



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 139844		3. This Statement covers From 10/19/20 to 11/23/20	
2. Committee Name Friends of Phil Rode		4. Candidate Last Name Rode First Name Philip M.I. 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 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 Michael Wyszynski Type or Print Name		Signature [Signature] Date 11/25/20	
Candidate Philip Rode Type or Print Name		Signature [Signature] Date 11/25/20	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1 Committee I.D. 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>9,200.00</u>	
b Unitemized (less than \$20.01 each - no Schedule)	(3b) \$	<u>NOT APPLICABLE</u>	
c Subtotal of "Contributions"	(3c) \$	<u>\$9,200.00</u>	(18) \$ <u>\$28,030.00</u>
4 Other Receipts (Schedule 1A - 1, Column 6)	(4) \$	<u>\$279.83</u>	(19) \$ <u>\$379.83</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5) \$	<u>\$9,479.83</u>	(20) \$ <u>\$28,409.83</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
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>
EXPENDITURES			
8 Expenditures			
a Itemized (Schedule 1B, Column 6)	(8a) \$	<u>\$9,955.05</u>	
b Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b) \$	<u>\$0.00</u>	
c Unitemized (less than \$50.01 each - no Schedule)	(8c) \$	<u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9) \$	<u>\$9,955.05</u>	(23) \$ <u>\$28,211.79</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10 Disbursements			
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>	
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>\$0.00</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>\$673.26</u>	
14 Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14) + \$	<u>\$9,479.83</u>	
15 SUBTOTAL Add lines 13 and 14	(15) = \$	<u>\$10,153.09</u>	
16 Amount expended during reporting period (Add lines 9 and 11)	(16) - \$	<u>\$9,955.05</u>	
17 ENDING BALANCE (Subtract line 16 from line 15)	(17) \$	<u>\$198.04</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>10/20/20</u>	
Name & Address <u>Webber Wayne W.</u> <u>44710 Morley Drive</u> <u>Clinton Township, MI 48036</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Board Member</u> Employer <u>The Wayne and Joan Webber Foundation</u> Business Address <u>44710 Morley Drive, Clinton Township, MI 48036</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>10/29/20</u>	
Name & Address <u>Little Robert</u> <u>14625 Shirley Avenue</u> <u>Warren, MI 48089</u>		\$ <u>50.00</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>10/29/20</u>	
Name & Address <u>Rode Phil</u> <u>36097 Acton St.</u> <u>Clinton Township, MI 48035</u>		\$ <u>210.00</u>	\$ <u>8,570.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>District Director</u> Employer <u>Michigan State Senate</u> Business Address <u>201 Townsend Street, Lansing, MI 48933</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>10/29/20</u>	
Name & Address <u>Rode Alex</u> <u>2582 Lila Ct.</u> <u>Warren, MI 48091</u>		\$ <u>20.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Aerospace Tool Builder</u> Employer <u>Smith Brothers Tool Company</u> Business Address <u>50600 Corporate Drive, Shelby Township, MI 48315</u> Type of Contribution ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$780.00

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		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>10/29/20</u>	
Name & Address <u>Rode Mary</u> <u>37263 Woodside Ln.</u> <u>Clinton township, MI 48036</u>		\$ <u>100.00</u>	\$ <u>1,650.00</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 #2	PAC Receipt? ☐ YES	4 Date of Receipt <u>10/29/20</u>	
Name & Address <u>Russell Daniel J.</u> <u>17680 Maisons Dr.</u> <u>Clinton Township, MI 48038</u>		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President and CEO</u> Employer <u>International Marketing Consultants, Inc</u> Business Address <u>P.O. Box 84, Romeo, MI 48065</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>10/29/20</u>	
Name & Address <u>Lind John</u> <u>45699 Joseph St.</u> <u>Shelby Township, MI 48317</u>		\$ <u>20.00</u>	\$ <u>20.00</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>11/02/20</u>	
Name & Address <u>George John A.</u> <u>19634 Westchester Dr.</u> <u>Clinton Township, MI 48038</u>		\$ <u>2,000.00</u>	\$ <u>2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Treasurer</u> Employer <u>Delta Management Company, Inc.</u> Business Address <u>45511 Market Street, Shelby Township, MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$2,420.00**

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 <u>all</u> contributions regardless of amount		6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3 Contribution # 1 PAC Receipt? ☐ YES 4 Date of Receipt <u>11/02/20</u> Name & Address <u>George James C.</u> <u>882 Cumberland Ridge Ct.</u> <u>Rochester, MI 48307</u>		<u>\$ 2,000.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Delta Management Company, Inc.</u> Business Address <u>45511 Market Street, 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>11/02/20</u> Name & Address <u>George Joseph P.</u> <u>19922 Westchester Dr.</u> <u>Clinton Township, MI 48038</u>		<u>\$ 2,000.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Secretary</u> Employer <u>Delta Management Company, Inc.</u> Business Address <u>45511 Market Street, Shelby Township, MI 48315</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>11/02/20</u> Name & Address <u>George James</u> <u>19634 Westchester Dr.</u> <u>Clinton Township, MI 48038</u>		<u>\$ 2,000.00</u>	<u>\$ 2,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Delta Management Company, Inc.</u> Business Address <u>45511 Market Street, Shelby Township, MI 48315</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 _____ Name & Address _____ _____ _____		<u>\$ _____</u>	<u>\$ _____</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 **\$6,000.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **\$9,200.00**

Enter this total on
line 3a of Summary
Page



ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. 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: LaserCom, LLC 2230 Elliott Avenue Troy, MI 48083	Date of Receipt <u>10/20/20</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ <u>279.83</u>
	☐ Fund Raiser		
Receipt #2 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Receipt #3 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Receipt #4 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Receipt #5 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Receipt #6 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Receipt #7 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund /Rebate Click for Memo Itemization Type ☐ Other (Specify) _____	\$ _____
	☐ Fund Raiser		
Page Subtotal			\$279.83
Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)			\$279.83

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 <u>The Italian Tribune</u> Address <u>P.O. Box 380407</u> <u>Clinton Township, MI 48038</u> ☐ Fund Raiser	Purpose <u>Newspaper display advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/20</u> Date	<u>\$ 277.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>American Graphics Printing Company</u> Address <u>34895 Groesbeck</u> <u>Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose <u>Flyers and tri-fold artwork</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/20</u> Date	<u>\$ 365.70</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>American Graphics Printing Company</u> Address <u>34895 Groesbeck</u> <u>Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose <u>Stakes and lawn signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/20</u> Date	<u>\$ 164.30</u> Click Here for Memo Itemization Type
Expenditure #4 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 and mail postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/13/20</u> Date	<u>\$ 578.05</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Phil Rode</u> Address <u>36097 Acton St.</u> <u>Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose <u>Payback of loans</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/14/20</u> Date	<u>\$ 8,570.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$9,955.05**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$9,955.05**
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 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 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>	11/14/20 \$ 50.00 \$ \$ \$ \$	\$ 50.00	\$ 0.00 ☐ 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 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>	11/14/20 \$ 100.00 \$ \$ \$ \$	\$ 100.00	\$ 0.00 ☐ 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 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>	11/14/20 \$ 100.00 \$ \$ \$ \$	\$ 100.00	\$ 0.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$0.00
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 to or forgiven by 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 guarantor, 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) ☐ FORGIVEN
Debt #1 Owed to or by Corp? ☐ Yes Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to 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>	11/14/20 \$ <u>500.00</u> \$ \$ \$ \$	\$ <u>500.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by Corp? ☐ Yes Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to 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>	11/14/20 \$ <u>7,000.00</u> \$ \$ \$ \$	\$ <u>7,000.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by Corp? ☐ Yes Phil Rode 36097 Acton St. Clinton Township, MI 48035	4 Type <u>Loan to 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>	11/14/20 \$ <u>610.00</u> \$ \$ \$ \$	\$ <u>610.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$0.00

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 Owed to or by Corp? ☐ Yes Phil Rode 36097 Acton Street Clinton Township, MI 48035	4 Type <u>Loan to committee</u> 5 <u>Date Debt Was Incurred</u> <u>10/29/20</u> 6 <u>Original Amount of Debt</u> <u>\$ 210.00</u>	11/14/20 \$ 210.00 \$ \$ \$ \$	\$ 210.00	\$ 0.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by Corp? ☐ Yes	4 Type _____ 5 <u>Date Debt Was Incurred</u> _____ 6 <u>Original Amount of Debt</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by Corp? ☐ Yes	4 Type _____ 5 <u>Date Debt Was Incurred</u> _____ 6 <u>Original Amount of Debt</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$0.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				\$0.00

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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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>10/29/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>10</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>Freddy's Bar and Grill</u> <u>40000 Garfield Rd.</u> <u>Clinton Township, MI 48038</u> ☐ Private Residence
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7. Total Contributions \$700.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$700.00

10. Total Cost of Event \$0.00
(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.