



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE
COVER PAGE

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: 01/01/20 to 07/19/20

1. Committee I.D. Number

97273

4. Candidate Last Name First Name M.I.

Herr Jason A

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

Board Member - Local

4b. County of Residence **OAKLAND**

6. Treasurer's Name & Residential Address

**Larry C. Herr
2135 Briggs St.
Waterford, MI. 48329**

5. Committee's Mailing Address

**3160 Warren Dr.
Waterford, MI. 48329**

Area Code and Phone (248) 212-6326
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: (248) 673-2928

7. Treasurer's Business Address

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

Area Code and Phone _____

Area Code and Phone _____

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.

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

08/04/20

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 Larry C. Herr
Type or Print Name

Signature

Date

07/19/2020

Candidate Jason Herr
Type or Print Name

Signature

Date

07/19/2020



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97273

2. Committee Name Friends of Jason Herr

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 02/23/20

Name & Address:

Nicole Breadon
9881 Marmora
Clarkston, MI 48348

\$ 50.00

\$ 50.00

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

Occupation Not Employed Employer Not Employed

[Click Here for Memo Itemization](#)

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/20

Name & Address

Nicole Breadon
9881 Marmora
Clarkston, MI 48348

\$ 25.00

\$ 75.00

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

Occupation Not Employed Employer Not Employed

[Click Here for Memo Itemization](#)

Business Address

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/20

Name & Address:

David Pugh
3618 Baybrook Dr.
Waterford, MI. 48329

\$ 25.00

\$ 25.00

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

Occupation supervisor Employer Transglobal

[Click Here for Memo Itemization](#)

Business Address 1020 Doris Auburn Hills, MI 48326

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/20

Name & Address

Gregory Bastien
2080 Joy Rd.
Auburn Hills, MI. 48326

\$ 25.00

\$ 25.00

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

Occupation Not Employed Employer Not Employed

[Click Here for Memo Itemization](#)

Business Address

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

Page Subtotal \$ 125.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97273
2. Committee Name Friends of Jason Herr

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>06/12/20</u>			
Name & Address: <u>Kara Sprague</u> <u>8631 Hidden Acre Ct.</u> <u>Clarkston, MI 48348</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer <u>Not Employed</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/19/20</u>			
Name & Address: <u>Jose Rodriguez</u> <u>1681 Broadway St.</u> <u>Bigelow, MN. 56117</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Avionics tech</u> Employer <u>Michigan Aviation</u>		Click Here for Memo Itemization	
Business Address <u>6150 Highland Rd. Waterford, MI 48327</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/01/20</u>			
Name & Address: <u>Ian Model</u> <u>6969 Hatchery Rd</u> <u>Waterford, MI. 48327</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Operations</u> Employer <u>Brightline Technologies, Inc</u>		Click Here for Memo Itemization	
Business Address <u>565 E Grand River Brighton, MI. 48116</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/09/20</u>			
Name & Address: <u>Kent Douglas</u> <u>2191 Kohler St.</u> <u>Waterford, MI 48329</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer <u>Not Employed</u>		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal \$200.00

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

Enter this total on
line 3a of Summary
Page.



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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 97273

2. Committee Name Friends of Jason Herr

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>07/09/20</u> Name & Address: <u>Rei Golay</u> <u>1735 Scott Lake Rd.</u> <u>Waterford, MI 48328</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer <u>Not Employed</u> 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>07/09/20</u> Name & Address: <u>Eve Pickman</u> <u>315 Rivard Blvd</u> <u>Waterford, MI 48327</u>		\$ <u>15.00</u>	\$ <u>15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Copywriter</u> Employer <u>One 10 Marketing</u> Business Address <u>2800 Livernois Suite 400 Troy, MI. 48083</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>07/10/20</u> Name & Address: <u>Barbara Spiece</u> <u>186 Hickory Ln.</u> <u>Waterford, MI. 48327</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer <u>Not Employed</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>07/16/20</u> Name & Address: <u>Robin Herr</u> <u>2135 Briggs St.</u> <u>Waterford, MI 48329</u>		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Claims Rep.</u> Employer <u>Sedgwick</u> Business Address <u>8155 Sedgwick Way Memphis, TN 38125</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$685.00

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

\$1,010.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 97273
2. Committee Name Friends of Jason Herr

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>The Original Print Shoppe</u> Address <u>106 Tregent St.</u> <u>Pontiac, MI. 48342</u> ☐ Fund Raiser	Purpose: <u>Campaign yard signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/17/20</u> Date	\$ <u>716.03</u>
Expenditure #2 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$716.03**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$716.03**

Enter this total
on line 8a of
Summary Page