \$100.00 cumulative, please provide: Occupation: Printer	Description t-shirts 5. Date Of Receipt: 09/05/19	AN 	
Employer Name & Business Address: Malachi Printing 144 E Prospect St Jackson, MI 49202 Fund Raiser Contribution	6. Vendor Name & Address: Malachi Printing 444 E Prospect St Jackson, MI 49202	Click Here for Memo	Itemization
Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LO Description 5. Date Of Receipt:		\$
	6. Vendor Name & Address:	Click Here for Memo	Itemization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others LOA		β
f over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	Click Here for Memo	ltemization

Page Subtotal

\$445.40

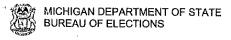
\$445.40

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

\$445.40

Enter this total on line 6 of Summary Page

Fund Raiser Contribution



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 2019-003

2. Committee Name	Committee to Elect Jeromy Alexander for Mayor

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Facebook		08/07/19	\$ 250.00
Address	Purpose: advertising	Date	\$ <u>230.00</u>
1 Hacker Way			
Menlo Park, CA 94025	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name GoFundMe		08/01/19	6.6.10
Address	Purpose: donation fees	Date	\$ <u>6.10</u>
855 Jefferson Ave	Tulpose,		
Redwood City, CA 94063	Click I	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			
Address	Purpose:	Date	\$
	Click F	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	ioro ior memo	Retrization Type
	statement		
Expenditure #4			
Name			
Address	Purpose:	Date	\$
	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of	-1-1-1-111211,0	nonazanon (ypo
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtot	al this page	\$256.10
	Grand Total of all S (Complete on last page	chedules 1B of Schedule)	\$256.10

Enter this total on line 8a of Summary Page

1 1 Page ____ of ___



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

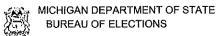
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	3. This Statement covers From:	to	
1. Committee I.D. Number		Candidate Last Name	First Name	M.I.
		Alexander	Jeromy	
		4a. Office Sought Including Dist	irict # or Community Served (if applicable)
2. Committee Name				r_1 CD
				G.
		4b. County of Residence JAC		
5. Committee's Mailing Address		6. Treasurer's Name & Resider	ntial Address	% 2 1
817 Cooper St Jackson, MI 49202		Christina Alexander 1870 Olympia Dr		F"
Dackson, Wi 40202		Howell, MI 48843		111
		THOWON, INT. HOUSE		Ö
(517) 760 4746				
Area Code and Phone (517) 769-4745 If the address in this box is different from the commi	Ittee			§ 8
mailing address on the Statement of Organization, to be sent to this address by the filing official.	nail may	Area Code & Phone (517) 24	40-9680	î.
7. Treasurer's Business Address			s Name and Address (If the committee ha	ıs a
1870 Olympia Dr		Designated Record Keeper)		
Howell, MI 48843				
,				
Area Code and Phase (517), 240-9680				
Area code and Frione C. /		Area Code and Phone	9e. Dissolution of Candidate Commit	tee
9. TYPE OF STATEMENT	Required Of	ILY if candidate		
9a. Pre-Election OR 9b. Post-Election	is not on the current year:		By checking this item i/We certify ar	or her spouse is here
Pre-Election or Post-Election Statement relates to:			by discharged and forgiven, and no long the committee. The committee has no o	er collectible from ustanding assets.
Primary	July Quart	erly	owes no lates fees or has any oustanding	
	October C	uarterly		
General			Further, if the dissolution cannot be grant considered a request for the Reporting W	led, that this be Valver,
Convention				
Special	9c. Annua	l Statement ()	Effective date of dissolution	
School		Coverage Year	Checuse date of dissolution	
Caucus		dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to		
<u> </u>	indica	te which Statement is being	Note: The disposition of residual funds n	nust be reported on
	amend	ied.)	Schedule 18 and the Summary Page.	
Date of Election, Convention or Caucus				
8-10-19				
10. Verification: IVWe certify that all reasonable dilig my\our knowledge and belief the contents are true;	ence was used accurate and c	in the preparation of this statement implete.	ent and attached schedules (if any) and to	the best of
Current Treasurer or		innin Or	1 1 -/-	
Designated Record keeper MICHIOCH	le V ander	1 (Kestin U	Ceyander Bate 7/29	119
Type or Print Name	,	Signature	1	
Candidate Jeromy Alexano	lev	1 1	Date 11/20	119
Type or Print Name		Signature	The same of the sa	

1. Committee I.D. Number 2019-003

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		- 1/1.4.1.1.1.7.5 Kill 1/10.1.1.1.7.5, 4.1.5
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 2,830.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$2,830.00	(18.) \$ \$2,830.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$2,830.00	(20.) \$ \$2,830.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,983.09	
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.) \$ \$1,983.09	(23.) \$ \$1,983.09
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	-
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.)\$ \$0.00	· .
(Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$0.00	-
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	### ### ##############################	*



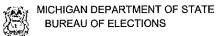
CANDIDATE COMMITTEE

1. Committee I.D. Number _

2019-003

2. Committee Name

Enter contributor's name and admiddle initial. Check box to indicommittee (PAC) Report all co	icate if contributi	on is from a Political Com		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Name & Address: Tim Huffman 1107 E Main St	C Receipt?	YES 4. Date of Red	pelpt 04/05/19		00.00
Flushing, MI 48433				_{\$} 30.00	_{\$} 30.00
5. If over \$100.00 cumulative,	please provide:	:			
Occupation	E	mployer		Click Here to	or Memo Itemization
Business Address					
Type of Contribution: Dire	ct	Loan from a person	Fund Raiser		
Contribution #2 PAC Name & Address			04/05/19		ималиянтичникалияния одинентичного одинентичного одинентичного одинентичного одинентичного одинентичного одине
Hassan Ahmad 2605 S St Anthony St Jackson, MI 49203	<u>:</u>			§20.00	§ 20.00
5. If over \$100.00 cumulative,	please provide:	:		Click Here fo	or Memo Itemization
Occupation	Em	ployer			
Business Address					
Type of Contribution: Direct	et 🔲 L	oan from a person	Fund Raiser		
3. Contribution # 3 PAC Name & Address:	Receipt?	YES 4. Date of Re	^{ceipt} 04/05/19		
Amanda Weber 1612 Woodbridge St Jackson, MI 49203				_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative,	please provide:	:		Click Here fo	r Memo Itemization
Occupation					
Business Address					
Type of Contribution: V Direct	ct	Loan from a person	Fund Raiser		
Contribution # 4 PAC Name & Address	Receipt?	YES 4. Date of Re	eceipt <u>04/05/19</u>	•	
Jesse Jacques 12338 Renaud St Tecmseh, Ontario Cal	nada N8N	1P6		_{\$} 30.00	_{\$} 30.00
5. If over \$100.00 cumulative,				Ollafoldono	u 8.4
Occupation		Employer		Click Here to	r Memo Itemization
Business Address					
Type of Contribution: Dire	ect	Loan from a person	Fund Raiser		
1 6			Page Subtotal Grand Total of All Schedules 1A nplete on last page of Schedule)	\$90.00 Enter this total on line 3a of Summary	
Page of				Page.	



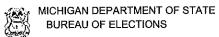
CANDIDATE COMMITTEE

1. Committee I.D. Number _

2019-003

2. Committee Name

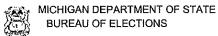
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/05/19 Name & Address: Robert Tulloch 7629 Coon Hill Rd Munith, MI 49259	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation retired Employer	Click Here to	I Wello Reilizadoli
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/06/19 Name & Address		
Thomas Beals 9266 Allen Rd Allen Park, MI 48101	§ 200.00	<u>\$</u> 200.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation shop Employer Ford Motor Co		
Business Address 1 American Rd, Dearborn, MI 48126		
Type of Contribution: Direct Loan from a person Fund Raiser		
President of the control of the cont		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/07/19 Name & Address:		
Jeff Feahr	_s 100.00	100.00
764 Union St	\$ 100.00	_{\$} 100.00
Jackson, MI 49203	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 04/08/19 Name & Address		
Ralph Mc Gonegal 205 S Sandstone Rd Jackson, MI 49201	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Landlord Employer Self	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$500.00	
Grand Total of All Schedules 1A		•
(Complete on last page of Schedule)	Enter this total on	j
Page 2 of 6	line 3a of Summary Page.	



CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's nar middle initial. Check b Committee (PAC) Rep	ox to indicate if conti	ribution is from	a Political Com		iter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: John Henegar 1206 E North S	PAC Receipt?	YES	4, Date of Re	ceipt	04/08/19		
Jackson, MI 492						_s 10.00	ູ 10.00
•		utala .				J	4
5. If over \$100.00 cun						Click Here fo	or Memo Itemization
Occupation		_ Employer_					
Business Address				$\overline{}$			
Type of Contribution:	Direct	Loan from			Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Re	ceipt	04/10/19		
Tom Hillard 10130 Cooper S Pleasant Lake,						_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cum	ulative, piease pro	vide:				Click Here fo	or Memo Itemization
Occupation Landlo		Employer_S	elf				
Business Address							
Type of Contribution:	✓ Direct	Loan from	a person		Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of Re	eceip	^t 04/07/19		
Chris Olds 4220 Locust Av Jackson, MI 49						_{\$} 75.00	_{\$} 75.00
5. If over \$100.00 cun		viđe:				Click Here for	r Memo Itemization
Occupation		_ Employer_					
Business Address							
Type of Contribution:			n a person		Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of R	leceip	ot 04/08/19		
Steve Valdez 924 Spring St Jackson, MI 492	202					§30.00	_{\$} _30.00
5. If over \$100.00 cun	nulative, please pro	vide:				0.1.1.	na na an
Occupation Landlo		_ Employe	_{er} <u>self</u>			Click Here for	r Memo Itemization
Business Address							
Type of Contribution:	✓ Direct	Loan fron	n a person	П	Fund Raiser		
	-				Page Subtotal	\$265.00	
			(Co		nd Total of All Schedules 1A ete on last page of Schedule)		
36	_				·	Enter this total on line 3a of Summary Page.	



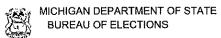
CANDIDATE COMMITTEE

1. Committee I.D. Number

2019-003

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 04/18/19 Name & Address: Ian Hall 7811 Smiths Creek Rd		
Wales, MI 48027	_{\$} 100.00	ູ 100.00
5. If over \$100.00 cumulative, please provide:	Φ	Ψ
Occupation machinist Employer Robert Bosch LLC	Click Here fo	or Memo Itemization
Business Address 28875 Cabot Dr, Novi, MI 48377		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/25/19 Name & Address		
Jay Thornsberry 1413 Waterloo St Jackson, MI 49202	§ 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Landlord Employer self		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/27/19 Name & Address:		
Susan Murdie 224 W Wesley St Jackson, MI 49201	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r 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 04/29/19 Name & Address	<u>kita in dia dia dia dia dia dia dia dia dia dia</u>	
Annette Ostrander 633 Oakhill Ave Jackson, MI 49201	_{\$} 500.00	_{\$} _500.00
5. If over \$100.00 cumulative, please provide:	Click Horo for	r Memo Itemization
Occupation Landlord Employer Self	Click Here to	wemo nemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$825.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 4 of 6	line 3a of Summary Page.	

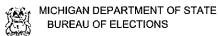


CANDIDATE COMMITTEE

1. Committee I.D. Number 2019-003

2. Committee Name

	ox to indicate if cont	tribution is from a Polit	lical Commi	enter last name, first name, ittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Bob Kokoczka 1030 Williams S Jackson, MI 49		YES 4. Da	ite of Recei	pt <u>04/30/19</u>	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cur	nulative, please pro	ovide:			Click Hara f	or Memo Itemization
Occupation	***************************************	Employer			Click Here i	or Memo Remization
Business Address						
Type of Contribution:	✓ Direct	Loan from a pers	son	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Da	te of Recei	pt 05/08/19	***	
Sarah Arnold 2214 E Gansor Jackson, MI 49					_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cun	nulative, please pro	ovide:		4	Click Here f	or Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	✓ Direct	Loan from a pers	on _	Fund Raiser		
3. Contribution # 3	PAC Receipt?	YES 4. Da	ate of Rece	eipt 05/09/19		
Name & Address: Robert Tulloch 76929 Coon Hi Munith, MI 492					<u>\$ 100.00</u>	_{\$} 200.00
5. If over \$100.00 cun	nulative, please pro	ovide:			Click Here fo	or Memo Itemization
Occupation retired	****	Employer				
Business Address						
Type of Contribution:	Direct	Loan from a pers	son	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. D	ate of Rec	eipt <u>04/29/19</u>		
Tom Hillard 10130 Cooper S Pleasant Lake,					_{\$} 250.00	\$_400.00
5. If over \$100.00 cur	nulative, please pro	ovide:			Clink Hara fo	or Memo Itemization
Occupation Landle	ord	Employer <u>Sel</u>	f		Click Here IC	o wemo nemization
Business Address						
Type of Contribution:	✓ Direct	Loan from a pers	son	Fund Raiser		
				Page Subtotal	\$450.00	
				and Total of All Schedules 1A plete on last page of Schedule)	Fator this test	
Page 5 of 6	_				Enter this total on line 3a of Summar Page.	у



Page 6 of 6

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number ______2019-003

line 3a of Summary

Page.

CANDIDATE COMMITTEE 2. Committee Name	committee to Elect Jeror	ny Alexander for Mayor
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 06/12/19 Name & Address: Bob Kokoczka 1030 Williams St Jackson, MI 49203		_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	O" 1 1 1 5	* * * * * * * * * * * * * * * * * * *
Occupation Iandlord Employer self	Click Here to	r Memo Itemization
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/19/19 Name & Address		
Tom Hillard 10130 Cooper St Pleasant Lake, MI 49272	<u>\$ 100.00</u>	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Iandlord Employer Self		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/09/19 Name & Address:		
Beth Thorrez 6125 River View Dr Jackson, MI 49203	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation homemaker Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	_	Wolfie Romization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtr	otal \$700.00	
Grand Total of All Schedules		
(Complete on last page of Schedu	le) Enter this total on	J



ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number 2019-003

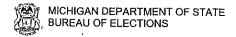
OALIDIDATE COMMITTEE	2 Committee Name Committee to Elect Jeromy Alexander for Mayor				
CANDIDATE COMMITTEE 2.	2. Committee Name				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount		
Expenditure #1					
Name Rescue Themes		04/09/19	\$ 49.99		
Address	Purpose: website-wordpress	Date			
3420 Pump Rd H304		. Here for Memo	Itemization Type		
Richmond, VA 23233			nonization Type		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f			
Expenditure #2					
Name GoDaddy	1	04/11/19	s 36.34		
Address	Purpose: domain registration	Date	\$ <u>50.54</u>		
14455 North Hayden Rd Suite 219 Scottsdale, AZ 85260	Click	Here for Memo	Itemization Type		
	Check box if this expenditure is payment of	of			
Fund Raiser	debt or obligation reported on previous statement				
Expenditure #3					
Name Vistaprint		04/16/19	\$311.61		
Address	Purpose: advertising	Date			
275 Wyman St	Click	Here for Memo	Itemization Type		
Waltham, MA 02451-1200	Check box if this expenditure is payment of		,,,		
Fund Raiser	debt or obligation reported on previous	•			
Expenditure #4	statement				
Name Alexander Enterprises		0.4/00/40			
Alexander Enterprises		04/29/19 Data	\$ 300.00		
Address	Purpose: website hosting	Date	we's made above to a manufacture to the form of the same of the sa		
817 Cooper St	Cliate	Ware for Mome	Itomization Tuno		
Jackson, MI 49202			Itemization Type		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	ıf			
Expenditure #5		***			
^{Name} esigns.com		05/23/19			
Address	Purpose: banner	Date	\$ <u>173.60</u>		
7729 Lochlin Dr	ruipose				
Brighton, MI 48116	p		Itemization Type		
	Check box if this expenditure is payment of debt or obligation reported on previous	1			
Fund Raiser	statement				

Subtotal this page

\$871.54

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

1. Committee I. D. Number 2019-003

CANDIDATE COMMITTEE Committee to Elect Jeromy Alexander for Mayor 2. Committee Name 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 Name Gordon's Food Store 05/29/19 \$ 174.95 food for parade 1507 Boardman Rd Click Here for Memo Itemization Type Jackson, MI 49202 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name dirt cheap signs.com \$697.23 Purpose: yard signs Address 7301 Bar K Ranch Click Here for Memo Itemization Type Logo Vista, TX 78645 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name Office Depot 06/19/19 \$ 105.85 Purpose: stationary & postage Address Date 1515 Boardman Rd Jackson, MI 4*9202 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Facebook 07/01/19 \$87.99 Purpose: advertising Address 1 Hacker Way Menlo Park, CA 94025 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name GoFundMe 07/01/19 \$45.53 Purpose: donation fees Address 855 Jefferson Ave Redwood City, CA 94063 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Subtotal this page \$1,111.55 Grand Total of all Schedules 1B \$1,983.09 (Complete on last page of Schedule)

> Enter this total on line 8a of Summary Page



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

December 11, 2019

James Warner 710 W 4th St Jackson, MI 49203-1642

Dear Mr. Warner:

The Department of State received a response to the complaint you filed against Jeremy Alexander, 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,

Adam Fracassi

Bureau of Elections

Michigan Department of State

c: Jeromy Alexander



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

March 11, 2020

Jeromy Alexander 817 Cooper Street Jackson, Michigan 49203

Re:

Warner v. Alexander

Campaign Finance Complaint

No. 2019-10-48-26

Dear Mr. Alexander:

The Department of State (Department) has concluded its investigation into the formal complaint filed against you by James Warner alleging violations of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq*. This letter concerns the disposition of the complaint.

Mr. Warner filed his complaint with the Department on October 24, 2019 and alleged that your August Pre-Primary and Pre-General election reports contained several violations in the contributions, expenditures, fundraising, and in-kind contribution schedules. He also alleged that you failed to sign the reports.

By letter received December 4, 2019, you responded to the complaint and indicated that the contribution errors were related to checking the "fundraiser" box rather than the "direct" box for contributions received via GoFundMe. You also indicated that you had corrected the address errors and signed the reports. With your complaint, you provided amended copies of the August Pre-Primary and Post-Primary reports where you fixed the errors.

By letter dated December 11, 2019, the Department notified Mr. Warner of his right to file a rebuttal, but to date, none has been received.

The MCFA requires candidates and committees file contributions and expenditures with the appropriate filing official by specific dates. MCL 169.233(1) – (3). The MCFA requires a committee that receives or expends more than \$1,000 during any election to file campaign finance reports in compliance with the Act. MCL 169.233(6). Section 26 of the Act details the requirements of each report required to be filed including the disclosure requirements for contributions and expenditures. MCL 169.226. Section 37 requires the candidate to sign all submitted reports attesting to the accuracy of the report. MCL 169.237. A person who knowingly omits or underreports expenditures required to be disclosed by the Act is subject to a civil fine of not more than \$1,000 or the amount of the expenditures omitted or underreported, whichever is greater. MCL 169.233(11).

Jeromy Alexander March 11, 2020 Page 2

The Department has reviewed the documents submitted with this complaint and has reviewed your committee page filed with the Jackson County Clerk's Office. Based upon this and together with your admission, the Department finds that the evidence is sufficient to determine that a potential violation of the Act has occurred. You have indicated that the mistakes raised in the complaint were errors and corrected them upon the filing of the complaint.

Therefore, the Department concludes that a potential violation of the Act has occurred. Upon reaching this conclusion, the Department is required 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*.

In a separate letter, the Department has made an offer of informally resolve the complaint. Please note that if the Department is not able to resolve the complaint within 90 business days, it must take formal action. MCL 169.215(10). Should you have any questions, please do not hesitate to contact me.

Sincerely,

Adam Fracassi Bureau of Elections

Michigan Department of State

¹ Available at https://jackson.mi.campaignfinance.us/iCommitteePortal.php?iCommitteeID=3452



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

March 11, 2020

Jeromy Alexander 817 Cooper Street Jackson, Michigan 49203

Re:

Warner v. Alexander

Campaign Finance Complaint

No. 2019-10-48-26

Dear Mr. Alexander:

In a separate letter, the Department of State (Department) indicated that it has concluded its investigation into the formal complaint filed against you by James Warner and determined that a potential violation of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 et seq has occurred.

Upon reaching this conclusion, the Department is required 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*.

In order to resolve this complaint, the Department first requests that you file all outstanding amended reports from the August Pre-Primary and Post-Primary, as necessary, with the Jackson County Clerk's Office, the appropriate filing official. MCL 169.237. **The Department requests these reports be filed by March 23, 2020.**

The Department notes that your committee may be assessed a late-filing fee by the Jackson County Clerk for any statement that was not timely filed. MCL 169.233(7). Late-filing fees are assessed and collected by the filing official with whom the statements are filed. MCL 169.217(1). Any questions regarding these late-filing fees should be directed to the Jackson County Clerk. Upon the filing of the amended reports, the Department will review the report in order to determine whether further enforcement action may be necessary.

Please note that the Department has 90 business days to reach an informal resolution to the complaint. MCL 169.215(10). If the Department is unable to correct the violation after 90 business days, section 15 of the Act requires the Department conduct an administrative hearing to enforce the civil penalty provided in MCL 169.215(11), which provides that the Secretary of State may seek a civil fine of triple the amount outlined in 169.233(11), plus up to \$1,000.00 for each violation of the Act.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Adam Fracassi

Bureau of Elections

Michigan Department of State



STATE OF MICHIGAN JOCELYN BENSON, SECRETARY OF STATE DEPARTMENT OF STATE LANSING

June 2, 2020

Jeromy Alexander 817 Cooper Street Jackson, Michigan 49203

Re:

Warner v. Alexander

Campaign Finance Complaint

No. 2019-10-48-26

Dear Mr. Alexander:

In a separate letter, the Department of State (Department) indicated that it has concluded its investigation into the formal complaint filed against you by James Warner and determined that a potential violation of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 et seq has occurred.

As part of the informal resolution, the Department asked you to file any outstanding reports that were not corrected with the answer you filed, including a pre-primary and post-primary. The Department requested you file these reports with the Jackson County Clerk (the filing official).

The Department has reviewed these statements and is satisfied that you complied with the Department's request. Therefore, the Department determines that this formal warning is a sufficient resolution to the complaint. The Department now considers this matter closed and will take no further action against you at this time.

The Department notes your committee may be assessed a late-filing fee by the Jackson County Clerk for any statement that was not timely filed. MCL 169.233(7). Late-filing fees are assessed and collected by the filing official with whom the statements are filed. MCL 169.217(1). Any questions regarding these late-filing fees should be directed to the Jackson County Clerk.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Adam Fracassi Bureau of Elections

Michigan Department of State

n Laman

C: James Warner