

RECEIVED

JUL 22 2024

JACKSON COUNTY CLERK'S OFFICE

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE COVER PAGE

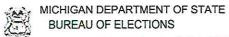
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	5/1/24 to 7/21/24	_
1. Committee I.D. Number		Candidate Last Name	First Name M.I.	
2024017		Hopkins	Jared L	
2. Committee Name			trict # or Community Served (If applicable)	_
		Jackson County Prose	cuting Attorney	•
Jared L. Hopkins for Jackson County Pros	secutor	4b. County of Residence JAC	KSON	
5. Committee's Mailing Address 205 W. Franklin St.		6. Treasurer's Name & Reside Ronald L. Rose	ntial Address	
Jackson, MI 49201		718 W. Washington	Δνα	
		Jackson, MI 49201	AVG	
		,		
Area Code and Phone (517) 841-6021				
If the address in this box is different from the commi mailing address on the Statement of Organization, n	ttee			
be sent to this address by the filing official.	nan may	Area Code & Phone (517) 9:	37-1077	
7. Treasurer's Business Address		Designated Record Keeper' Designated Record Keeper)	s Name and Address (If the committee has a	
		Designated Necold Neeper)		
Area Code and Phone		Area Code and Phone		
9. TYPE OF STATEMENT	Required Of	NLY if candidate	9e. Dissolution of Candidate Committee	
9a. Pre-Election OR 9b. Post-Election		ballot for the	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is he	t
Pre-Election or Post-Election Statement relates to:	ourrent your		by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,	sie
X Primary	July Quar	terly	owes no lates fees or has any oustanding debt.	
General	October C	Quarterly	Tuesda a state of the state of	
Convention			Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.	
Special	9c. 🗂 .	EL SECURIO SE		
School	L Annua	al Statement () Coverage Year	Effective date of dissolution	
Caucus	9d. Amer	idment to Campaign Statement		
	(Com	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of residual funds must be reported on	1
	amen		Schedule 1B and the Summary Page.	
Date of Election, Convention or Caucus				
08/06/2024				
10. Verification: I\We certify that all reasonable diligemy\our knowledge and belief the contents are true, a	ence was used accurate and o	in the preparation of this statemomplete.	ent and attached schedules (if any) and to the best of	
Current Treasurer or Ronald L. Ro	se	ne of	7/21/24	
Designated Record keeper Type or Print Name		Signature		
lored L. Hankins		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-1.1.	
Candidate Jared L. Hopkins		1 101	Date 7/21/24	
Type or Print Name		Signature		

1. Committee I.D. Number 2024017

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

DESCRIPTION OF THE PROPERTY OF		A J. Massallo.
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	(3a.) \$ 31,600.00	
a. Itemized (Schedule 1A - Column 6)		-
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$31,600.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$31,600.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$252.80	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$27,585.61	
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.) \$ \$27,585.61	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements	40.0	
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)	90.00	
DEBTS AND OBLIGATIONS	(11.) \$ \$0.00	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$31,600.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$31,600.00	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.)- \$ \$27,585.61	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$4,014.39	•



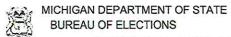
1. Committee I.D. Number

2024017

CANDIDATE	COMMITTEE
-----------	-----------

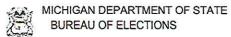
2. Committee Name

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 05/01/2024 Name & Address: Jared L. Hopkins	9	
1728 Sevenoaks Dr. Jackson, MI 49203	_{\$} 2000.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Lawyer Employer Self		
Business Address 205 W. Franklin St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/02/2024 Name & Address		
Marco R. Zanetti 5080 Walbrook Ct. West Bloomfield, MI 48301	_{\$} 250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation IT Sales Employer SHI International Corp		
Business Address 290 Davidson Ave. Somerset, NJ 08873		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/02/2024 Name & Address:	-	
Corey J. McCord 5283 Thames Ct. Jackson, MI 49201	_{\$} 1000.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Lawyer Employer Self		
Business Address 300 W. Washingto Ave Jackson, MI 49201 Ste. 400		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/02/2024 Name & Address		
Charles M.Hamlin 6089 Sterling Rd. Traverse City, MI 49686	_{\$} 250.00	\$
5. If over \$100.00 cumulative, please provide:	Cliek Here fo	r Mama Itamization
Occupation Lawyer Employer County of Grand Traverse	Click Here to	r Memo Itemization
Business Address 328 Wshington St. Traverse City, MI 49684		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota Grand Total of All Schedules 1A (Complete on last page of Schedule	Enter this total on	
Page 1 of \\	line 3a of Summary Page.	



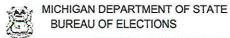
CANDIDATE	COMMITTEE	2. Committee Nar

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 05/03/2024 Name & Address:		
Michael K. Falahee		
1711 Maybrook Rd. Jackson, MI 49201	,200.00	\$
5. If over \$100.00 cumulative, please provide:	Ψ	
Occupation Lawyer Employer American Title	Click Here fo	r Memo Itemization
Business Address 280 W. Cortland St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address		
Jean E. Wymer		
13313 King Rd. Concord, MI 49237	<u>\$</u> 1400.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address:		
John Hayes 2600 Robinson Rd.	s300.00	
Jackson, MI 49201	\$000.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Court Officer Employer Judicial Services Group		
Business Address 401 S. Jackson St. Jackson, MI 49201		1
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address		
Jeff Kirkpatrick		(9)
401 S. Jackson St.	\$300.00	c
Jackson, MI 49201 5. If over \$100.00 cumulative, please provide:		\$
Occupation Court Officer Employer Judicial Services Group	Click Here for	Memo Itemization
Business Address 401 S. Jackson St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$2,200.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	_
Pageof\\	line 3a of Summary Page.	



2.	Committee	Name

CANDIDATE COMMITTEE 2. Committee Name Commit	tee to Elect Jared L. Hopkins	forJackson County Prosecutor
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 05/04/2024 Name & Address: Don J. Nowka 10244 E. San Remo Blvd	V	
Traverse City, MI 49684	_{\$} 100.00	\$
5. If over \$100.00 cumulative, please provide: Occupation Insurance Agent Employer Bayview Insurance Agency	Click Here fo	or Memo Itemization
Business Address 4200 Three Mile Rd. Traverse City, MI 49686		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/04/2024 Name & Address		
Teri L Langley 1116 Candela Ln. Grand Ledge, MI 48837	<u>\$</u> 200.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Executive Director Employer Disability Network		
Business Address 901 E. Mt. Hope Ave. Lansing, MI 48910		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/05/2024 Name & Address:		
Justin T. Golden 8 Holly Hill Lane	,200.00	
Katonah, NY 10536	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Greatwater Opportunity Capital		
Business Address 8901 E. Jefferson Ave. Detroit, MI 48214		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/05/2024 Name & Address		
Michael J Way		
Jackson, MI 49201	_{\$} 75.00	\$
5. If over \$100.00 cumulative, please provide:	Click Hore for	Memo Itemization
Occupation Employer	Olick Here to	Wellio Itellization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		·
Page Subtotal	\$575.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 3 of \\	Enter this total on line 3a of Summary Page.	



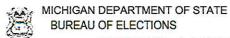
CANDIDATE COMMITTEE

1. Committee I.D. Number

2024017

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Comm Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Derrick E. White	o5/06/2024		
1097 Pointe North Dr.		,25.00	xx2
Jackson, MI 49201 5. If over \$100.00 cumulative, please provide:		*	\$
Occupation Employer		Click Here for	Memo Itemization
	AND THE CONTRACT OF THE CONTRA		
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
	pt 05/07/2022		
Name & Address	00/01/2022		
Samuel Dobbin 3417 E WALMONT RD JACKSON, MI 49203		_{\$} 100.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization ▼
Occupation Fabricator Employer Alro Steel			monio komization
Business Address 3100 E. High St. Jackson, MI 49201			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	^{ipt} 05/09/2024		
Name & Address: Joesph S. Filip			
755 W. Michigan Ave.		_s 100.00	
Jackson, MI 49201		-	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization ▼
Occupation Retired Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt YES 4. Dat	eipt 05/10/2024	Section Control of the Control of th	
David K. Elwell			
4219 Clinton Rd.		,50.00	
Jakkson, MI 49201		\$00.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization ▼
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	\$275.00	
G	rand Total of All Schedules 1A		-
	olete on last page of Schedule)	Enter this total on	٦
Page 4 of \\		line 3a of Summary Page.	



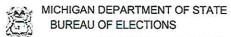
1. Committee I.D. Number

2024017

CANDIDATE	COMMITTEE
------------------	-----------

2. Committee Name

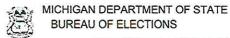
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address: Thaddeus J Szynal 29267 Chelsea Crossing Farmington Hills, MI 48331	_{\$} 2000.00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer	Click Fiele for Metrio Reffization
Business Address	
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/08/2024 Name & Address	
Gerald L. Hopkins 25501 Trost Blvd. Lot 9-24 Bonita Springs, FL 34135	<u>\$</u> 2000.00 <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer	_
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address:	
Joann M. Seaburg 42768 Colling Dr. Canton, MI 48188	\$200.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer_	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/23/2024 Name & Address	
Daniels Watts	
4879 COUNTRY LN JACKSON, MI 49201	_{\$} 500.00_ _{\$}
5. If over \$100.00 cumulative, please provide:	Click Horo for Manage to the Comment
Occupation Owner Employer Tri County Water	Click Here for Memo Itemization
Business Address 2701 Wildwood Ave. Jackson, MI 49201	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	, , , , , , , , , , , , , , , , , , , ,
5 of \\	Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE	2. Committee

2. Committee Name

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 05/13/2024 Name & Address: Benjamin S. Jordan 4945 Country Lane	500.00	
Jackson, MI 49201	<u>\$500.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Owner Employer BSJ Real Estate	00.0.10	
Business Address 3608 Wildwood Ave. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/16/2024 Name & Address		
Benjamin S. Jordan 4945 Country Lane Jackson, MI 49201	_{\$} 500.00	_{\$_} 1000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Skyway Aviation		
Business Address 3608 Wildwood Ave. Jackson, MI 49201		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/24/2024		entre de la constante de la co
Jared L. Hopkins 1728 Sevenoaks Dr. Jackson, MI 49201	\$8000.00	_{\$} 10,000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization ▼
Occupation Lawyer Employer Self		
Business Address 205 W. Franklin St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/03/2024 Name & Address		
John R Southworth 1022 NW 19th Terr Cape Coral, FL 33993	_{\$} 50.00	\$
5. If over \$100.00 cumulative, please provide:	Cliek Hore for	Mama Itamization
Occupation Employer	Click Here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$9,500.00 Enter this total on line 3a of Summary Page.	



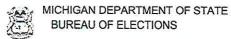
CANDIDATE COMMITTEE

1. Committee I.D. Number

2024017

2. Committee Name

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 06/05/2024 Name & Address: Theodore J. Lefere 1744 Sevenoaks Dr. Jackson, MI 49203	_{\$} 200.00	\$
5. If over \$100.00 cumulative, please provide: Occupation Vice President Employer Pioneer Foundry Co. Inc.	Click Here fo	r Memo Itemization
Business Address 606 Water St. Jackson, MI 49203 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/01/2024 Name & Address		
Georgeann E. Rose 2113 Ganton Dr. Jackson, MI 49203	<u>\$100.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/02/2024 Name & Address:		
Shannon M. Kulhawik 6349 E MICHIGAN AVE JACKSON, MI 49201	\$500.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization ▼
Occupation Bussiness Manager Employer Huff Auto Group		
Business Address 2800 Wildwood Ave. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/2024 Name & Address		
Pierre J. Tedders 7404 BROWNS LAKE RD JACKSON, MI 49201	_{\$} 1250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Dentist Employer Tedders Family & Inplant Dentistry		
Business Address 3595 Ann Arbor Rd. Jackson, MI 49202		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$2,050.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 7 of 11	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 20

2024017

2. Committee Name

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 Name & Address:	06/14/2024		
Jared L. Hopkins			
1728 Sevnoaks Dr.		2200.00	12 200 00
Jackson, MI 49201		_{\$} 2200.00	_{\$} 12,200.00
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation Lawyer Employer Self		Ollok Here to	i Wemo itemization
Business Address 205 W. Franklin St. Jackson, MI 49201			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	06/11/2024		
Kirk N. Mercer			
8075 S. Jackson Rd.		_s 500.00	¢
Jackson, MI 49201		T	Ψ
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Owner Employer RW Mercer Co	•		
Business Address 2322 Brooklyn Rd. Jackson, MI 49201			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	06/25/2024		
Peter J Langley		000.00	
1116 Candela Ln.		\$200.00	\$
Grand Ledge, MI 48837		Oli ala I I anno f	
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization ▼
Occupation Lobbiest Employer Public Affairs	Associates		
Business Address 120 N. Washington Square Lansing, MI 48933			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	ot 06/26/2024		
Phillip B. Navarre			
605 W. Michigan Ave.		,500.00	
Jackson, MI 49201		\$000.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Lawyer Employer Self		e diok riele lei	Wemo Remization
Business Address 605 W. Michigan Ave. Jackson, MI 492	01		
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	\$3,400.00	
	nd Total of All Schedules 1A		
(Comple	te on last page of Schedule)	Enter this total on	J
Page 8 of 1		line 3a of Summary Page.	

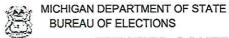


CANDIDATE COMMITTEE

1. Committee I.D. Number _____2024017

2. Committee Name

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 06/21/2024 Name & Address: Craig A. Osborne 316 S BOWEN JACKSON, MI 49203	_s 200.00	e
5. If over \$100.00 cumulative, please provide:	\$	<u> </u>
Occupation Court Officer Employer Osborne Process Service	Click Here fo	r Memo Itemization
Business Address P.O Box 4416 Jackson, MI 49204		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/27/2024 Name & Address		
Allan L. Tompkins 12555 Leisure Lane Horton, MI 49246	_{\$} 200.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/01/2024 Name & Address:		
George D. Lyons 1818 Lockmoor Blvd. Jackson, MI 49203	<u>\$500.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization ▼
Occupation Lawyer Employer Self		
Business Address 205 W. Franklin St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/01/2024 Name & Address		
Steven D. Hackworth 4242 Zygmunt Dr. Jackson, MI 49201	_{\$} 2000.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Pro DJ's	Click Here for	Wellio itemization
Business Address P.O. Box 6555 Jackson, MI 49204		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$2,900.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 9 of 11	Enter this total on line 3a of Summary Page.	



Page____of___\

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

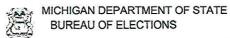
Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

2. Committee Name

line 3a of Summary

Page.

CANDIDATE COMMITTEE 2. Committee Name		
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 07/03/2024 Name & Address: Lorraine Taraskiewicz 4536 Sid Dr. Jackson, MI 49201	_s 25.00	\$
5. If over \$100.00 cumulative, please provide:	3 4	
Occupation Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/04/2024 Name & Address		-0.7 -0.5 37
Gary A. Hutchinson 5274 Iroquois Ct. Clarkston, MI 48348	§200.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/09/2024 Name & Address:		
Robert D. Flack 2720 Loraine St. Jackson, MI 49202	_{\$} 150.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Lawyer Employer Self		
Business Address 2720 Loraine St. Jackson, MI 49202		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/09/2024 Name & Address Connie M. Soto 2219 Treys Trail Mishawaka, IN 46545	_{\$} 1100.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer	Click Here for	Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,475.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
	Enter this total on	



CANDIDATE COMMITTEE

2. Committee Name

JANDIDATE COMMITTEE			
Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political 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 Address: Kevin M. Thompson 405 S. Jackson St. Jackson, MI 49201	eeipt 07/16/2024	_{\$} 125.00	\$
5. If over \$100.00 cumulative, please provide:		Cliek Here to	r Mama Itamization
Occupation Lawyer Employer Self		Click Here to	r Memo Itemization
Business Address 405 S. Jackson St. Jackson, MI 492	01.		
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt YES Address	eeipt 07/12/2024		
Allan L. Tompkins		400.00	
12555 Leisure Lane		_s 400.00	_{\$} 600.00
Horton, MI 49246			
5. If over \$100.00 cumulative, please provide:		Click Here for	r Memo Itemization
Occupation Retired Employer	· · · · · · · · · · · · · · · · · · ·		
Business Address	_		
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Re Name & Address:	oceipt 07/18/2024		
Jared L Hopkins		500.00	
1728 Sevenoaks Dr		\$500.00	\$
Jackson, MI 49203		Click Here for	Memo Itemization ▼
5. If over \$100.00 cumulative, please provide:	1ª	Olloit Fiere for	Wellio Remization
Occupation Lawyer Employer Self			
Business Address 205 W. Franklin St. Jackson, MI 49201 Type of Contribution: Direct Loan from a person	Total Daires		
	Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of ReName & Address			
		\$	\$
5. If over \$100.00 cumulative, please provide:		011111	
Occupation Employer		Click Here for	Memo Itemization
Business Address		8	
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	\$1,025.00	
	Grand Total of All Schedules 1A	\$31,600.00	
(Co	mplete on last page of Schedule)	Enter this total on	_
11 11 Page of		line 3a of Summary Page.	



ITEMIZED IN-KIND CONTRIBUTIONS **SCHEDULE 1-IK**

1. Committee I. D. Number 2024017

CANDIDATE COMM	2. Committee Name Committee to Elect Jared L. Hopkins	for Jackson County Prosec	cutor
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 all 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 PAC Receipt? Yes Name & Address: Right to Life of Michigan Political Action Committee 2340 Porter St SW Grand Rapids, MI 49509 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description List Rental 5. Date Of Receipt: 07/21/2024 6. Vendor Name & Address:	252.80 s	
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes 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	\$	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	5. Date Of Receipt: 6. Vendor Name & Address: Click	ck Here for Memo Ite	emization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes 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 Coancider of Bank Loan \$	\$_	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	ck Here for Memo Ite	emization
Fund Raiser Contribution			
	Page Subtotal	\$252.80	
	Grand Total of all Schedules 1-IK	\$252.80	

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)

Page 1 of 1

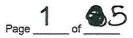


SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 2024017

Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

OANDIDATE OOMINITTEE 2. C	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name PNC Bank	(06/03/2024	s 105.95
Address	Purpose: Clover Services	Date	1.00.00
1965 Boardman Rd	0	lara for Mama I	temization Type
Jackson, MI 49202		ere for Merrio I	ternization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name PNC Bank		06/03/2024	\$ 86.30
	Purpose: Clover Service Fee	Date	\$ 00.30
Address	Purpose: Olover Gervice ree		
1965 Boardman Rd	Click H	lere for Memo I	temization Type
Jackson, MI 49202			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Menards		06/03/2024	s 764.24
Address	Purpose: Sign Posts	Date	3 <u>7 04.24</u>
3588 Page Ave.	Pulpose. 3		
Jacksoin, MI 49203	Click H	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name PNC Bank		00/4//0004	
i i i o banii		06/14/2024	\$ 7.50
Address	Purpose: Purchase of Checks	Date	
1965 Boardman Rd	PATE I		
Jackson, MI 49202	Click H	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name WAM		0010010001	
		06/20/2004	\$ 1838.70
Address 5510 33rd St. SE	Purpose: RTL Mailer	Date	
Grand Rapids, MI 49512	Click H	lere for Memo I	temization Type
Crana rapido, Mil-10012	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$2,802.69
	Connel Tatal of all (Cabadulas 4D	Ψ2,002.00
	Grand Total of all S		



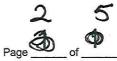


SCHEDULE 1B CANDIDATE COMMITTEE

202401

Committee to Flect Jared I	Honkins for Jackson C	County Prosecuto

2. C	ommittee Name		
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Canva US Inc.		05/06/2024	s 178.00
Address	Purpose: Postcards	Date	
3212 E. Cesar Chavez St Building 1, Suite 1300	Click H	lere for Memo	Itemization Type
Austin, TX 78702	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Canva US Inc.		05/07/2024	s 103.00
Address	Purpose: Endorsement Cards	Date	(
3212 E. Cesar Chavez St Building 1, Suite 1300	Click F	Here for Memo	Itemization Type
Austin, TX 78702			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Canva US Inc.		06/12/2024	s 625.00
Address	Purpose: Palm Cards	Date	* 020100
3212 E. Cesar Chavez St			
Building 1, Suite 1300	Click F	lere for Memo	temization Type
Austin, TX 78702	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	octomon		
Name Amazon Inc		05/30/2024	
	Pollogno	Date	\$ <u>186.45</u>
Address	_{Purpose:} Balloons		
410 Terry Ave N	Official		
Seattle, Washington 98909	Click F	tere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name 3D Embrodiery & Screen Printing			
3D Emblodiery & Screen Filling		05/29/2024	\$9984.94
Address	Purpose: Yard Signs and Shirts	Date	¥ <u>3304.54</u>
7310 King Rd.	Clieb	laus fau Maus	
Spring Arbor, MI 49283		nere ior iviemo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		<u> </u>
	Subto	tal this page	\$11,077.39
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	





2024017

1. Committee I. D. Number

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Right to Life of Michigan Inc.		06/20/2024	\$ 84.60
Address	Purpose: RTL Mailer Name List	Date	A
PO Box 901	5.000 1000 4000	loro for Mam - 1	tomization Time
2340 Porter St. SW Grand Rapids, MI 49509		lere for iviemo i	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #2	statement		
		07/02/2024	
Name PNC Bank		07/02/2024	\$ <u>64.80</u>
Address	Purpose: Clover Service Fee	Date	
1965 Boardman Rd.		oro for Massac '	tomization Turn [
Jackson, MI 49202	Click H	ere ioi iviemo i	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name PNC Bank		07/02/2024	
1 NO Bank	Clayer Sandas Fac		\$ <u>6.95</u>
Address 1965 Boardman Rd.	Purpose: Clover Service Fee	Date	
Jackson, MI 49202	Click H	ere for Memo I	temization Type
04010011, WII +0202	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement	· · · · · · · · · · · · · · · · · · ·	
Name Graphics 3. Inc.		00/04/055	
Οιαριίιου Ο. ΙΠΟ.		06/24/2024	\$ 4660.16
Address	Purpose: Mailer #1	Date	
205 W. Garfield Ave.	~		
Coldwater, MI 49036	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Graphics 3. Inc.		07/00/2024	
	Purpose: Mailer #2	07/09/2024	\$5056.02
Address 205 W. Garfield Ave.	Purpose: Wallot #2	Date	20. 20.00
Coldwater, MI 49036	Click H	lere for Memo	temization Type
,	Check box if this expenditure is payment of		-
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$9,872.53
	Grand Total of all		
	(Complete on last page	e of Schedule)	





2024017

1. Committee I. D. Number

Committee Name
 Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name McKibbin Media Group	Č	07/02/2024	\$ 1998.00
•	Purpose: Radio Advertisement	Date	\$ 1990.00
Address 1700 Glenshire Dr.	Purpose:		
Jackson, MI 49201	Click H	ere for Memo I	temization Type
Cacheon, Militozo i	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Bright Spark Strategies		07/08/2024	s 1000.00
	Purpose: Mailer List	Date	3 1000.00
Address	Purpose: Widner List		
106 W. Allegan	Click H	ere for Memo I	temization Type
Lansing, MI 48933			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name JTV Inc.		07/16/2024	\$675.00
Address	Purpose: Television Advertising	Date	<u> </u>
152 W. Mlchigan Ave.			
Jackson, MI 49201	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Facebook		07/09/2024	
. doodook		 Date	\$ 35.00
Address	Purpose: Social Media Ads	Date	11-
1 Hacker Way		2 2	
Menlo Park, CA 94025	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Facebook		0740,000	
ST PRODUCTION ON THE PRODUCTION OF THE PRODUCTIO		07/10/2024	\$15.00
Address	Purpose: Social Media Ads	Date	
1 Hacker Way Menlo Park, CA 94025	Click H	lere for Memo I	temization Type
Michio Fair, OA 34023	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
		tal this page	60 700 00
	Subio	iai uno page	\$3,723.00
	Grand Total of all (annual Statement and Control of	
	(Complete on last page	or Schedule)	





1. Committee I. D. Number 2024017

	Committee to Elect Jared L. Hopkins for Jackson County Prosecu
2. Committee Name	Committee to Elect cared E. Flophins for backsoff County 1 103CCC

Name and address of person or vendor to whom paid	Purpose (Required Information)	I E Dete	6 Amount
o. Name and address of person of Vehicor to whom paid	4. Pulpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Facebook	(07/11/2024	05.00
1 doebook	OIMA-UA-I		s <u>25.00</u>
Address	Purpose: Social Media Ads	Date	
1 Hacker Way	Click	oro for Momo	Itemization Type
Menlo Park, CA 94025	Cilck 11	ere for Mento	itemization Type
\$4000V	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
A m-			
Name Facebook		07/12/2024	s 35.00
2 00	Purpose: Social Media Ads	Date	\$ 00.00
Address	Purpose: Occidi Wicdia Ads		
1 Hacker Way	Click	oro for Momo	Itomination Town
Menlo Park, CA 94025	Click H	ere for ivierno	Itemization Type ▼
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name Facebook		07/15/2024	
	0-1-1-14-11-4-1		\$50.00
Address	Purpose: Social Media Ads	Date	
1 Hacker Way			
Menlo Park, CA 94025	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	octoment		
Name			
Address	•	Date	\$
Addiess	Purpose:		
	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
5	statement		
Expenditure #5			
Name			
Address			\$
Address	Purpose:	Date	
	Cliab Li	ere for Mome	Itemization Type
	Check box if this expenditure is payment of	sie ioi iviellio i	iternization Type
	debt or obligation reported on previous		
Fund Raiser	statement	ARREST CO.	
	Subtot	al this page	\$110.00
			ψ110.00
	Grand Total of all S (Complete on last page		\$27,585.61
	(Complete on last page	or scriedule)	

5 Page **5** of 5



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

RECEIVED

JUL 2 6 2024 JACKSON COUNTY CLERK'S OFFICE

www.Michigan.gov/sos

LATE CONTRIBUTION REPORT

1. Your Committee ID#: 2024017	
2. Your Committee Name. Committee to Elect Jared L. Hopkins for Jackson County Prosecutor	
3. Date Late Contribution(s) Received: 07/24/24 (Only one Date per Sheet)	
 Late Contribution Reports are required when a Candidate committee receives a single contribution or a cumulative contribution from the same constitution of the candidate is participating. See Appendix G of the Campaign Finance Manual. A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the last campaign statement required and the 3rd day before an election. See Appendix G of the Campaign Contributions are anything of monetary value including contributions of money, in-kind and loans to the constitute Contribution Reports are not waived by the Reporting Waiver. Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximus per report. Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution Official. Electronic Filers on the state level must file all Late Contribution Report electronically. The Late Contribution must also be reported on the next Campaign Statement owed by the committee. 	re an election where a single closing date of the aign Finance Manual mmittee. m fee is \$2,000.00
4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Cumulative Amount during LCR Period.
Contributor Name and Address: Jared L. Hopkins 1728 Sevenoaks Dr. Jackson, MI 49203 (If Individual, also provide:) Occupation Lawyer Employer / Business Address Loan Employer / Business Address	\$4,785.31
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address	
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address	
Contributor Name and Address:	
(If Individual, also provide:) Occupation Employer / Business Address	



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

CANDIDATE COMMITTEE

SEP 0 5 2024 JACKSON COUNTY FOR OFFICIAL USE ONLY

COVER PAGE

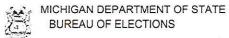
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.		3. This Statement covers From: 07/22/2024 to 08/26/2024			
1. Committee I.D. Number		Candidate Last Name	First Name	M.I.	
2024017		Hopkins	Jared	L	
		4a. Office Sought Including Dis	trict # or Community Served (If applicable)		
2. Committee Name		Jackson County Prose	cuting Attorney	+	
Jared L. Hopkins for Jackson County Pro	secutor	4b. County of Residence JAC	KSON	,	
5. Committee's Mailing Address 205 W. Franklin St. Jackson, MI 49201		6. Treasurer's Name & Residential Address Ronald L. Rose 718 W. Washington Ave. Jackson, MI 49201			
Area Code and Phone (517) 841-6021 If the address in this box is different from the comm mailing address on the Statement of Organization, to be sent to this address by the filing official.		Area Code & Phone (517) 9	73-1077		
7. Treasurer's Business Address		8. Designated Record Keeper Designated Record Keeper)	s Name and Address (If the committee has a	<u>t</u>	
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT			9e. Dissolution of Candidate Committee		
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary	Required ON is not on the current year:		By checking this item I/We certify any oby the committee to the candidate or his or by discharged and forgiven, and no longer of the committee. The committee has no oust owes no lates fees or has any oustanding definition.	her spouse is here collectible from anding assets,	
General Convention	October Q	uarterly	Further, if the dissolution cannot be granted considered a request for the Reporting Waiv		
Special School	9c. Annua	Il Statement () Coverage Year	Effective date of dissolution		
Caucus	(Comp	dment to Campaign Statement olete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition of residual funds mus Schedule 1B and the Summary Page.	t be reported on	
Date of Election, Convention or Caucus					
08/06/2024					
10. Verification: I/We certify that all reasonable dilig	ence was used	in the preparation of this statement	ent and attached schedules (if any) and to the	e best of	
my\our knowledge and belief the contents are true. Current Treasurer or Designated Record keeper Ronald L. Ro Type or Print Name		Signature		2024	
Candidate Jared L. Hopkins Type or Print Name		Sighature		2024	

1. Committee I.D. Number 2024017

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

Column I	Column II
This Period	Column II Cumulative this election cycle
4.985.31	
	\$36 585 31
(3c.) \$_\psi_4,900.51	(18.) \$ \$36,585.31
(4.) \$	(19.) \$
(5.) \$ \$4,985.31	(20.) \$ \$36,585.31
(6.) \$	(21.) \$ \$252.80
(7.) \$	(22.) \$
(8a.) \$ \$5,125.04	
(8b.) \$	
(8c.) \$	
(9.) \$ \$5,125.04	(23.) \$ \$32,710.65
(10a.) \$	
(40h.) ©	
(106.) \$	
(11.) \$ \$0.00	(24.) \$
(12a.) \$	
(12b.) \$ \$0.00	
(13.) \$ \$4,014.39 (14.) + \$ \$4,985.31 (15.) = \$ \$8,999.70 (16.) - \$ \$5,125.04 (17.) \$ \$3,874.66	*
	(3a.) \$ 4,985.31 (3b.) \$ NOT APPLICABLE (3c.) \$ \$4,985.31 (4.) \$ (5.) \$ \$4,985.31 (6.) \$ (7.) \$ (8a.) \$ (7.) \$ (8b.) \$ (8c.) \$ (9.) \$ \$5,125.04 (10a.) \$ (10b.) \$ (10b.) \$ (11.) \$ \$0.00 (12a.) \$ (12a.) \$ (12b.) \$ \$0.00 BALANCE STATEMENT (13.) \$ \$4,014.39 (14.) + \$ \$4,985.31 (15.) = \$ \$8,999.70 (16.) - \$ \$5,125.04



CANDIDATE COMMITTEE

2. Committee Name

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 07/25/2024 Name & Address: Jared L. Hopkins 1728 Sevenoaks Dr. Jackson, MI 49203	_{\$} 4785.31	
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Lawyer Employer Self	Click Here to	i Memo itemization
Business Address 205 W. Franklin St. Jackson, MI 49201		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/25/2024 Name & Address		
Amy Klein 7109 Rives Junction Rd. Jackson MI 49201	<u>\$100.00</u>	\$
5. If over \$100.00 cumulative, please provide: Occupation Homemaker Employer	Click Here for	Memo Itemization
Occupation		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/29/2024 Name & Address:		
Brad Brelinski 645 Florence Rd Ann Arbor, MI 48103	<u>\$ 100.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Lawyer Employer Self		
Business Address 7521 Westshire Dr.Suite 100Lansing, Michigan 48917		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	1	
Name & Address ———————————————————————————————————		
	\$	\$
5. If over \$100.00 cumulative, please provide:		Y
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$4,985.31	
Grand Total of All Schedules 1A	\$4,985.31	
(Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



Expenditure #1

Fund Raiser

Fund Raiser

Expenditure #3

Name Google

Fund Raiser

Fund Raiser

Fund Raiser

Menlo Park, CA 94025

Expenditure #5

Address

Expenditure #4

Address

Expenditure #2

Address

Address

Address

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

2024017

Committee to Elect Jared L. Hopkins for Jackson County Prosecutor 2. Committee Name 4. Purpose (Required Information) 3. Name and address of person or vendor to whom paid Amount 07/23/2024 Name Facebook s 9.36 Date Social Media Ads 1 Hacker Way Click Here for Memo Itemization Type Menlo Park, CA 94025 Check box if this expenditure is payment of debt or obligation reported on previous statement Name Graphics 3 07/25/2024 s 4785.31 Purpose: Mailer Date 205 W. Garfield Ave. Click Here for Memo Itemization Type Coldwater, MI Check box if this expenditure is payment of debt or obligation reported on previous statement 08/02/2024 \$8.36 Purpose: Social Media Ad Date 600 Amphitheatre Parkway Click Here for Memo Itemization Type Mountain View, CA 94043 Check box if this expenditure is payment of debt or obligation reported on previous statement Name PNC Bank 08/02/2024 \$ 7.88 Purpose: Merchant Fees Date 1965 Boardman Rd. Jackson, MI 49202 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Name Facebook 08/05/2024 s 150.00 Social Media Ads Date 1 Hacker Way

Subtotal this page

Click Here for Memo Itemization Type

\$4,960.91

Grand Total of all Schedules 1B (Complete on last page of Schedule)

Check box if this expenditure is payment of

debt or obligation reported on previous

statement



2024017

1. Committee I. D. Number

Committee Name

Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

L. Hopkins for Jackson County Prosecutor

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		L	
Name Facebook	(08/06/2024	s 75.00
Address	Purpose: Social Media Ads	Date	10.00
1 Hacker Way			
Menlo Park, ČA 94025	Click H	ere for Memo	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			XX-1
Name Facebook		08/07/0247	s 71.75
Address	Purpose: Social Media Ads	Date	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1 Hacker Way	Click H	ere for Memo I	temization Type
Menlo Park, CA 94025	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name Facebook		08/23/2024	s 17.38
Address	Purpose: Social Media Ad	Date	
1 Hacker Way	Clint H	oro for Momo I	tamination Tuna
Menlo Park, CA 94025		ere for Memo i	temization Type
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address	Purpose:	Date	\$
	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	CONTROL OF STATE	•
	Subtot	tal this page	\$164.13
	Grand Total of all S	north Billian er eitheasann e Black I	\$5,125.04

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)





NUV 25 2024

JACKSON COUNTY FOR OFFICIAL USE ONLYS OFFICE

CANDIDATE COMMITTEE COVER PAGE

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by	3. This Statement covers From	: 08/27/2024 + ₂ 10/	20/2024
Committee I.D. Number		Candidate Last Name	First Name	M.I.
2024017		Hopkins	Jared	L
202.017		division as a constraint of the constraint of th	trict # or Community Served (If a	applicable)
2. Committee Name		Jackson County Prose	cuting Attorney	~
Jared L. Hopkins for Jackson County Pro-	secutor	4b. County of Residence JAC	KSON 🔽	
Jackson, MI 49201		6. Treasurer's Name & Residential Address Ronald L. Rose 718 W. Washington Ave. Jackson, MI 49201		
Area Code and Phone (517) 841-6021 If the address in this box is different from the comminailing address on the Statement of Organization, robe sent to this address by the filing official.	ittee mail may	Area Code & Phone (517) 9	37-1077	_
7. Treasurer's Business Address		8. Designated Record Keeper' Designated Record Keeper)	's Name and Address (If the con	nmittee has a
Area Code and Phone		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 Date of Election, Convention or Caucus 11/05/2024	is not on the current year July Quart October C 9c. Annua 9d. Amer (Com indica amend	al Statement () Coverage Year adment to Campaign Statement plete Item 9a, 9b, 9c or 9e to the which Statement is being ded.)	by the committee to the candid by discharged and forgiven, and the committee. The committee owes no lates fees or has any of the considered a request for the Research of the	e certify any outstanding debt late or his or her spouse is here id no longer collectible from a has no oustanding assets, bustanding debt. Of the granted, that this be exporting Waiver. Solution all funds must be reported on y Page.
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a Current Treasurer or Designated Record keeper Ronald L. Ro Type or Print Name	accurate and co	in the preparation of this statemic omplete. Signature	Date _	11/25/2024
Candidate Jared L. Hopkins Type or Print Name) Signature	Date _	11/25/2024

1. Committee I.D. Number 2024017

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$36,585.31
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$0.00	(20.) \$ \$36,585.31
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ \$252.80
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$0.00	
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.) \$ \$0.00	(23.) \$ \$32,710.65
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
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.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) 3
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	### STATEMENT (13.) \$ \$3,874.66 (14.) + \$ \$0.00 (15.) = \$ \$3,874.66 (16.) - \$ \$0.00 (17.) \$ \$3,874.66 (17.) \$ \$3,874.66 (17.) \$ \$3,874.66 (18.) - \$ \$ \$3,874.66 (18.) - \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	





NOV 25 2024

JACKSON COUNTY FOR OFFICIAL USE STRK'S OFFICE

CANDIDATE COMMITTEE COVER PAGE

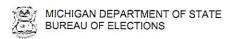
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. 3. This Statement covers From: 10/21/2024 11/25/2024 1. Committee I.D. Number 4. Candidate Last Name First Name M.I. 2024017 Hopkins Jared L 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name ~ **Jackson County Prosecuting Attorney** Jared L. Hopkins for Jackson County Prosecutor 4b. County of Residence JACKSON 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 205 W. Franklin St. Ronald L. Rose Jackson, MI 49201 718 W. Washington Ave. Jackson, MI 49201 Area Code and Phone (517) 841-6021 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 (517) 937-1077 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 9. TYPE OF STATEMENT Required ONLY if candidate 9a. Pre-Election OR 9b. X Post-Election is not on the ballot for the X By checking this item I/We certify any outstanding debt current year: by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from Pre-Election or Post-Election Statement relates to: the committee. The committee has no oustanding assets, July Quarterly owes no lates fees or has any oustanding debt. Primary October Quarterly X General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement (Effective date of dissolution School 11/25/2024 9d. Amendment to Campaign Statement Caucus (Complete Item 9a, 9b, 9c or 9e to Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 11/05/2024 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 Ronald L. Rose 11/25/2024 Designated Record keeper Type or Print Name Signature Jared L. Hopkins 11/25/2024 Type or Print Name

1. Committee I.D. Number 2024017

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Jared L. Hopkins for Jackson County Prosecutor

DECEMPO		1
RECEIPTS 3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$36,585.31
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.)\$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$0.00	(20.) \$ \$36,585.31
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ \$252.80
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$3,874.66	
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.) \$ \$3,874.66	(23.) \$ \$36,585.31
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.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		W 1800 J
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	(13.) \$ \$3,874.66	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$0.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$3,874.66	
 Amount expended during reporting period (Add lines 9 and 11) 	(16.) - \$ \$3,874.66	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$0.00	c



1. Committee I. D. Number 2024017

Committee Name

Committee To Elect Jared L. Hopkins for Jackson County Prosector

Committee Name

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Jared L. Hopkins		11/24/2025	\$ 3874.66
Address	Purpose: Personal Loan Repayment	Date	
1728 Sevenoaks Dr.	3.32 - 3.34 - 3.35 - 3.35		
Jackson, MI 49203	Click F	iere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			
	*		\$
Address	Purpose:	Date	
		1 12 12 17 1	
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name			
			\$
Address	Purpose:	Date	
	Tarposo.		
	Click H	ere for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			-
Name			
			\$
Address	Purpose:	Date	
	i di pose.		
	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		44.602
Fund Raiser	debt or obligation reported on previous		
The state of the s	statement		
Expenditure #5			
Name			
Address	S	———— Date	\$
	Purpose:	Dato	
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Commence Committee (g. 25)	tal this page	\$3,874.66
	Grand Total of all S	Schedules 1R	
	(Complete on last page	- 1	\$3,874.66

Enter this total on line 8a of Summary Page

Page _____ of ____