



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 ID Number

139784

2. Committee Name

Friends Of Jazmine Early

3. Committee's Mailing Address

33284 Ghelley Lynne Dr.
Sterling Heights, MI 48312

Area Code and Phone (888) 522-8930

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.

7. Treasurer's Business Address

33284 Ghelley Lynne Dr.
Sterling Heights, MI 48312

Area Code and Phone (888) 522-8930

3. This Statement covers from

02/10/19

to 10/26/19

4. Candidate Last Name

Early

First Name

Jazmine

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

CITY COUNCIL

4b. County of Residence MACOMB

5. Treasurer's Name & Residential Address

Jazmine M. Early
33284 Ghelley Lynne Dr.
Sterling Heights, MI 48312

Area Code & Phone (888) 522-8930

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

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

- ☐ Primary
☒ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Date of Election, Convention or Caucus

11/05/19

Required ONLY if candidate
is not on the ballot for the
current year.

- ☐ July Quarterly
☒ October Quarterly

9c. ☐ Annual Statement ()
Coverage Year

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

10. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debts
by the committee to the candidate or his or her spouse is paid
by the committee and forgiven, and no longer collectible from
the committee. The committee has no outstanding assets,
debts, no taxes due or has any outstanding debt.

Further, if the dissolution cannot be printed, that this be
considered a request for the Reporting Window.

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 Jazmine M. Early

Type or Print Name

Signature

10/25/19

Candidate Jazmine M. Early

Type or Print Name

Signature

10/25/19