



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED 2023 JUL 28 AM 7:46
MACOMB COUNTY CLERK

**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: 03/22/2023 to 07/23/2023

1. Committee I.D. Number

140268

4. Candidate Last Name First Name M.I.

Howard Jocelyn

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

2. Committee Name

Friends of Jocelyn Howard

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

**Friends of Jocelyn Howard
28401 Mound Road #1333
Warren, MI 48090**

6. Treasurer's Name & Residential Address

**Friends of Jocelyn Howard
28401 Mound Road #1333
Warren, MI 48090**

Area Code and Phone (568) 298-2370

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.

Area Code & Phone (586) 298-2370

7. Treasurer's Business Address

**Friends of Jocelyn Howard
28401 Mound Road #1333
Warren, MI 48090**

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

Area Code and Phone (586) 298-2370

Area Code and Phone _____

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

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.)

Date of Election, Convention or Caucus

08/08/2023

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 Jocelyn Howard

Type or Print Name

Signature

Date

Candidate Jocelyn Howard

Type or Print Name

Signature

Date



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number **140268**

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name **Friends of Jocelyn Howard**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>12,619.67</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$12,619.67</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	_____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$12,619.67</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$1,600.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	_____	(22.) \$ _____
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$11,534.90</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	_____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	_____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$11,534.90</u>	(23.) \$ _____
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	_____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	_____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	_____	(24.) \$ _____
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	_____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	_____	
BALANCE STATEMENT			
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>\$12,619.67</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$12,619.67</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$11,534.90</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$1,084.77</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140268

2. Committee Name Friends of Jocelyn Howard

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 04/05/2023

Name & Address:
Harris, Jayda

\$ 10.72

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 04/05/2023

Name & Address:
Thomas, Erika

\$ 26.34

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 04/05/2023

Name & Address:
Ajagu, Samantha
227 King St
Detroit, MI

\$ 100.00

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 04/05/2023

Name & Address:
Oates, Katrece

\$ 50.00

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 \$187.06

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/05/2023</u> Name & Address: <u>Omar Griffith</u> <u>33172 Fuhrmann Dr</u> <u>Sterling Heights, MI 48310</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>HR Director</u> Employer <u>BCBS</u> Business Address <u>3665 E 11 Mile Rd, Warren, MI 48092</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/05/2023</u> Name & Address: <u>Janice Jackson</u> <u>49114 Driftwood Dr</u> <u>Shelby Twp, MI 48317</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/06/2023</u> Name & Address: <u>Rovin, Dominique</u> <u>33451 Alpa</u> <u>Garden City, MI 48135</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Case Management</u> Employer <u>Premier</u> Business Address <u>1200 Martin Luther King Jr. Blvd., Detroit, MI 48201</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/06/2023</u> Name & Address: <u>Porch-Doneghy, Mellannie</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>52.37</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$802.37

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/05/2023</u> Name & Address: <u>Martin, Wanda</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser 6. Amount: <u>\$ 26.34</u> \$ _____ Click Here for Memo Itemization			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/06/2023</u> Name & Address: <u>Williams, Auvis</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser 6. Amount: <u>\$ 200.00</u> \$ _____ Click Here for Memo Itemization			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/06/2023</u> Name & Address: <u>Sampson, Crystal</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser 6. Amount: <u>\$ 26.34</u> \$ _____ Click Here for Memo Itemization			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/06/2023</u> Name & Address: <u>Brown, Mary</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser 6. Amount: <u>\$ 100.00</u> \$ _____ Click Here for Memo Itemization			

Page Subtotal **\$352.68**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/05/2023</u> Name & Address: Howard, Jacquelyn 14351 Montrose Detroit, MI 48227 5. If over \$100.00 cumulative, please provide: Occupation <u>Customer Service</u> Employer <u>Vigilante Security</u> Business Address <u>2681 Industrial Row Dr, Troy, MI 48084</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>150.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/07/2023</u> Name & Address: Robinson, Lisa 3516 Susie Ct Stockbridge, GA 30281 5. If over \$100.00 cumulative, please provide: Occupation <u>Station Manager</u> Employer <u>Delta Air Lines</u> Business Address <u>1030 Delta Boulevard Atlanta, GA 30354-1989</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>104.42</u>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/08/2023</u> Name & Address: Jones, Cynthia 14301 Glastonbury Ave Detroit, MI 48223 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.34</u>	\$ _____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/08/2023</u> Name & Address: Cochran, Eugene 7433 Meadow Lane Ypsilanti Charter Township, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>

Page Subtotal **\$380.76**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/08/2023</u> Name & Address: Ferguson, Patricia 175 East Hickory Grove Rd Bloomfield Hills, MI 48304-1740 5. If over \$100.00 cumulative, please provide: Occupation <u>Medical Director</u> Employer <u>BCBSM</u> Business Address <u>20500 Civic Center Drive Southfield, MI 48075</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>104.42</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/08/2023</u> Name & Address: White, Sharron 31924 Olde Franklin Drive Farmington Hills, MI 48334 5. If over \$100.00 cumulative, please provide: Occupation <u>Nurse</u> Employer <u>Premier Case Management</u> Business Address <u>28552 Orchard Lake Rd, Farmington Hills, MI 48334</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>520.87</u>	\$ _____
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/08/2023</u> Name & Address: White, William 26677 W 12 Mile Rd Ste 171 Southfield, MI 48034 5. If over \$100.00 cumulative, please provide: Occupation <u>Guardian</u> Employer <u>Professional Guardian Inc</u> Business Address <u>22702 CHESHIRE CT NOVI, MI 48374</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>520.87</u>	\$ _____
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/09/2023</u> Name & Address: Lee, Jaleesa 27685 Daniel Ct. Harrison Twp., MI 48045 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ _____

Page Subtotal **\$1,196.16**

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 140268
2. Committee Name Friends of Jocelyn Howard

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 04/10/2023

Name & Address:

Mckinney, Carol
10790 Duprey Street
Detroit, MI 48224

\$ 10.72 \$ _____

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 04/10/2023

Name & Address

Johnson, Felicia
26000 South Knollwood Drive
New Baltimore, MI 48051

\$ 52.37 \$ _____

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 04/10/2023

Name & Address:

Oglesby, Calah
10150 Breezy Point Dr
Fishers, IN 46037

\$ 10.00 \$ _____

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 04/11/2023

Name & Address

Bell, Cassandra
37635 East Meadowhill Drive
Northville, MI 48167

\$ 25.00 \$ _____

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

Occupation Project Consultant Employer BCBSM

Business Address _____

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

Click Here for Memo Itemization

Page Subtotal \$98.09

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/12/2023</u> Name & Address: Crutchfield, Sharde 1057 Grandmont Inkster, MI 48141 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/12/2023</u> Name & Address: Shephard, Via 2107 Deer Run Trl Waterford, MI 48329 5. If over \$100.00 cumulative, please provide: Occupation <u>Hr Consultant</u> Employer <u>DTE</u> Business Address <u>1 Energy Plaza Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>104.42</u>	\$ _____
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/13/2023</u> Name & Address: Locklear, Charles 452 Bellevue Lake Orion, MI 48362 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>25.00</u>	\$ _____
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/13/2023</u> Name & Address: Rutherford, Joel 5683 Storrow Ct Warren, MI 48092 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ _____

Page Subtotal \$279.42

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/14/2023</u> Name & Address: <u>Ostosh, Curtiss</u> <u>8204 E 9 Mile Rd</u> <u>Warren, MI 48089</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Pastor</u> Employer <u>Harvest Time Christian Fellowship</u> Business Address <u>8204 E 9 Mile Rd, Warren, MI 48089</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>04/15/2023</u> Name & Address: <u>Corona, Kariesha</u> <u>30031 Progress Street</u> <u>Roseville, MI 48066</u>		\$ <u>10.00</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>04/15/2023</u> Name & Address: <u>Mills, Char</u> <u>2641 Bridle Road</u> <u>Bloomfield Township, MI 48304</u>		\$ <u>52.37</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>04/15/2023</u> Name & Address: <u>Taylor, Sharon E</u> <u>24025 Violet Lane</u> <u>St. Clair Shores, MI 48082</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$262.37

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/16/2023</u> Name & Address: <u>Williams, Denisha</u> <u>292 Martin Luther King Jr Blvd S</u> <u>Pontiac 48342-3333</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 #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/17/2023</u> Name & Address: <u>Hobbs, Sherrell</u> <u>500 East Las Olas Boulevard Apt 1607</u> <u>Fort Lauderdale, FL 33301</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 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/18/2023</u> Name & Address: <u>Ditty, Denise</u> <u>34830 Fontana Drive</u> <u>Sterling Heights, MI 48312</u>		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Secretary</u> Employer <u>DMC</u> Business Address <u>3980 John R St, Detroit, MI 48201</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>04/19/2023</u> Name & Address: <u>Howard, Zena</u> <u>306 South Main Street</u> <u>Kokomo, IN 46901</u>		\$ <u>25.00</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 \$345.00

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/19/2023</u> Name & Address: Martin, Kim 19443 Birwood Street Detroit, MI 48221 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>25.00</u>	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/19/2023</u> Name & Address: Howard, Epiphanty 19210 Patton Street Detroit, MI 48219 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/19/2023</u> Name & Address: Oglesby Sr., Romon 210 W King Kokomo 46901 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.34</u>	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/20/2023</u> Name & Address: Ewing, Cam 31418 Schoenherr Road 6 Warren, MI 48088 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.48</u>	

Page Subtotal \$87.82

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/20/2023</u> Name & Address: McBain, Kevin 41934 Westbury Lane Clinton Township, MI 48038 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>52.37</u>	
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/21/2023</u> Name & Address: Hill, Janice 25159 Greenbrooke Dr Southfield 48033 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>52.37</u>	
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/21/2023</u> Name & Address: Jabari, Olu 47310 Schoenherr Road Sterling Heights, MI 48313 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/22/2023</u> Name & Address: Clingman, Diona 6099 Calkins Rd Flint 48532 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	
		Click Here for Memo Itemization	

Page Subtotal **\$204.74**

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 140268
2. Committee Name Friends of Jocelyn Howard

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: Watson, Tramaine 45668 Bristol Circle Novi 48377		\$ 100.00	
PAC Receipt? ☐ YES 4. Date of Receipt <u>04/23/2023</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: Magee, Anthony 30436 Embassy Beverly Hills 48025		\$ 52.37	
PAC Receipt? ☐ YES 4. Date of Receipt <u>04/23/2023</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: Bulluck, Edith 524 Amerson Ct #B Nashville, NC 27856		\$ 10.72	
PAC Receipt? ☐ YES 4. Date of Receipt <u>04/24/2023</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 Name & Address: Joshua-Lee, Norma 27685 Daniel Ct. Harrison Twp. 48045		\$ 26.34	
PAC Receipt? ☐ YES 4. Date of Receipt <u>04/24/2023</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 \$189.43

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/24/2023</u> Name & Address: Randle, John 21951 Boulder Dr Farmington Hills, MI 48335 5. If over \$100.00 cumulative, please provide: Occupation <u>HR Professional</u> Employer <u>The HR Professor</u> Business Address <u>21951 Boulder Dr., Farmington Hills, MI 48335</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>104.39</u>	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/24/2023</u> Name & Address: Humphrey, Debbie 7090 Middlebrook Boulevard Middleburg Heights, OH 44130 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.72</u>	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/25/2023</u> Name & Address: Pierce, Dorothy 24517 East Seaton Circuit Street Warren, MI 48091 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.34</u>	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/26/2023</u> Name & Address: Mitchell, Derryl 27245 Bradford Lane Southfield, MI 48076 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>20.00</u>	

Page Subtotal \$161.45

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/26/2023</u>	
Name & Address: Kendall, Rocky 8522 Beech Dr F Sterling Heights 48312		\$ <u>25.00</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>04/26/2023</u>	
Name & Address: Rutherford, Joel 5683 Storrow Court Warren, MI 48092		\$ <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	PAC Receipt? ☐ YES	4. Date of Receipt <u>04/26/2023</u>	
Name & Address: Williams-Wards, Michelle 17975 Bayne Street Roseville, MI 40866		\$ <u>26.34</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>04/27/2023</u>	
Name & Address: Jacobs, Jim 1017 Balfour Grosse Pointe Park, MI 48230		\$ <u>312.65</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>unemployed</u> Employer <u>unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$463.99**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/27/2023</u> Name & Address: <u>Gibson, Teresa</u> <u>836 Fleming Avenue</u> <u>Jackson 49202</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.34</u>	
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/29/2023</u> Name & Address: <u>Levin, Andrew</u> <u>6015 Darramoor Rd</u> <u>Bloomfield Hills 48301</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Self</u> Business Address <u>6015 Darramoor Rd, Bloomfield Hills, 48301</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/29/2023</u> Name & Address: <u>Davenport, Marcus</u> <u>3575 Wyndam Lane</u> <u>Oakland Township, MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/30/2023</u> Name & Address: <u>Gittens, Lisa</u> <u>17395 Woodingham</u> <u>Detroit, MI 48221</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>20.00</u>	
		Click Here for Memo Itemization	

Page Subtotal \$346.34

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/30/2023</u> Name & Address: Roxann Marsh 4154 Weddell St Dearborn Heights 48125	\$ 10.00	\$ _____
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>04/30/2023</u> Name & Address: Chauntice Calhoun 27200 Parkview Boulevard 811 Warren, MI 48092	\$ 10.00	\$ _____
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>04/30/2023</u> Name & Address: Shirletta Flake 1075 Joseph campau Avenue Detroit 48207	\$ 10.00	\$ _____
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>04/30/2023</u> Name & Address: Mamie Reed 20401 Gallagher Street Detroit, MI 48234	\$ 10.00	\$ _____
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 **\$40.00**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/30/2023</u> Name & Address: Dorris Tilmon 18487 Albion Ave Detroit, MI 48234 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 10.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/30/2023</u> Name & Address: Lolita Reese 7510 W 7 Mile Rd Detroit, MI 48221 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 10.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/30/2023</u> Name & Address: Major Mickens 39769 Mazuchet Dr Harrison Township, MI 48045-1666 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 104.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/30/2023</u> Name & Address: Camilla Johnson 12477 Goulburn Detroit, MI 48205 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 10.00	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$134.00**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>04/21/2023</u> Name & Address: <u>McGee, Melody</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>04/21/2023</u> Name & Address: <u>Ford, Carleen</u>		\$ <u>10.00</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>04/29/2023</u> Name & Address: <u>Anonymous</u>		\$ <u>10.00</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>05/14/2023</u> Name & Address: <u>Echols, Deshiel</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 **\$170.00**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>04/30/2023</u> Name & Address: Farley, Tiffany 5103 Carinas Way Ct Commerce Twp, MI 48382		\$ <u>10.00</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>04/30/2023</u> Name & Address: Meeks, Erik 41735 Foster Dr Unit 206 Novi, MI 48375		\$ <u>10.00</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>05/01/2023</u> Name & Address: Howard, Erica 210 W Cherry St Apt 3 Bluffton, IN 46714		\$ <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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/01/2023</u> Name & Address: Powell, Rhonda 365 Clinton River Dr Mt Clemens, MI 48043		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Director of Operations</u> Employer <u>We the People Action Fund</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$170.00**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>05/02/2023</u> Name & Address: <u>Hill, Carolyn</u> <u>53882 Lawson Creek Dr</u> <u>Shelby Twp, MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/02/2023</u> Name & Address: <u>Collins, Charles</u> <u>1510 Ridgelawn Ave</u> <u>Flint, MI 48503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/04/2023</u> Name & Address: <u>Beach, Marian</u> <u>42511 Green Valley Dr 9-203</u> <u>Clinton Twps, MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>26.34</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/04/2023</u> Name & Address: <u>Owens, Adrian</u> <u>34527 Grand River Ave</u> <u>Farmington, MI 48335</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>21.13</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$247.47**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>05/07/2023</u> Name & Address: <u>Garrett, Robbin</u> <u>41057 Kensington</u> <u>Clinton Twp, MI 48038</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>05/09/2023</u> Name & Address: <u>Boyd, Kevin</u> <u>48881 Villa Diore Circle</u> <u>Shelby Twp, MI 48315</u>		\$ <u>104.42</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> 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>05/14/2023</u> Name & Address: <u>Cast, Adolphus</u> <u>19195 Eldridge Ln.</u> <u>Southfield, MI 48076</u>		\$ <u>2000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> 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>05/18/2023</u> Name & Address: <u>Beaver, Gary</u> <u>6521 Cornell St</u> <u>Taylor, MI 48180</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 \$2,204.42

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 140268
2. Committee Name Friends of Jocelyn Howard

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: McFee, Ahtreb		4. Date of Receipt <u>05/14/2023</u>	
PAC Receipt? ☐ YES			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
5. If over \$100.00 cumulative, please provide:			
Click Here for Memo Itemization			
6. Amount <u>\$ 20.00</u>			
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)			
3. Contribution #2 Name & Address: Howard, Jocelyn		4. Date of Receipt <u>05/15/2023</u>	
PAC Receipt? ☐ YES			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
5. If over \$100.00 cumulative, please provide:			
Click Here for Memo Itemization			
6. Amount <u>\$ 24.00</u>			
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)			
3. Contribution # 3 Name & Address: Dyas, Hattie 23600 Brandywynne Pl Southfield, MI 48033		4. Date of Receipt <u>05/18/2023</u>	
PAC Receipt? ☐ YES			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
5. If over \$100.00 cumulative, please provide:			
Click Here for Memo Itemization			
6. Amount <u>\$ 25.00</u>			
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)			
3. Contribution # 4 Name & Address: Paris, Sharleta 140 Eason St Highland Park, MI 48203		4. Date of Receipt <u>05/18/2023</u>	
PAC Receipt? ☐ YES			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
5. If over \$100.00 cumulative, please provide:			
Click Here for Memo Itemization			
6. Amount <u>\$ 26.34</u>			
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)			

Page Subtotal \$95.34

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 140268

2. Committee Name Friends of Jocelyn Howard

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>Russell, Danna</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>05/18/2023</u>		\$ <u>200.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>City of Detroit</u> Business Address <u>2 Woodward Avenue Suite 642 Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Bryant, Kevin</u> <u>131 E Marshall St</u> <u>Ferndale, MI 48220</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>05/19/2023</u>		\$ <u>1000.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Contractor</u> Employer <u>Kevin Bryant</u> Business Address <u>131 E Marshall St, Ferndale, MI 48220</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Bell, Johnny</u> <u>27070 Devonshire St</u> <u>Southfield, MI 48076</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/2023</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 # 4 Name & Address: <u>Fox, Booker</u> <u>20008 Ward St</u> <u>Detroit, MI 48235</u> PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/2023</u>		\$ <u>52.37</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 **\$1,302.37**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>05/28/2023</u> Name & Address: Stutzky, David 28926 Macon St Chesterfield Twp, MI 48047		\$ 50.00	\$ _____
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>06/03/2023</u> Name & Address: Johnson, Carolyn 3930 Forester Boulevard Auburn Hills, MI 48326		\$ 100.00	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> 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>06/05/2023</u> Name & Address: Anonymous		\$ 10.00	\$ _____
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>06/05/2023</u> Name & Address: Anonymous		\$ 20.00	\$ _____
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 **\$180.00**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>06/05/2023</u> Name & Address: <u>Isby, Vernon</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>06/08/2023</u> Name & Address: <u>Williams, Daren</u> <u>26886 Congress Ct</u> <u>Southfield, MI 48034</u>		\$ <u>25.00</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>06/08/2023</u> Name & Address: <u>Gough, Carolyn</u> <u>61060 Preakness Blvd</u> <u>South Lyon, MI 48178</u>		\$ <u>25.00</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>06/09/2023</u> Name & Address: <u>Stanford, Anita</u> <u>2605 Elton Rd NW</u> <u>Huntsville, AL 35810</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 \$150.00

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 140268
2. Committee Name Friends of Jocelyn Howard

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>06/11/2023</u> Name & Address: <u>Randle Sr, John</u> <u>21951 Boulder Dr</u> <u>Farmington, MI 48335</u>		\$ <u>104.42</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Principle Consultant</u> Employer <u>The HR Professor</u> Business Address <u>21951 Boulder Dr., Farmington, MI 48335</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>06/13/2023</u> Name & Address: <u>Walters, Terri</u> <u>47010 Liberty Bell Rd East</u> <u>Macomb, MI 48044</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Housing Counselor</u> Employer <u>NLSM</u> Business Address <u>7310 Woodward Ste 301, Detroit, MI 48202</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>06/21/2023</u> Name & Address: <u>Covington, Anita</u> <u>2904 Ravine Dr 206</u> <u>Lake Orion, MI 48360</u>		\$ <u>26.34</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>06/25/2023</u> Name & Address: <u>Davis, Daphne</u> <u>3569 Culbertson</u> <u>Rochester Hills, MI 48307</u>		\$ <u>26.34</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 **\$257.10**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>06/25/2023</u> Name & Address: Barry, Michelle 8575 Darlene Warren, MI 48093 6. Amount: \$ <u>25.00</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>06/25/2023</u> Name & Address: Thomas, Gwen 3854 Tahoe Warren, MI 48091 6. Amount: \$ <u>100.00</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Fresh Perspectives</u> Business Address <u>5736 LANCASTER LN, COMMERCE TWP MI 48382</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>06/25/2023</u> Name & Address: Waters, Tiawan 20420 Kenosha Harper Woods, MI 48225 6. Amount: \$ <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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/25/2023</u> Name & Address: Kendle, Asha 3291 Webb St Detroit, MI 48206 6. Amount: \$ <u>25.00</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 **\$200.00**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>06/29/2023</u>	
Name & Address: <u>Chandler, Gia</u> <u>21764 Newcastle Rd</u> <u>Harper Woods, MI 48225</u>		\$ <u>52.37</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>06/29/2023</u>	
Name & Address: <u>Horowitz, Art</u> <u>24311 Rosewood St</u> <u>Oak Park, MI 48237</u>		\$ <u>26.34</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>07/04/2023</u>	
Name & Address: <u>Scott, Felicia</u> <u>17327 Breckenridge Drive</u> <u>Clinton township 48038 U.S</u>		\$ <u>104.42</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Professor of Biology</u> Employer <u>Macomb Commuuty College</u> Business Address <u>17327 Breckenridge Drive</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>07/07/2023</u>	
Name & Address: <u>Doster, Shemya</u> <u>47015 Liberty Bell Rd</u> <u>Macomb, MI 48044-2575</u>		\$ <u>520.87</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Unemployed</u> Employer <u>Unemployed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$704.00**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>06/23/2023</u> Name & Address: Caracter, Stephanie		\$ 50.00	
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>06/27/2023</u> Name & Address: McCreamy, Paulette 29600 City Center Dr Warren, MI 48093		\$ 50.00	
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>07/17/2023</u> Name & Address: Stanley, Oties		\$ 50.00	
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>07/18/2023</u> Name & Address: Wynn, Pamela		\$ 50.00	
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 **\$200.00**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>07/11/2023</u> Name & Address: <u>Williams, Lea</u> <u>42738 Stratford Dr</u> <u>Van Buren Twp, MI 48111</u>		\$ <u>78.40</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>07/11/2023</u> Name & Address: <u>Howard, Lamar</u> <u>525 Caribou Dr B</u> <u>Mountain Home, ID 83647</u>		\$ <u>115.99</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Radio Programmer and Tech</u> Employer <u>U.S.A.F.</u> Business Address <u>30735 John R Rd, Madison Heights, MI 48071</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>07/11/2023</u> Name & Address: <u>Howard, Troy</u> <u>7520 potranco rd</u> <u>801 San Antonio, TX 78251</u>		\$ <u>21.13</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>07/12/2023</u> Name & Address: <u>Barnes Jr, George</u> <u>30980 Wendbrook Lane</u> <u>Beverly Hills, MI 48025</u>		\$ <u>500.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Heritage Vision Plans, Inc</u> Employer <u>Owner</u> Business Address <u>1 Woodward Ave 2020, Detroit, MI 48226</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$715.52**

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 140268

2. Committee Name Friends of Jocelyn Howard

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>07/14/2023</u> Name & Address: Philando, Nicole 22286 Allis Ln Macomb 48044 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 100.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/14/2023</u> Name & Address: Jackson, Quentin 37968 Sarnette Street Charter Township of Clinton 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 50.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/14/2023</u> Name & Address: Robinson, Bradford 30747 Krauter Street Apt 4 Garden City 48135 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 100.00	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/14/2023</u> Name & Address: Hill, Terrell 25500 Saint James Southfield, MI 48075 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ 26.48	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$276.48**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>07/14/2023</u>	
Name & Address: Wellman, Carolyn 19785 Snowden St Detroit, MI 48235		\$ <u>21.13</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>07/16/2023</u>	
Name & Address: Kocsis, Andrew 27000 Franklin Rd Apt 514 Southfield 48034		\$ <u>26.34</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>07/17/2023</u>	
Name & Address: 20 & Out Inc 25507 Burg Rd Warren 48089		\$ <u>26.34</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>07/18/2023</u>	
Name & Address: Babich, Matt 11234 Masonic Blvd Warren, MI 48093		\$ <u>10.72</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 **\$84.53**

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 140268
2. Committee Name Friends of Jocelyn Howard

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>07/19/2023</u> Name & Address: <u>Jones, Benjamin</u> <u>30760 Campbell St</u> <u>Warren, MI 48093</u>		\$ <u>104.42</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>NCADD</u> Business Address <u>2400 E McNichols Rd, Detroit, MI 48212</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>07/21/2023</u> Name & Address: <u>Underwood, Tracey</u> <u>1272 Wayburn St</u> <u>Grosse Pointe, MI 48230</u>		\$ <u>26.34</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 _____ Name & Address: _____		\$ _____	\$ _____
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 _____ Name & Address: _____		\$ _____	\$ _____
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 \$130.76

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

\$12,619.67

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 140268

CANDIDATE COMMITTEE

2. Committee Name Friends of Jocelyn Howard

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 <u>all</u> 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: Arthur Horowitz If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business 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 <u>Event Food</u> 5. Date Of Receipt: <u>06/29/2023</u> 6. Vendor Name & Address:	\$ <u>100.00</u>	\$
Click Here for Memo Itemization			
☐ Fund Raiser Contribution			
Contribution # 2 Name & Address: Keith Farmer If over \$100.00 cumulative, please provide: Occupation: <u>Marketing</u> Employer Name & Address: Navi Global 24901 Northwestern Hwy Southfield, MI 48075	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 <u>Bill Boards</u> 5. Date Of Receipt: <u>07/13/2023</u> 6. Vendor Name & Address:	\$ <u>1500.00</u>	\$
Click Here for Memo Itemization			
☐ Fund Raiser Contribution			
Contribution #3 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 **\$1,600.00**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **\$1,600.00**

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 140268
2. Committee Name Friends of Jocelyn Howard

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name United States Postal Service Address 28401 Mound Rd Warren MI 48090 ☐ Fund Raiser	Purpose: <u>Purchased PO Box</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/12/2023</u> Date	<u>\$ 83.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name City of Treasurer Address One City Square Ste 200 Warren, MI 48093 ☐ Fund Raiser	Purpose: <u>Affidavit of Identity Filing Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/14/2023</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Ultra Beauty Address 13955 Hall Road Shelby Township MI 48315 ☐ Fund Raiser	Purpose: <u>Make up session</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/21/2023</u> Date	<u>\$ 91.15</u> Click Here for Memo Itemization Type
Expenditure #4 Name Litho printing & Graphics Address 21541 Gratiot Avenue Eastpointe MI 48021 ☐ Fund Raiser	Purpose: <u>300 Brochures</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/28/2023</u> Date	<u>\$ 95.40</u> Click Here for Memo Itemization Type
Expenditure #5 Name A&K Plush Address 3293 Webb St Detroit, MI 48206-1451 ☐ Fund Raiser	Purpose: <u>Hair Stylist for Photoshoot</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/21/2023</u> Date	<u>\$ 103.50</u> Click Here for Memo Itemization Type
Subtotal this page			\$473.05
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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name JCpenny Portraits by Lifetouch Address 14300 Lakeside Circle Sterling Heights, MI 48313 ☐ Fund Raiser	Purpose: Photo for campaign ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/21/2023 Date	\$ 137.26 Click Here for Memo Itemization Type
Expenditure #2 Name Knight Vision Graphix Studio Address P.O Box 3975 Ann Arbor, MI 48106 ☐ Fund Raiser	Purpose: Campaign Branding Services ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/28/2023 Date	\$ 1,007.00 Click Here for Memo Itemization Type
Expenditure #3 Name Donorbox Address 5 3rd St Ste 900 San Francisco, CA 94103 ☐ Fund Raiser	Purpose: Donor Box Fees ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/04/2023 Date	\$ 51.74 Click Here for Memo Itemization Type
Expenditure #4 Name Litho Printing & Graphics Address 21541 Gratiot Avenue Eastpointe MI 48021 ☐ Fund Raiser	Purpose: Flyer Printing ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/11/2023 Date	\$ 450.50 Click Here for Memo Itemization Type
Expenditure #5 Name Datazapp Address 555 W Granada Blvd Ste G6 Ormond Beach, FL 32174 ☐ Fund Raiser	Purpose: Online data Support ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/15/2023 Date	\$ 366.40 Click Here for Memo Itemization Type
Subtotal this page			\$2,012.90
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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Slick Innovations Address 301 E. SECOND STREET, SUITE 302, JAMESTOWN, NEW YORK, 14701 ☐ Fund Raiser	Purpose: Text D2D Service ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/15/2023 Date	\$ 189.00 Click Here for Memo Itemization Type
Expenditure #2 Name All Pro Color Address 20750 Chesley Dr. Farmington, MI 48336 ☐ Fund Raiser	Purpose: Signs 4x4 ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/18/2023 Date	\$ 1272.00 Click Here for Memo Itemization Type
Expenditure #3 Name Jonessa Belcher Address ☐ Fund Raiser	Purpose: 100 Lawn Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/18/2023 Date	\$ 599.92 Click Here for Memo Itemization Type
Expenditure #4 Name CrisPELLI's Bakery Pizzeria Address 28939 Woodward Ave. Berkley, MI 48072 ☐ Fund Raiser	Purpose: Meeting w Video Production ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/19/2023 Date	\$ 57.60 Click Here for Memo Itemization Type
Expenditure #5 Name All Pro Color Address 20750 Chesley Dr Farmington, MI 48336 ☐ Fund Raiser	Purpose: Sign ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/19/2023 Date	\$ 37.10 Click Here for Memo Itemization Type

Subtotal this page **\$2,155.62**

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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name All Pro Color Address 20750 Chesley Dr Farmington, MI 48336 ☐ Fund Raiser	Purpose: Flyer ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/22/2023 Date	\$ 336.78 Click Here for Memo Itemization Type
Expenditure #2 Name Litho Printing & Graphics Address 21541 Gratiot Ave. Eastpointe, MI 48021 ☐ Fund Raiser	Purpose: Booklets ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/22/2023 Date	\$ 132.50 Click Here for Memo Itemization Type
Expenditure #3 Name Menards Address 32501 Van Dyke Ave. Warren, MI 48093 ☐ Fund Raiser	Purpose: Paheal Sign Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/24/2023 Date	\$ 94.30 Click Here for Memo Itemization Type
Expenditure #4 Name Panera Bread Address 22900 Federal Ave Warren, MI 48089 ☐ Fund Raiser	Purpose: Round table Meeting ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/23/2023 Date	\$ 222.73 Click Here for Memo Itemization Type
Expenditure #5 Name Office Depot/Office Max Address 21110 Greenfield Rd Oak Park, MI 48237 ☐ Fund Raiser	Purpose: Canvassing Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/26/2023 Date	\$ 165.27 Click Here for Memo Itemization Type

Subtotal this page **\$951.58**

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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Mobil Address 13560 E 10 Mile Warren, MI 48089 ☐ Fund Raiser	Purpose: Water for Meeting ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/24/2023 Date	\$ 6.99
Expenditure #2 Name Michigan Democratic Party Address 606 Townsend Lansing, MI 48933 ☐ Fund Raiser	Purpose: MDP Membership ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/26/2023 Date	\$ 25.00
Expenditure #3 Name Johnessa Belcher Address ☐ Fund Raiser	Purpose: 30 lawn Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/27/2023 Date	\$ 204.90
Expenditure #4 Name Shell Address 25025 Hoover Rd Warren, MI 48089 ☐ Fund Raiser	Purpose: Water for Canvassing ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/29/2023 Date	\$ 17.69
Expenditure #5 Name Marathon Address 28955 Van Dyke Warren, MI 48093 ☐ Fund Raiser	Purpose: Water for Canvassing ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/29/2023 Date	\$ 3.00

Subtotal this page	\$257.58
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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Savvy Sliders Address 27460 Van Dyke Warren, MI 48093 ☐ Fund Raiser	Purpose: Canvass lunch ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/29/2023 Date	\$ 10.05 Click Here for Memo Itemization Type
Expenditure #2 Name All Pro Color Address 20750 Chesley Dr Farmington, MI 48336 ☐ Fund Raiser	Purpose: Sign ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/31/2023 Date	\$ 69.06 Click Here for Memo Itemization Type
Expenditure #3 Name Daily Dozen Address 13599 E 9 Mile Rd Warren, MI 48089 ☐ Fund Raiser	Purpose: Canvassing Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/06/2023 Date	\$ 113.00 Click Here for Memo Itemization Type
Expenditure #4 Name United State Postal Service Address 28401 Mound Rd Warren, MI 48090 ☐ Fund Raiser	Purpose: Door Mail Service ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/02/2023 Date	\$ 795.31 Click Here for Memo Itemization Type
Expenditure #5 Name All Pro Web Design Address 20750 Chesley Dr Farmington, MI 48336 ☐ Fund Raiser	Purpose: Banner ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/07/2023 Date	\$ 129.85 Click Here for Memo Itemization Type
Subtotal this page			\$1,117.27
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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name USPS Address 26056 Van Dyke Ave Center Line, MI 48015 ☐ Fund Raiser	Purpose: Mailing ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2023 Date	\$ 69.93 Click Here for Memo Itemization Type
Expenditure #2 Name Captain Kool Ice Cream Address 29701 Little Mack Roseville, MI 48066 ☐ Fund Raiser	Purpose: Event ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/10/2023 Date	\$ 510.00 Click Here for Memo Itemization Type
Expenditure #3 Name Burger King Address 27010 Hoover Warren, MI 48093 ☐ Fund Raiser	Purpose: Worker Food ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/10/2023 Date	\$ 14.08 Click Here for Memo Itemization Type
Expenditure #4 Name USPS Address 26056 Van Dyke Ave Center Line, MI 48015 ☐ Fund Raiser	Purpose: Mailing ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/12/2023 Date	\$ 69.30 Click Here for Memo Itemization Type
Expenditure #5 Name Modern Maison Co Address 2641 Bridle Rd Bloomfield Hills, MI 48304 ☐ Fund Raiser	Purpose: Porch Talk Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/12/2023 Date	\$ 100.00 Click Here for Memo Itemization Type
Subtotal this page			\$763.31
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 140268
2. Committee Name Friends of Jocelyn Howard

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Modern Maison Co Address 2641 Bridle Rd Bloomfield Hills, MI 48304 ☐ Fund Raiser	Purpose: <u>Porch talk supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/21/2023</u> Date	\$ <u>150.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name USPS Address 26056 Van Dyke Ave Center Line, MI 48015 ☐ Fund Raiser	Purpose: <u>Mailing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/27/2023</u> Date	\$ <u>25.20</u> Click Here for Memo Itemization Type
Expenditure #3 Name USPS Address 28401 Mound Rd Warren, MI 48090 ☐ Fund Raiser	Purpose: <u>Mailing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/2023</u> Date	\$ <u>144.40</u> Click Here for Memo Itemization Type
Expenditure #4 Name Better Made Snack Foods Address 10148 Gratiot Ave Detroit, MI 48213 ☐ Fund Raiser	Purpose: <u>Event Snack</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/28/2023</u> Date	\$ <u>66.49</u> Click Here for Memo Itemization Type
Expenditure #5 Name Tringali Brother Bakery Address 29100 Schoenferr Dr Warren, MI 48088 ☐ Fund Raiser	Purpose: <u>Canvassing Food</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/2026</u> Date	\$ <u>71.79</u> Click Here for Memo Itemization Type

Subtotal this page

\$457.88

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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Mobil Address 13560 E 10 Mile Rd Warren, MI 48089 ☐ Fund Raiser	Purpose: Canvassing Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/01/2023 Date	\$ 8.95 Click Here for Memo Itemization Type
Expenditure #2 Name Lowe's Address 31140 Van Dyke Ave Warren, MI 48093 ☐ Fund Raiser	Purpose: Sign Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/06/2023 Date	\$ 69.90 Click Here for Memo Itemization Type
Expenditure #3 Name Salvation Army Address 114 E 4th St Royal Oak, MI 48067 ☐ Fund Raiser	Purpose: Senior Event ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/15/2023 Date	\$ 125.00 Click Here for Memo Itemization Type
Expenditure #4 Name Rebel Idealist (donorbox) Address 5 3rd St Ste 900 San Francisco, CA 94103 ☐ Fund Raiser	Purpose: Platform Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/15/2023 Date	\$ 50.00 Click Here for Memo Itemization Type
Expenditure #5 Name All Pro Color Address 20750 Chesley Dr. Farmington, MI 48336 ☐ Fund Raiser	Purpose: Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/30/2023 Date	\$ 359.84 Click Here for Memo Itemization Type

Subtotal this page

\$613.69

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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Tringali Brother Bakery Address 29100 Schoenferr Dr Warren, MI 48088 ☐ Fund Raiser	Purpose: Event Food ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/28/2023 Date Click Here for Memo Itemization Type	\$ 83.88
Expenditure #2 Name All Pro Color Address 20750 Chesley Dr. Farmington, MI 48336 ☐ Fund Raiser	Purpose: Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/04/2023 Date Click Here for Memo Itemization Type	\$ 320.39
Expenditure #3 Name All Pro Color Address 20750 Chesley Dr. Farmington, MI 48336 ☐ Fund Raiser	Purpose: Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2023 Date Click Here for Memo Itemization Type	\$ 129.85
Expenditure #4 Name Knight Vision Graph Address PO Box 3975 Ann Arbor, MI 48106 ☐ Fund Raiser	Purpose: Branding Services ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/09/2023 Date Click Here for Memo Itemization Type	\$ 369.94
Expenditure #5 Name Slick Innovations Address 301 E. SECOND STREET, SUITE 302, JAMESTOWN, NEW YORK, 14701 ☐ Fund Raiser	Purpose: Text D2D Service ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/17/2023 Date Click Here for Memo Itemization Type	\$ 205.46
Subtotal this page			\$1,109.52
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 **140268**
2. Committee Name **Friends of Jocelyn Howard**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Crispelli's Bakery Pizzeria Address 28939 Woodward Ave Berkley ☐ Fund Raiser	Purpose: Meeting ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/08/2023 Date	\$ 37.09 Click Here for Memo Itemization Type
Expenditure #2 Name Calling Post Communications Address 4316 Washington Rd Suite 102 Evans, GA 30809 ☐ Fund Raiser	Purpose: Package ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/10/2023 Date	\$ 33.99 Click Here for Memo Itemization Type
Expenditure #3 Name Slick Innovations Address 301 E. Secound St Ste 302 Jamestown, NY 14701 ☐ Fund Raiser	Purpose: Text D2D ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2023 Date	\$ 197.23 Click Here for Memo Itemization Type
Expenditure #4 Name All Pro Color Address 20750 Chesley Dr Farmington, MI 48336 ☐ Fund Raiser	Purpose: Signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/20/2023 Date	\$ 329.19 Click Here for Memo Itemization Type
Expenditure #5 Name Navi Global Address 24901 Northwestern Hwy Southfield, MI 48075 ☐ Fund Raiser	Purpose: Bill Boards ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/13/2023 Date	\$ 1025.00 Click Here for Memo Itemization Type

Subtotal this page **\$1,622.50**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$11,534.90**

Enter this total
on line 8a of
Summary Page