



# Michigan Department of State Campaign Finance Complaint Form

BUREAU OF ELECTIONS • RICHARD H. AUSTIN BUILDING - 1<sup>st</sup> Floor  
430 W. ALLEGAN STREET • LANSING, MICHIGAN 48918

RECEIVED  
MICHIGAN  
2019 OCT 24 PM 2:00  
CLERK'S/CLERK SEAL

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 <u>James Warner</u>		Daytime Telephone Number <u>517-962-3845</u>	
Mailing Address <u>710 4TH ST</u>			
City <u>JACKSON</u>	State <u>MI</u>	Zip <u>49203</u>	
Email (optional) <u>James Warner 8907@yahoo.com</u>			

Section 2. Alleged Violator			
Name <u>Jeremy Alexander</u>			
Mailing Address <u>817 COOPER ST</u>			
City <u>JACKSON, MI</u>	State <u>MI</u>	Zip <u>49203</u>	
Email (optional)			

### Section 3. Allegations (Use additional sheets if more space is needed.)

Section(s) of the MCFA alleged to be violated: 26 + 37

Explain how those sections were violated:

See attached

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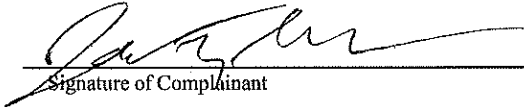
Evidence included with the submission of the complaint that supports the allegations:

See attached. Campaign Finance Statements

#### Section 4. Certification (Required)

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

X

  
Signature of Complainant

10/18/2019

Date

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

If, after a reasonable inquiry under the circumstances, you are unable to certify that certain factual contentions are supported by evidence as indicated above, you may make the following certification:

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

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X

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
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))
  - 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))
  - 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(j))
  - Page 1 Expenditure #2 indicates expenditure was for a fundraising event, but no fundraiser schedule is included in the report (MCL 169.226(d))



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>04/05/19</u> to <u>07/21/19</u>	
1. Committee I.D. Number <b>2019-003</b>	4. Candidate Last Name <u>Alexander</u> First Name <u>Jeromy</u> M.I. <u>D</u> 4a. Office Sought Including District # or Community Served (If applicable) <b>Mayor</b>
2. Committee Name <b>Committee to Elect Jeromy Alexander for Mayor</b>	4b. County of Residence <b>JACKSON</b>
5. Committee's Mailing Address <b>817 Cooper St Jackdon, MI 49202</b>  Area Code and Phone <u>(517) 769-4746</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address <b>Christina Alexander 1012 Rolling Green Lane Lansing, MI 48917</b>  Area Code & Phone <u>(517) 240-9680</u>
7. Treasurer's Business Address <b>1012 Rolling Green Lane Lansing, MI 48917</b>  Area Code and Phone <u>(517) 240-9680</u>	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)    Area Code and Phone _____
<b>9. TYPE OF STATEMENT</b> 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus _____  Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year  9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
<b>9e. Dissolution of Candidate Committee</b> <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.  Further, If the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.	
Current Treasurer or Designated Record keeper <u>Christina Alexander</u> <u>Christina Alexander</u> Date <u>7/29/19</u> Type or Print Name Signature	
Candidate _____ Date _____ Type or Print Name Signature	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 2019-003

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Jeromy Alexander for mayor

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



**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
Expenditure #1 Name <b>Gordons Food Store</b> Address <b>Jackson, MI</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>food for parade</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>05/29/19</b> Date	<b>\$ 174.95</b>  Click Here for Memo Itemization Type
Expenditure #2 Name <b>dirt cheap signs.com</b> Address <b>online</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>yard signs</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/18/19</b> Date	<b>\$ 697.23</b>  Click Here for Memo Itemization Type
Expenditure #3 Name <b>Office Depot</b> Address <b>Jackson, MI</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>stationary &amp; postage</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/19/19</b> Date	<b>\$ 105.85</b>  Click Here for Memo Itemization Type
Expenditure #4 Name <b>Facebook</b> Address <b>online</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>advertising</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/01/19</b> Date	<b>\$ 87.99</b>  Click Here for Memo Itemization Type
Expenditure #5 Name <b>GoFundMe</b> Address <b>online</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>fundraiser</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/01/19</b> Date	<b>\$ 45.53</b>  Click Here for Memo Itemization Type

Subtotal this page **\$1,111.55**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$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
Expenditure #1 Name <b>Rescue Themes</b> Address online  <input type="checkbox"/> Fund Raiser	Purpose: <u>website - wordpress</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/09/19</u> Date	<u>\$ 49.99</u>
Expenditure #2 Name <b>GoDaddy</b> Address online  <input type="checkbox"/> Fund Raiser	Purpose: <u>domain registration</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/19</u> Date	<u>\$ 36.34</u>
Expenditure #3 Name <b>Vistaprint</b> Address online  <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/16/19</u> Date	<u>\$ 311.61</u>
Expenditure #4 Name <b>Alexander Enterprises</b> Address 817 Cooper St Jackson, MI 49202  <input type="checkbox"/> Fund Raiser	Purpose: <u>website hosting</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/29/19</u> Date	<u>\$ 300.00</u>
Expenditure #5 Name <b>esigns.com</b> Address online  <input type="checkbox"/> Fund Raiser	Purpose: <u>banner</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/19</u> Date	<u>\$ 173.60</u>
Subtotal this page			<u>871.54</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Tim Huffman 1107 E Main St Flushing, MI 48433</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>30.00</u>	\$ <u>30.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Hassan Ahmad 2605 S St Anthony St Jackson, MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>20.00</u>	\$ <u>20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Amanda Weber 1612 Woodbridge St Jackson, MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>10.00</u>	\$ <u>10.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Jesse Jacques 12338 Renaud St Teumseh, Ontario Canada N8N 1P6</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>30.00</u>	\$ <u>30.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$90.00

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>Robert Tulloch</u> <u>7629 Coon Hill Rd</u> <u>Munith, MI 49259</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/05/19</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Thomas Beals</u> <u>9266 Allen Rd</u> <u>Allen Park, MI 48101</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/06/19</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>shop</u> Employer <u>Ford Motor Co</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Jeff &amp; Noi Feahr</u> <u>764 Union St</u> <u>Jackson, MI 49203</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/07/19</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Ralph McGonegal</u> <u>205 S Sandstone Rd</u> <u>Jackson, MI 49201</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/08/19</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 500.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/08/19</u> Name & Address: <u>John Henegar</u> <u>1206 E North St</u> <u>Jackson, MI 49202</u>		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>HB Fuller</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/10/19</u> Name & Address: <u>Tom Hillard</u> <u>10130 Cooper St</u> <u>Pleasant Lake, MI 49272</u>		\$ <u>150.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/10/19</u> Name & Address: <u>Chris &amp; Mike Olds</u> <u>4220 Locust lane</u> <u>Jackson, MI 49201</u>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/17/19</u> Name & Address: <u>Steve valdez</u> <u>924 Spring St</u> <u>Jackson, MI 49202</u>		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$265.00

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

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 2019-003

2. Committee Name Committee to Elect Jeromy 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 <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? <input type="checkbox"/> YES	4. Date of Receipt <u>04/18/19</u>	
Name & Address: <u>Ian hall</u> <u>7811 Smiths Creek Rd</u> <u>Wales, MI 48027</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Robert Bosch LLC</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/25/19</u>	
Name & Address: <u>Jay Thornsberry</u> <u>1413 Waterloo St</u> <u>Jackson, MI 49202</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/27/19</u>	
Name & Address: <u>Susan Murdie</u> <u>224 W Wesley St</u> <u>Jackson, MI 49201</u>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/29/19</u>	
Name & Address: <u>Dave &amp; Annette ostrander</u> <u>633 Oakhill Ave</u> <u>Jackson, MI 49201</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u>		<a href="#">Click Here for Memo Itemization</a>	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$825.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/19</u> Name & Address: <b>Bob Kokoczka</b> <b>1030 Williams St</b> <b>Jackson, MI 49203</b>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/08/19</u> Name & Address: <b>Sarah Arnold</b> <b>2214 E Ganson St</b> <b>Jackson, MI 49202</b>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/09/19</u> Name & Address: <b>Robert Tulloch</b> <b>76929 Coon Hill Rd</b> <b>Munith, MI 49259</b>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/10/19</u> Name & Address: <b>Tom Hillard</b> <b>10130 Cooper St</b> <b>Pleasant Lake, MI 49272</b>		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal 450.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <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? <input type="checkbox"/> YES 4. Date of Receipt <u>06/12/19</u> Name & Address: <u>Michael Wisniewski</u> <u>1406 Locust St</u> <u>Jackson, MI 49203</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/19/19</u> Name & Address: <u>Tom Hillard</u> <u>10130 Cooper St</u> <u>Pleasant Lake, MI 49272</u>		\$ <u>100.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/23/19</u> Name & Address: <u>Beth &amp; Al Thorrez</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$700.00

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

\$2,830.00

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number <b>2019-003</b>		3. This Statement covers From: <u>07/22/19</u> to <u>08/26/19</u>	
2. Committee Name <b>Committee to Elect Jeromy Alexander for Mayor</b>		4. Candidate Last Name <b>Alexander</b> First Name <b>Jeromy</b> M.I. <b>D</b> 4a. Office Sought Including District # or Community Served (If applicable) <b>Mayor</b>	
5. Committee's Mailing Address <b>817 Cooper St Jackson, MI 49202</b>  Area Code and Phone <u>(517) 769-4745</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		4b. County of Residence <b>JACKSON</b>  6. Treasurer's Name & Residential Address <b>Christina Alexander 1012 Rolling Green Lane Lansing, MI 48917</b>  Area Code & Phone <u>(517) 240-9680</u>	
7. Treasurer's Business Address <b>1012 Rolling Green Lane Lansing, MI 48917</b>  Area Code and Phone <u>(517) 240-9680</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)   Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year  9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)  9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper <b>Christina Alexander</b> Type or Print Name		<i>Christina Alexander</i> Date <b>9/5/19</b> Signature	
Candidate _____ Type or Print Name		_____ Signature	





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 2019-003

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>200.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$200.00</u>	(18.) \$ <u>\$3,030.00</u>
<b>4. Other Receipts</b> (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$200.00</u>	(20.) \$ <u>\$3,030.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions</b> (Schedule 1-IK, Column 7)	(6.) \$	<u>\$445.40</u>	(21.) \$ <u>\$445.40</u>
<b>7. In-Kind Expenditures</b> (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$256.10</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$256.10</u>	(23.) \$ <u>\$2,239.19</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$846.91</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$200.00</u>	
<b>15. SUBTOTAL</b> Add lines 13 and 14	(15.) = \$	<u>\$1,046.91</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>\$256.10</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$790.81</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 08/01/19

Name & Address:  
John Domin

GoFundMe donation

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt \_\_\_\_\_

Name & Address \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

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:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$200.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) \$200.00

Enter this total on  
line 3a of Summary  
Page.



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number **2019-003**

### CANDIDATE COMMITTEE

2. Committee Name **Committee to Elect Jeromy Alexander 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).  
Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were  
purchased

7. Amount or  
Fair Market  
Value

8. Cumulative  
for Election  
Cycle (Through  
date in Item 5)

Contribution # 1 PAC Receipt? ☐ Yes

Name & Address:

**Derek Fankhauser**

If over \$100.00 cumulative, please provide:  
Occupation:

Employer Name & Business Address:

**Malachi Printing**

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- **LOAN**

Description **t-shirts**

5. Date Of Receipt: **09/05/19**

6. Vendor Name & Address:

**Malachi Printing**

[Click Here for Memo Itemization](#)

\$ **445.40**

\$ **445.40**

☐ Fund Raiser Contribution

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- **LOAN**

Description

5. Date Of Receipt:

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

☐ Fund Raiser Contribution

Contribution #3 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- **LOAN**

Description

5. Date Of Receipt:

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

☐ Fund Raiser Contribution

Page Subtotal **\$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



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
Expenditure #1 Name <b>Facebook</b> Address <b>Online</b> <input type="checkbox"/> Fund Raiser	Purpose: <b>Advertising</b> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/07/19</b> Date	<b>\$ 250.00</b>
Expenditure #2 Name <b>GoFundMe</b> Address <b>Online</b> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>fundraising</b> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/01/19</b> Date	<b>\$ 6.10</b>
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Subtotal this page			<b>\$256.10</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<b>\$256.10</b>

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).

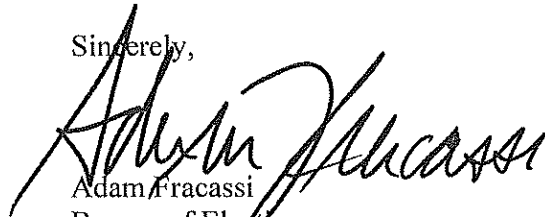
The purpose of this letter is to inform you of the Department's examination of these matters and your right to respond to the allegations before the Department proceeds further. It is important to understand that the Department is neither making this complaint nor accepting the allegations as true. The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

**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, 1<sup>st</sup> 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.

Sincerely,



Adam Fracassi  
Bureau of Elections  
Michigan Department of State

c: James Warner

November 26, 2019

2019 DEC -4 AM 10:05  
JAN 10 2020 10:05 AM  
JAN 10 2020 10:05 AM

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

RE: Warner vs Alexander  
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.

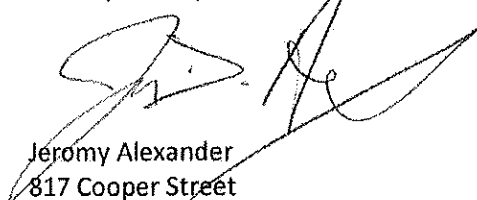
I would like to extend my thanks to Mr. Warner for his diligent oversight of a public official.

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number		3. This Statement covers From: _____ to _____	
2. Committee Name		4. Candidate Last Name First Name M.I. Alexander Jeromy 4a. Office Sought Including District # or Community Served (If applicable) 4b. County of Residence <b>JACKSON</b> <input checked="" type="checkbox"/>	
5. Committee's Mailing Address 817 Cooper St Jackson, MI 49202  Area Code and Phone (517) 769-4745 If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address Christina Alexander 1870 Olympia Dr Howell, MI 48843  Area Code & Phone (517) 240-9680	
7. Treasurer's Business Address 1870 Olympia Dr Howell, MI 48843  Area Code and Phone (517) 240-9680		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)  Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus 11-5-19		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)  9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper Christina Alexander, Christina Alexander Date 9-5-19 Type or Print Name Signature			
Candidate Jeromy Alexander, Jeromy Alexander Date 11-26-19 Type or Print Name Signature			





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 2019-003

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>200.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$200.00</u>	(18.) \$ <u>\$3,030.00</u>
<b>4. Other Receipts</b> (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$200.00</u>	(20.) \$ <u>\$3,030.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions</b> (Schedule 1-IK, Column 7)	(6.) \$	<u>\$445.40</u>	(21.) \$ <u>\$445.40</u>
<b>7. In-Kind Expenditures</b> (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$256.10</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$256.10</u>	(23.) \$ <u>\$256.10</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed <b>by</b> the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed <b>to</b> the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$846.91</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$200.00</u>	
<b>15. SUBTOTAL</b> Add lines 13 and 14	(15.) = \$	<u>\$1,046.91</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>\$256.10</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$790.81</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <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? <input type="checkbox"/> YES      4. Date of Receipt <u>08/01/19</u> Name & Address: <u>John Domin</u> <u>2393 Spencer Dr</u> <u>Jackson, MI 49202</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$200.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) \$200.00

Enter this total on  
line 3a of Summary  
Page.



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 2019-003

### CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jeromy Alexander 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). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 Name & Address: <b>Derek Fankhauser</b> <b>228 W Wilkins St</b> <b>Jackson, MI 49202</b> If over \$100.00 cumulative, please provide: Occupation: <b>Printer</b> Employer Name & Business Address: <b>Malachi Printing</b> <b>444 E Prospect St</b> <b>Jackson, MI 49202</b> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <b>t-shirts</b> 5. Date Of Receipt: <b>09/05/19</b> 6. Vendor Name & Address: <b>Malachi Printing</b> <b>444 E Prospect St</b> <b>Jackson, MI 49202</b> Click Here for Memo Itemization	\$ <b>445.40</b>	\$ <b>445.40</b>
Contribution # 2 Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description 5. Date Of Receipt: 6. Vendor Name & Address:  Click Here for Memo Itemization	\$	\$
Contribution #3 Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description 5. Date Of Receipt: 6. Vendor Name & Address:  Click Here for Memo Itemization	\$	\$

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



**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
Expenditure #1 Name <b>Facebook</b>  Address <b>1 Hacker Way Menlo Park, CA 94025</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/07/19</u> Date	<u>\$ 250.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>GoFundMe</b>  Address <b>855 Jefferson Ave Redwood City, CA 94063</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>donation fees</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/01/19</u> Date	<u>\$ 6.10</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page

**\$256.10**

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

**\$256.10**

Enter this total  
on line 8a of  
Summary Page


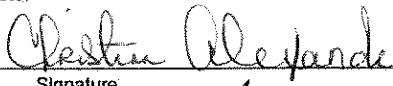



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number		3. This Statement covers From: _____ to _____	
2. Committee Name		4. Candidate Last Name First Name M.I. <b>Alexander Jeromy</b> 4a. Office Sought Including District # or Community Served (If applicable)  4b. County of Residence <b>JACKSON</b> 	
5. Committee's Mailing Address <b>817 Cooper St Jackson, MI 49202</b>  Area Code and Phone <b>(517) 769-4745</b> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address <b>Christina Alexander 1870 Olympia Dr Howell, MI 48843</b>  Area Code & Phone <b>(517) 240-9680</b>	
7. Treasurer's Business Address <b>1870 Olympia Dr Howell, MI 48843</b>  Area Code and Phone <b>(517) 240-9680</b>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)   Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus <b>8-6-19</b>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)  9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete. Current Treasurer or Designated Record keeper <b>Christina Alexander</b>  Date <b>7/29/19</b> Type or Print Name Signature Candidate <b>Jeromy Alexander</b>  Date <b>11/26/19</b> Type or Print Name Signature			



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 2019-003

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Jeromy Alexander for Mayor

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



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Tim Huffman 1107 E Main St Flushing, MI 48433</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>30.00</u>	\$ <u>30.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Hassan Ahmad 2605 S St Anthony St Jackson, MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>20.00</u>	\$ <u>20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Amanda Weber 1612 Woodbridge St Jackson, MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>10.00</u>	\$ <u>10.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: Jesse Jacques 12338 Renaud St Tecmseh, Ontario Canada N8N 1P6</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>30.00</u>	\$ <u>30.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$90.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/05/19</u></p> <p>Name &amp; Address: <b>Robert Tulloch</b> 7629 Coon Hill Rd Munith, MI 49259</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/06/19</u></p> <p>Name &amp; Address: <b>Thomas Beals</b> 9266 Allen Rd Allen Park, MI 48101</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>shop</u>      Employer <u>Ford Motor Co</u> Business Address <u>1 American Rd, Dearborn, MI 48126</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ <u>200.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/07/19</u></p> <p>Name &amp; Address: <b>Jeff Feahr</b> 764 Union St Jackson, MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/08/19</u></p> <p>Name &amp; Address: <b>Ralph Mc Gonegal</b> 205 S Sandstone Rd Jackson, MI 49201</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u>      Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$500.00**

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

Enter this total on  
line 3a of Summary  
Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <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? <input type="checkbox"/> YES	4. Date of Receipt <u>04/08/19</u>	
Name & Address: John Henegar 1206 E North St Jackson, MI 49202		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/10/19</u>	
Name & Address: Tom Hillard 10130 Cooper St Pleasant Lake, MI 49272		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/07/19</u>	
Name & Address: Chris Olds 4220 Locust Ave Jackson, MI 49201		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>04/08/19</u>	
Name & Address: Steve Valdez 924 Spring St Jackson, MI 49202		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$265.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003

2. Committee Name Committee to Elect Jeromy 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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/18/19</u></p> <p>Name &amp; Address: <u>Ian Hall</u> <u>7811 Smiths Creek Rd</u> <u>Wales, MI 48027</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>machinist</u>      Employer <u>Robert Bosch LLC</u> Business Address <u>28875 Cabot Dr, Novi, MI 48377</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/25/19</u></p> <p>Name &amp; Address: <u>Jay Thornsberry</u> <u>1413 Waterloo St</u> <u>Jackson, MI 49202</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u>      Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ <u>200.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/27/19</u></p> <p>Name &amp; Address: <u>Susan Murdie</u> <u>224 W Wesley St</u> <u>Jackson, MI 49201</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>25.00</u>	\$ <u>25.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>04/29/19</u></p> <p>Name &amp; Address: <u>Annette Ostrander</u> <u>633 Oakhill Ave</u> <u>Jackson, MI 49201</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Landlord</u>      Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$825.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 04/30/19  
Name & Address:  
**Bob Kokoczka**  
**1030 Williams St**  
**Jackson, MI 49203**

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/19  
Name & Address:  
**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 \_\_\_\_\_

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:  
**Robert Tulloch**  
**76929 Coon Hill Rd**  
**Munith, MI 49259**

\$ 100.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation retired Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 04/29/19  
Name & Address:  
**Tom Hillard**  
**10130 Cooper St**  
**Pleasant Lake, MI 49272**

\$ 250.00

\$ 400.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Landlord Employer self

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal **\$450.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2019-003  
2. Committee Name Committee to Elect Jeromy 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 <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? <input type="checkbox"/> YES	4. Date of Receipt <u>06/12/19</u>	
Name & Address: <b>Bob Kokoczka</b> 1030 Williams St Jackson, MI 49203		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/19/19</u>	
Name & Address: <b>Tom Hillard</b> 10130 Cooper St Pleasant Lake, MI 49272		\$ <u>100.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>landlord</u> Employer <u>self</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/09/19</u>	
Name & Address: <b>Beth Thorrez</b> 6125 River View Dr Jackson, MI 49203		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$700.00

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

\$2,830.00

Enter this total on  
line 3a 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
<b>Expenditure #1</b> Name <b>Rescue Themes</b>  Address 3420 Pump Rd H304 Richmond, VA 23233  <input type="checkbox"/> Fund Raiser	Purpose: <u>website-wordpress</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/09/19</u> Date	<u>\$ 49.99</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #2</b> Name <b>GoDaddy</b>  Address 14455 North Hayden Rd Suite 219 Scottsdale, AZ 85260  <input type="checkbox"/> Fund Raiser	Purpose: <u>domain registration</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/19</u> Date	<u>\$ 36.34</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #3</b> Name <b>Vistaprint</b>  Address 275 Wyman St Waltham, MA 02451-1200  <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/16/19</u> Date	<u>\$ 311.61</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #4</b> Name <b>Alexander Enterprises</b>  Address 817 Cooper St Jackson, MI 49202  <input type="checkbox"/> Fund Raiser	Purpose: <u>website hosting</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/29/19</u> Date	<u>\$ 300.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #5</b> Name <b>esigns.com</b>  Address 7729 Lochlin Dr Brighton, MI 48116  <input type="checkbox"/> Fund Raiser	Purpose: <u>banner</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/19</u> Date	<u>\$ 173.60</u>  <a href="#">Click Here for Memo Itemization Type</a>

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  
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
Expenditure #1 Name <b>Gordon's Food Store</b>  Address <b>1507 Boardman Rd Jackson, MI 49202</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>food for parade</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>05/29/19</b> Date	<b>\$ 174.95</b>
Expenditure #2 Name <b>dirt cheap signs.com</b>  Address <b>7301 Bar K Ranch Logo Vista, TX 78645</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>yard signs</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/18/19</b> Date	<b>\$ 697.23</b>
Expenditure #3 Name <b>Office Depot</b>  Address <b>1515 Boardman Rd Jackson, MI 49202</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>stationary &amp; postage</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>06/19/19</b> Date	<b>\$ 105.85</b>
Expenditure #4 Name <b>Facebook</b>  Address <b>1 Hacker Way Menlo Park, CA 94025</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>advertising</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/01/19</b> Date	<b>\$ 87.99</b>
Expenditure #5 Name <b>GoFundMe</b>  Address <b>855 Jefferson Ave Redwood City, CA 94063</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>donation fees</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>07/01/19</b> Date	<b>\$ 45.53</b>

Subtotal this page **\$1,111.55**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$1,983.09**

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, 1<sup>st</sup> Floor, 430 West Allegan Street, Lansing, Michigan 48918.

Sincerely,

A handwritten signature in black ink, appearing to read "Adam Fracassi".

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).



The Department has reviewed the documents submitted with this complaint and has reviewed your committee page filed with the Jackson County Clerk's Office.<sup>1</sup> 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,

A handwritten signature in black ink, appearing to read "Adam Fracassi", with a stylized flourish at the end.

Adam Fracassi  
Bureau of Elections  
Michigan Department of State

---

<sup>1</sup> 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.

Jeromy Alexander  
March 11, 2020  
Page 2

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

Sincerely,

A handwritten signature in black ink, appearing to read "Adam Fracassi". The signature is fluid and cursive, with the first name "Adam" and last name "Fracassi" clearly distinguishable.

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

C: James Warner