



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 139844		3. This Statement covers From 08/25/20 to 10/18/20	
2. Committee Name Friends of Phil Rode		4. Candidate Last Name Rode First Name Philip MI R 4a. Office Sought Including District # or Community Served (if applicable) Clinton Township Trustee 4b. County of Residence MACOMB	
5. Committee's Mailing Address 36097 Acton St. Clinton Township, MI 48035 Area Code and Phone (586) 792-0130 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 Kerry Jantz 46868 Jewel Dr Macomb Township, MI 48044 Area Code & Phone (586) 610-3511	
7. Treasurer's Business Address 36097 Acton St. Clinton Township, MI 48035 Area Code and Phone (586) 792-0130		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Michael Wyszynski 42345 East Leo St. Clinton Township, MI 48038 Area Code and Phone (586) 646-3965	
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 11/03/20		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.) 9e. Dissolution of Candidate Committee ☐ 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 Michael Wyszynski Type or Print Name		Signature [Signature] Date 10/21/20	
Candidate Philip R. Rode Type or Print Name		Signature [Signature] Date 10/21/20	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1 Committee ID Number 139844

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2 Committee Name Friends of Phil Rode

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3 Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a) \$	<u>14,005.00</u>	
b. Unitemized (less than \$20.00 each - no Schedule)	(3b) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c) \$	<u>\$14,005.00</u>	(18) \$ <u>\$18,830.00</u>
4 Other Receipts (Schedule 1A -1 Column 6)	(4) \$	<u>\$100.00</u>	(19) \$ <u>\$100.00</u>
5 TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5) \$	<u>\$14,105.00</u>	(20) \$ <u>\$18,930.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6 In-Kind Contributions (Schedule 1B-K, Column 7)	(6) \$	<u>\$0.00</u>	(21) \$ <u>\$0.00</u>
7 In-Kind Expenditures (Schedule 1B-K, Column 6)	(7) \$	<u>\$0.00</u>	(22) \$ <u>\$0.00</u>
EXPENDITURES			
8 Expenditures			
a. Itemized (Schedule 1B, Column 8)	(8a) \$	<u>\$16,179.79</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.00 each - no Schedule)	(8c) \$	<u>\$32.07</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9) \$	<u>\$16,211.86</u>	(23) \$ <u>\$18,256.74</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officiholders Only)			
10 Disbursements			
a. Itemized (Schedule 10, Column 9)	(10a) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.00 each - no Schedule)	(10b) \$	<u>\$0.00</u>	
11 TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11) \$	<u>\$0.00</u>	(24) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS			
12 Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a) \$	<u>\$8,360.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13 Ending Balance of last report filed (Enter zero if no previous reports have been filed)	(13) \$	<u>\$2,780.12</u>	
14 Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14) + \$	<u>\$14,105.00</u>	
15 SUBTOTAL Add lines 13 and 14	(15) = \$	<u>\$16,885.12</u>	
16 Amount expended during reporting period (Add lines 9 and 11)	(16) - \$	<u>\$16,211.86</u>	
17 ENDING BALANCE (Subtract line 16 from line 15)	(17) \$	<u>\$673.26</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee ID Number 139844

2. Committee Name Friends of Phil Rode

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 <u>08/28/20</u>		
Name & Address Malczewski Mike 36077 Acton St. Clinton Township, MI 48035			<u>\$ 100.00</u>	<u>\$ 100.00</u>
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 <u>09/09/20</u>		
Name & Address Tirrell David 292 Jones St. Mount Clemens, MI 48043			<u>\$ 110.00</u>	<u>\$ 110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Macomb County Habitat for Humanity</u>			Click Here for Memo Itemization	
Business Address <u>25 N. Main St., Mount Clemens, MI 48043</u>				
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser				
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/19/20</u>		
Name & Address Schoenrath Frederick 17855 Koogler St. Clinton Township, MI 48038			<u>\$ 50.00</u>	<u>\$ 50.00</u>
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 <u>09/23/20</u>		
Name & Address Little Robert 14625 Shirley Avenue Warren, MI 48089			<u>\$ 50.00</u>	<u>\$ 150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u>			Click Here for Memo Itemization	
Business Address <u>N/A</u>				
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				

Page Subtotal **\$310.00**

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 139844
2. Committee Name Friends of Phil Rode

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.				5. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/23/20</u>			
Name & Address Garvonic Michael 39757 Berkley St. Clinton Township, MI 48038				\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/23/20</u>			
Name & Address Maynard Jared 35956 Vaughn St. Clinton Township, MI 48035				\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/23/20</u>			
Name & Address Mrofka Jerry 36166 Acton St. Clinton Township, MI 48035				\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/23/20</u>			
Name & Address Rode Mary 37263 Woodside Ln Clinton Township, MI 48036				\$ <u>200.00</u>	\$ <u>1,300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u> Business Address <u>N/A</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	

Page Subtotal **\$350.00**

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 139844

2 Committee Name Friends of Phil Rode

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.		b. Amount	c. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3 Contribution #1	PAC Receipt? ☐ YES	4 Date of Receipt: <u>09/23/20</u>	
Name & Address Tiseo Nancy S. 16155 Vista Woods Ct. Clinton Township, MI 48038		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #2	PAC Receipt? ☐ YES	4 Date of Receipt: <u>09/23/20</u>	
Name & Address Fowler Donald A. 38837 E Archer Harrison Township, MI 48045		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #3	PAC Receipt? ☐ YES	4 Date of Receipt: <u>09/23/20</u>	
Name & Address Pype Anthony J. 49531 Cosimo Ct. Macomb, MI 48042		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Garfield & Canal Service Inc.</u> Business Address <u>16933 Canal Rd. Clinton Township, MI 48038</u> Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #4	PAC Receipt? ☐ YES	4 Date of Receipt: <u>09/23/20</u>	
Name & Address Valerio-Nowc Lisa L. 20761 Marvindale St. Clinton Township, MI 48035		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$275.00**

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 ID Number 139844

2. Committee Name Friends of Phil Rode

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.

3. Amount

4. Cumulative for Election Cycle for Each Contributor Through Date of Receipt

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 09/23/20

Name & Address

Kassab Faye L.
3910 Coachwood Ln
Rochester Hills, MI 48309

\$ 100.00

\$ 100.00

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 09/23/20

Name & Address

VEB Express, LLC
13335 15 Mile Rd
Sterling Heights, MI 48312

\$ 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 09/23/20

Name & Address

Gondek Jeff
19036 Dixie Dr.
Clinton Township, MI 48035

\$ 100.00

\$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/23/20

Name & Address

Meltzer Clarence
18300 Tara Drive
Clinton Township, MI 48036

\$ 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

Page Subtotal **\$300.00**

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

Enter the total on
line 3a of Summary
Page

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1 Committee I.D. Number 139844

2 Committee Name Friends of Phil Rode

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 <u>09/23/20</u>		
Name & Address Rode Gregory R. 25821 Lila Court Warren, MI 48091			<u>\$ 20.00</u>	<u>\$ 220.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Disabled</u> Employer <u>N/A</u>			Click Here for Memo Itemization	
Business Address <u>N/A</u>				
Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser				
3 Contribution #2	PAC Receipt? ☐ YES	4 Date of Receipt <u>09/23/20</u>		
Name & Address Quni Anna 3826 Maddox Dr. Warren, MI 48092			<u>\$ 20.00</u>	<u>\$ 20.00</u>
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 <u>09/23/20</u>		
Name & Address Rode Phil 36097 Acton St. Clinton Township, MI 48035			<u>\$ 7,000.00</u>	<u>\$ 7,250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>District Director</u> Employer <u>Michigan State Senate</u>			Click Here for Memo Itemization	
Business Address <u>201 Townsend Street, Lansing, MI 48933</u>				
Type of Contribution ☒ Direct ☒ Loan from a person ☐ Fund Raiser				
3 Contribution #4	PAC Receipt? ☐ YES	4 Date of Receipt <u>09/23/20</u>		
Name & Address Rode Phil 36097 Acton St. Clinton Township, MI 48035			<u>\$ 500.00</u>	<u>\$ 7,750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>District Director</u> Employer <u>Michigan State Senate</u>			Click Here for Memo Itemization	
Business Address <u>201 Townsend Street, Lansing, MI 48933</u>				
Type of Contribution ☒ Direct ☒ Loan from a person ☒ Fund Raiser				

Page Subtotal **\$7,540.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 139844

2. Committee Name Friends of Phil Rode

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 <u>09/23/20</u>			
Name & Address Reinhold Kathy 19247 Black Oaks Dr. Macomb, MI 48044				<u>\$ 100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/29/20</u>			
Name & Address Howe Kenneth 49358 Bingham Ln Macomb, MI 48044				<u>\$ 200.00</u>	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u> Business Address <u>N/A</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/05/20</u>			
Name & Address Toarmino Edward 32780 N River Rd. Harrison Township, MI 48045				<u>\$ 100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser				Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/05/20</u>			
Name & Address Broad Gary R. 20850 Moxon Dr. Clinton Township, MI 48036				<u>\$ 250.00</u>	<u>\$ 550.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Chairman</u> Employer <u>Midwest Steel, Inc.</u> Business Address <u>2525 E. Grand Blvd. Detroit, MI 48211</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser				Click Here for Memo Itemization	

Page Subtotal **\$650.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1 Committee ID Number 139844

2 Committee Name Friends of Phil Rode

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>Lorenzo Albert L.</u> <u>37281 Woodside Ln</u> <u>Clinton Township, MI 48036</u>	PAC Receipt? ☐ YES 4 Date of Receipt <u>10/05/20</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5 If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #2 Name & Address <u>Garvonic Michael</u> <u>39757 Berkley St.</u> <u>Clinton Township, MI 48038</u>	PAC Receipt? ☐ YES 4 Date of Receipt <u>10/07/20</u>	\$ <u>50.00</u>	\$ <u>100.00</u>
5 If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #3 Name & Address <u>Piccinini David P.</u> <u>6101 Windemere Ln</u> <u>Shelby Township, MI 48316</u>	PAC Receipt? ☐ YES 4 Date of Receipt <u>10/07/20</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5 If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Lira Machine Solutions, Inc.</u> Business Address <u>19000 15 Mile Rd. Clinton Township, MI 48035</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3 Contribution #4 Name & Address <u>Latinis John E.</u> <u>22706 Corteville St.</u> <u>Saint Clair Shores, MI 48081</u>	PAC Receipt? ☐ YES 4 Date of Receipt <u>10/07/20</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5 If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Broker</u> Employer <u>Signature Sotheby's International Realty</u> Business Address <u>415 S Old Woodward Avenue, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$650.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee ID Number 139844

2. Committee Name Friends of Phil Rode

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 <u>10/07/20</u>	
Name & Address: <u>Elkins Jill</u> <u>40349 Remsen Dr.</u> <u>Sterling Heights, MI 48313</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
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 <u>10/07/20</u>	
Name & Address: <u>Rode Mary</u> <u>37263 Woodside Ln</u> <u>Clinton Township, MI 48036</u>		\$ <u>250.00</u>	\$ <u>1,550.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u>		Click Here for Memo Itemization	
Business Address <u>N/A</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/07/20</u>	
Name & Address: <u>Mansour Shaun A.</u> <u>45709 Rathmore Dr.</u> <u>Macomb Township, MI 48044</u>		\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Law Offices of Shaun A. Mansour</u>		Click Here for Memo Itemization	
Business Address <u>38550 Garfield Road, Clinton Township, MI 48038</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/07/20</u>	
Name & Address: <u>Hindman Robert A.</u> <u>49522 Keycove St.</u> <u>Chesterfield, MI 48047</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>American Graphics Printing Company</u>		Click Here for Memo Itemization	
Business Address <u>34895 Groesbeck Hwy, Clinton Township, MI 48035</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **\$770.00**

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 ID Number 139844

2 Committee Name Friends of Phil Rode

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	<u>10/07/20</u>		
Name & Address Oehmke Wayne O. 17610 21 Mile Rd. Macomb Township, MI 48044				\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Development Manager</u> Employer <u>Anderson, Eckstein & Westrick, Inc.</u> Business Address <u>51301 Schoenherr, Shelby Township, MI 48315</u> Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3 Contribution #2	PAC Receipt? ☐ YES	4 Date of Receipt	<u>10/07/20</u>		
Name & Address Castiglia Eric A. 38602 Rougewood Dr. Sterling Heights, MI 48312				\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>National Account Management Director</u> Employer <u>Center for Computer Resources, LLC</u> Business Address <u>36333 Mound Rd. Suite C, Sterling Heights, MI 48310</u> Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3 Contribution # 3	PAC Receipt? ☐ YES	4 Date of Receipt	<u>10/07/20</u>		
Name & Address Trivelloni Antonio B. 1589 Kingsley St. Mount Clemens, MI 48043				\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Financial Advisor</u> Employer <u>Trivelloni Asset Management, LLC</u> Business Address <u>25 North Main, Mount Clemens, MI 48043</u> Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	
3 Contribution # 4	PAC Receipt? ☐ YES	4 Date of Receipt	<u>10/07/20</u>		
Name & Address Licari Kenneth J. 52799 Weathervane Dr. Chesterfield, MI 48047				\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser				Click Here for Memo Itemization	

Page Subtotal **\$750.00**

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 ID Number 139844

2. Committee Name Friends of Phil Rode

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 <u>10/07/20</u> Name & Address: <u>Dorian Carolyn M.</u> <u>35900 Gratiot Ave.</u> <u>Clinton Township, MI 48035</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Vice President</u> Employer <u>Dorian Ford</u> Business Address <u>35900 Gratiot Ave. Clinton Township, MI 48035</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/07/20</u> Name & Address: <u>Hernandez Thomas A.</u> <u>49405 Compass Point Dr.</u> <u>Chesterfield, MI 48047</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>A123 Systems, LLC</u> Business Address <u>27101 Cabaret Dr, Novi, MI 48377</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/07/20</u> Name & Address: <u>Bianchi Ralph</u> <u>922 N Main Street Suite 216</u> <u>Royal Oak, MI 48067</u>		\$ <u>500.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Bianchi's Salon, Inc.</u> Business Address <u>16650 18 Mile Rd, Clinton Twp, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/07/20</u> Name & Address: <u>Gianino Luciano</u> <u>40256 Emerald Ln W</u> <u>Clinton Township, MI 48038</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Luciano's Family Restaurant, Inc.</u> Business Address <u>39091 Garfield Rd, Clinton Township, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,250.00**

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

Enter this total on
line 3a of Summary
Page

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1 Committee ID Number 139844

2 Committee Name Friends of Phil Rode

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	<u>10/07/20</u>
Name & Address Toma Stavros R. 47677 Milonas Dr. Shelby Township, MI 48315		\$ <u>100.00</u>	\$ <u>100.00</u>
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	<u>10/07/20</u>
Name & Address Centre Court Properties, LLC 19500 Hall Rd. Suite #100 Clinton Township, MI 48038		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Incorporated</u> Employer <u>Not Incorporated</u>		Click Here for Memo Itemization	
Business Address <u>Not Incorporated</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3 Contribution #3	PAC Receipt? ☐ YES	4 Date of Receipt	<u>10/07/20</u>
Name & Address Illich Paul 34285 Groesbeck Hwy Clinton Township, MI 48035		\$ <u>200.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>American Auto, Inc.</u>		Click Here for Memo Itemization	
Business Address <u>34285 Groesbeck Hwy, Clinton Township, MI 48035</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3 Contribution #4	PAC Receipt? ☐ YES	4 Date of Receipt	<u>10/07/20</u>
Name & Address Rode Phil 36097 Acton St. Clinton Township, MI 48035		\$ <u>610.00</u>	\$ <u>8,360.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>District Director</u> Employer <u>Michigan State Senate</u>		Click Here for Memo Itemization	
Business Address <u>201 Townsend Street, Lansing, MI 48933</u>			
Type of Contribution: ☒ Direct ☒ Loan from a person ☒ Fund Raiser			

Page Subtotal **\$1,160.00**

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

\$14,005.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE**

1. Committee ID Number **139844**

2. Committee Name **Friends of Phil Rode**

3. Name & Address, From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address Charter Township of Clinton 40700 Romeo Plank Road Clinton Township, MI 48038	Date of Receipt 10/16/20	☐ Loan from a Lending Institution ☐ Interest ☒ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ 100.00
Receipt #2 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$
Receipt #3 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$
Receipt #4 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$
Receipt #5 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$
Receipt #6 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$
Receipt #7 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$

Page Subtotal

\$100.00

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

\$100.00

Enter this total on
line 4 of Summary
Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number **139844**
2. Committee Name **Friends of Phil Rode**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name The Italian Tribune Address P.O. Box 380407 Clinton Township, MI 48038 ☐ Fund Raiser	Purpose <u>Online page ad on item of weekly newspaper</u> Date <u>08/25/20</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/25/20</u>	<u>\$ 277.00</u>
Expenditure #2 Name Dicomp, Inc. Address P.O. Box 36044 Grosse Pointe, MI 48236 ☐ Fund Raiser	Purpose <u>Resolved Onedrive issue</u> Date <u>08/28/20</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/20</u>	<u>\$ 50.00</u>
Expenditure #3 Name Macomb Signs, LLC Address 28942 Hughes St. Clair Shores, MI 48081 ☐ Fund Raiser	Purpose <u>Custom decals printed</u> Date <u>08/27/20</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u>	<u>\$ 190.80</u>
Expenditure #4 Name Macomb Signs, LLC Address 28942 Hughes St. Clair Shores, MI 48081 ☐ Fund Raiser	Purpose <u>Custom decals printed</u> Date <u>08/27/20</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u>	<u>\$ 422.94</u>
Expenditure #5 Name Maples Ad Specialties, LLC Address 21225 Evergreen St. Saint Clair Shores, MI 48082 ☐ Fund Raiser	Purpose <u>Several replacement shirts</u> Date <u>08/27/20</u> Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u>	<u>\$ 70.00</u>
Subtotal this page			\$1,010.74
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 ID Number 139844
2 Committee Name Friends of Phil Rode

3 Name and address of person or vendor to whom paid	4 Purpose (Required Information)	5 Date	6 Amount
Expenditure #1 Name <u>United States Postal Service</u> Address <u>7007 Metropolitan Parkway</u> <u>Sterling Heights, MI 48311</u> ☐ Fund Raiser	Purpose <u>Stamps</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/20</u> Date	<u>\$ 55.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Signarama</u> Address <u>36886 Harper Avenue</u> <u>Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose <u>Political yard signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/20</u> Date	<u>\$ 265.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>LaserCom, LLC</u> Address <u>2230 Elliott Avenue</u> <u>Troy, MI 48083</u> ☐ Fund Raiser	Purpose <u>Direct mailing and postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/20</u> Date	<u>\$ 3,569.92</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Accuform Printing & Graphics, Inc.</u> Address <u>7231 Southfield Rd.</u> <u>Detroit, MI 48228</u> ☐ Fund Raiser	Purpose <u>Political post cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/20</u> Date	<u>\$ 1,600.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Right Strategies, LLC</u> Address <u>2153 Wealthy St. SE. Suite 166</u> <u>East Grand Rapids, MI 49506</u> ☐ Fund Raiser	Purpose <u>Voter data list</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/20</u> Date	<u>\$ 200.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$5,689.92**

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 139844
2. Committee Name Friends of Phil Rode

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: Crazy Gringo Mexican Cantina Address: 34802 Gratiot Avenue Clinton Township, MI 48035 ☒ Fund Raiser	Purpose: <u>Dinner fund raising event</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/20</u> Date	<u>\$ 37.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name: The Italian Tribune Address: P.O. Box 380407 Clinton Township, MI 48038 ☐ Fund Raiser	Purpose: <u>Newspaper display advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/27/20</u> Date	<u>\$ 252.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name: Litho Printing and Graphics, LLC Address: 21541 Gratiot Eastpointe, MI 48021 ☐ Fund Raiser	Purpose: <u>Flyers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/27/20</u> Date	<u>\$ 212.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name: American Graphics Printing Company Address: 34895 Groesbeck Clinton Township, MI 48035 ☐ Fund Raiser	Purpose: <u>Signs with grommets</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/20</u> Date	<u>\$ 477.53</u> Click Here for Memo Itemization Type
Expenditure #5 Name: Sajo's of Clinton Address: 36470 Moravian Dr. Clinton Township, MI 48035 ☒ Fund Raiser	Purpose: <u>Dinner fund raising event</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/07/20</u> Date	<u>\$ 660.00</u> Click Here for Memo Itemization Type
Subtotal this page			\$1,638.53
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 **139844**
2 Committee Name **Friends of Phil Rode**

3 Name and address of person or vendor to whom paid	4 Purpose (Required information)	5 Date	6 Amount
Expenditure #1 Name Litho Printing and Graphics, LLC Address 21541 Gratiot Eastpointe, MI 48021 ☐ Fund Raiser	Purpose Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/10/20 Date	\$ 116.60 Click Here for Memo Itemization Type
Expenditure #2 Name Litho Printing and Graphics, LLC Address 21541 Gratiot Eastpointe, MI 48021 ☐ Fund Raiser	Purpose Flyers ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/08/20 Date	\$ 212.00 Click Here for Memo Itemization Type
Expenditure #3 Name Accuform Printing and Graphics, Inc. Address 7231 Southfield Rd. Detroit, MI 48228 ☐ Fund Raiser	Purpose Second mail pieces ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/15/20 Date	\$ 2,000.00 Click Here for Memo Itemization Type
Expenditure #4 Name LaserCom, LLC Address 2230 Elliott Avenue Troy, MI 48083 ☐ Fund Raiser	Purpose Second direct mailing cost ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/13/20 Date	\$ 5,260.00 Click Here for Memo Itemization Type
Expenditure #5 Name The Italian Tribune Address P.O. Box 380407 Clinton Township, MI 48038 ☐ Fund Raiser	Purpose Newspaper display advertisement ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/02/20 Date	\$ 252.00 Click Here for Memo Itemization Type

Subtotal this page **\$7,840.60**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$16,179.79**

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee ID Number 139844
2. Committee Name Friends of Phil Rode

This Schedule itemizes

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035 Corp? ☐ Yes	4. Type <u>Debt To Candidate Committee</u> 5. <u>Date Debt Was Incurred</u> <u>03/13/20</u> 6. <u>Original Amount of Debt</u> <u>\$ 50.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 50.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035 Corp? ☐ Yes	4. Type <u>Debt To Candidate Committee</u> 5. <u>Date Debt Was Incurred</u> <u>07/27/20</u> 6. <u>Original Amount of Debt</u> <u>\$ 100.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 100.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035 Corp? ☐ Yes	4. Type <u>Debt To Candidate Committee</u> 5. <u>Date Debt Was Incurred</u> <u>07/27/20</u> 6. <u>Original Amount of Debt</u> <u>\$ 100.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 100.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$250.00

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

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1 Committee ID Number 139844
2 Committee Name Friends of Phil Rode

This Schedule itemizes				
a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
3 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4 Type of Obligation (Description) 5 Indicate date debt was incurred 6 Indicate original amount of debt	7 Date and amount of each payment	8 Cumulative payment to date on debt	9 Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to Candidate Committee</u> 5 <u>Date Debt Was Incurred</u> <u>09/23/20</u> 6 <u>Original Amount of Debt</u> <u>\$ 500.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 500.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to Candidate Committee</u> 5 <u>Date Debt Was Incurred</u> <u>09/23/20</u> 6 <u>Original Amount of Debt</u> <u>\$ 7,000.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 7,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to Candidate Committee</u> 5 <u>Date Debt Was Incurred</u> <u>10/07/20</u> 6 <u>Original Amount of Debt</u> <u>\$ 610.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 610.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$8,110.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				\$8,360.00

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **139844**
2. Committee Name **Friends of Phil Rode**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 09/23/20	4. Number of Individuals Attending or Participating (whichever is greater) 30	5. Type of Fund Raising Activity Dinner	6. Address and Name (if any) of the place where the activity was held Crazy George Mexican Cantina 34600 Grand Avenue Clinton Township, MI 48035 ☐ Private Residence
---	---	---	--

7. Total Contributions **\$1,615.00**

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8) **\$1,615.00**

10. Total Cost of Event **\$37.00**

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following.

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1 Committee ID Number 139844
2 Committee Name Friends of Phil Rode

- USE A SEPARATE SHEET FOR EACH EVENT -

3 Date Event Was Held <u>10/07/20</u>	4 Number of Individuals Attending or Participating (whichever is greater) <u>30</u>	5 Type of Fund Raising Activity <u>Dinner</u>	6 Address and Name (if any) of the place where the activity was held <u>Sajo's of Clinton</u> <u>36478 Moravian Dr</u> <u>Clinton Township, MI 48035</u> ☐ Private Residence
--	--	--	--

7 Total Contributions \$4,480.00

8 Other Receipts _____

9 Gross Receipts (Add lines 7 and 8) \$4,480.00

10 Total Cost of Event \$660.00

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11 ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.