

General Information

Name: Hon Lal Spencer Roach III

PID 277970

AGENCY INFORMATION

Organization	Suborganization	Title
House Of Representatives	Elected Constitutional Officer	State Representative

Net WorthMy Net Worth as of August 28, 2024 was \$ 375,628.75.**Assets**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 87,500.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
4191 Orange Grove Blvd, N Fort Myers, FL 33903	\$ 273,683.00
12490 Eagle Perch Lane, Cape Coral, FL 33903	\$ 414,558.00
FRS Investment Plan	\$ 25,447.54
Bank Accounts held at Lake Michigan Credit Union	\$ 3,037.31

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☒ I elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
See Attached		

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
See Attached			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Lal Spencer Roach III

Digitally signed: 08/28/2024

Filed with COE: 08/28/2024

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year —
Due **04/15/2024**

2024 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order.....▶

703.

REV 04/03/24 INTUIT.CG.CFP.SP

1555

LAL S ROACH, III

4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903

INTERNAL REVENUE SERVICE
PO BOX 1300
CHARLOTTE NC 28201-1300

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year —
Due **06/17/2024**

2024 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order.....▶

703.

REV 04/03/24 INTUIT.CG.CFP.SP

1555

[REDACTED]
LAL S ROACH, III

4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903

INTERNAL REVENUE SERVICE
PO BOX 1300
CHARLOTTE NC 28201-1300



▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year —
Due **09/16/2024**

2024 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order.....▶

703.

REV 04/03/24 INTUIT.CG.CFP.SP

1555

██████████
LAL S ROACH, III

4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903

INTERNAL REVENUE SERVICE
PO BOX 1300
CHARLOTTE NC 28201-1300



▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year —
Due **01/15/2025**

2024 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order.....▶

703.

REV 04/03/24 INTUIT.CG.CFP.SP

1555

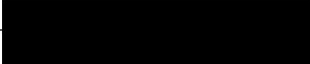
[REDACTED]
LAL S ROACH, III

4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903

INTERNAL REVENUE SERVICE
PO BOX 1300
CHARLOTTE NC 28201-1300

[REDACTED]

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 _____ See separate instructions.

Your first name and middle initial Lal S	Last name Roach, III	Your social security number 
If joint return, spouse's first name and middle initial	Last name	

Home address (number and street). If you have a P.O. box, see instructions. 4191 Orange Grove Blvd		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. North Fort Myers	State FL	ZIP code 33903	
Foreign country name	Foreign province/state/county	Foreign postal code	

Filing Status ☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income)
Check only ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1959 ☐ Are blind Spouse: ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ☐				☐	☐
				☐	☐
				☐	☐
				☐	☐

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a 31,188.
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.	b Household employee wages not reported on Form(s) W-2	1b
	c Tip income not reported on line 1a (see instructions)	1c
	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d
	e Taxable dependent care benefits from Form 2441, line 26	1e
	f Employer-provided adoption benefits from Form 8839, line 29	1f
	g Wages from Form 8919, line 6	1g
	h Other earned income (see instructions)	1h 0.
	i Nontaxable combat pay election (see instructions)	1i
	z Add lines 1a through 1h	1z 31,188.

Attach Sch. B if required.	2a Tax-exempt interest	2a	b Taxable interest	2b 169.
	3a Qualified dividends	3a	b Ordinary dividends	3b
	4a IRA distributions	4a	b Taxable amount	4b
	5a Pensions and annuities	5a	b Taxable amount	5b 50,245.
	6a Social security benefits	6a	b Taxable amount	6b
	c If you elect to use the lump-sum election method, check here (see instructions)			
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here			7
	8 Additional income from Schedule 1, line 10			8
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9 81,602.
	10 Adjustments to income from Schedule 1, line 26			10
	11 Subtract line 10 from line 9. This is your adjusted gross income			11 81,602.
	12 Standard deduction or itemized deductions (from Schedule A)			12 13,850.
Standard Deduction for— • Single or Married filing separately, \$13,850 • Married filing jointly or Qualifying surviving spouse, \$27,700 • Head of household, \$20,800 • If you checked any box under Standard Deduction, see instructions.	13 Qualified business income deduction from Form 8995 or Form 8995-A		13	
	14 Add lines 12 and 13			14 13,850.
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15 67,752.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2023)

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐ _____	16	10,218.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	10,218.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	10,218.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your total tax	24	10,218.	

Payments	25	Federal income tax withheld from:			
	a	Form(s) W-2	25a	2,200.	
	b	Form(s) 1099	25b	5,206.	
	c	Other forms (see instructions)	25c		
	d	Add lines 25a through 25c	25d	7,406.	
	26	2023 estimated tax payments and amount applied from 2022 return	26		
	27	Earned income credit (EIC) NO	27		
	28	Additional child tax credit from Schedule 8812	28		
	29	American opportunity credit from Form 8863, line 8	29		
	30	Reserved for future use	30		
	31	Amount from Schedule 3, line 15	31		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32		
33	Add lines 25d, 26, and 32. These are your total payments	33	7,406.		

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34																
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a																
	b	Routing number <table><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table> c Type: ☐ Checking ☐ Savings	X	X	X	X	X	X	X	X	X	X							
	X	X	X	X	X	X	X	X	X	X									
d	Account number <table><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
36	Amount of line 34 you want applied to your 2024 estimated tax	36																	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	2,812.
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions ☐ Yes . Complete below. ☒ No		
	Designee's name	Phone no.	Personal identification number (PIN)

Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation
	Phone no. (239) 336-4588		Email address	

Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
	Firm's name	Self-Prepared			Phone no.
	Firm's address				Firm's EIN

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000064					
b Employer identification number (EIN) 59 - 6001874				1 Wages, tips, other compensation 28,806.12		2 Federal income tax withheld 2,090.76					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,697.00		4 Social security tax withheld 1,841.21					
				5 Medicare wages and tips 29,697.00		6 Medicare tax withheld 430.61					
				7 Social security tips		10 Dependent care benefits					
d Control number 1123 01/05				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
						f Employee's address and ZIP code					
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** **WAGE AND TAX STATEMENT 2023**
Copy C - For EMPLOYEE'S RECORDS (See *Notice to Employee* on back of Copy B)
AA327 (Rev. 06/09/2023)

OMB No.1545-0008
Department of the Treasury - Internal Revenue Service

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112		
		1 Interest income \$168.97		2023 Form 1099-INT		
		2 Early withdrawal penalty \$0.00				
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00		
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00		
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession		
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00		
		10 Market discount \$0.00		11 Bond premium \$0.00		
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00		
Account number (see instructions) [REDACTED]		14 Tax-exempt and tax credit bond CUSIP no.		15 State	16 State identification no.	17 State tax withheld

Interest Income

Copy 2
To be filed with recipient's state income tax return, when required.

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112		
		1 Interest income \$168.97		2023 Form 1099-INT		
		2 Early withdrawal penalty \$0.00				
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00		
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00		
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession		
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00		
		10 Market discount \$0.00		11 Bond premium \$0.00		
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00		
Account number (see instructions) [REDACTED]		14 Tax-exempt and tax credit bond CUSIP no.		15 State	16 State identification no.	17 State tax withheld

Interest Income

Copy B
For Recipient

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-INT

(keep for your records)

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income \$113.40		2022 Form 1099-INT	
		2 Early withdrawal penalty \$0.00			
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00	
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00	
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession	
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00	
		10 Market discount \$0.00		11 Bond premium \$0.00	
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00	
		14 Tax-exempt and tax credit bond CUSIP no.		15 State	
Account number (see instructions) [REDACTED]				17 State tax withheld -----	

**Interest
Income**

Copy 2
To be filed with
recipient's state
income tax
return, when
required.

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Form **W-2** WAGE AND TAX STATEMENT **2022**

Copy B - To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

PREGNANCY AND
MEDICAL RESOURCE
CENTER

Donation Statement

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

Serving for LIFE,

Becky Anderson
Executive Director

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/24/2022	22474	General Operating 2022			Credit Card	\$25.00	\$25.00
2/23/2022	22634	General Operating 2022			Credit Card	\$25.00	\$25.00
3/23/2022	22741	General Operating 2022			Credit Card	\$25.00	\$25.00
4/25/2022	22874	General Operating 2022			Credit Card	\$25.00	\$25.00
5/23/2022	23016	General Operating 2022			Credit Card	\$25.00	\$25.00
6/23/2022	23164	General Operating 2022			Credit Card	\$25.00	\$25.00
7/21/2022	23165	General Operating 2022			ACH	\$25.00	\$25.00
8/22/2022	23294	General Operating 2022			ACH	\$25.00	\$25.00
9/21/2022	23409	General Operating 2022			ACH	\$25.00	\$25.00
10/21/2022	23493	General Operating 2022			ACH	\$25.00	\$25.00
11/22/2022	23624	General Operating 2022			ACH	\$25.00	\$25.00
12/21/2022	23708	General Operating 2022			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2022 to 12/31/2022:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

Verity Pregnancy and Medical Resource Center
8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

**PREGNANCY AND
MEDICAL RESOURCE
CENTER**

Donation Statement

Date: 12/31/2023

Number: 11123

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

"I do not cease to give thanks for you, remembering you in my prayers." Ephesians 1:16

"Thank You" seems like such a small way to show the depth of gratitude we have for all you have done to support Verity in her ministry to reflect and share the gospel and be part of rescuing the unborn and his parents.

Serving for LIFE,

Becky Anderson
Executive Director

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/23/2023	23867	General Operating 2023			ACH	\$25.00	\$25.00
2/21/2023	23961	General Operating 2023			ACH	\$25.00	\$25.00
3/21/2023	24038	General Operating 2023			ACH	\$25.00	\$25.00
4/20/2023	24259	General Operating 2023			ACH	\$25.00	\$25.00
5/22/2023	24372	General Operating 2023			ACH	\$25.00	\$25.00
6/21/2023	24522	General Operating 2023			Credit Card	\$25.00	\$25.00
7/21/2023	24607	General Operating 2023			ACH	\$25.00	\$25.00
8/22/2023	24715	General Operating 2023			ACH	\$25.00	\$25.00
9/21/2023	24814	General Operating 2023			ACH	\$25.00	\$25.00
10/23/2023	24947	General Operating 2023			ACH	\$25.00	\$25.00
11/21/2023	25020	General Operating 2023			ACH	\$25.00	\$25.00
12/21/2023	25184	General Operating 2023			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2023 to 12/31/2023:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

LIBERTY UNIVERSITY

Thank You for Giving in 2023

Feb. 2, 2024

Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903-4933

Dear Spencer,

With the new year upon us, we wanted to thank you for your investment in Liberty University's mission of *Training Champions for Christ* in 2023. We truly could not continue in this important mission without the generous support and prayers of individuals like you.

As our new president, Dr. Dondi E. Costin, has said, "We are *Training Champions for Christ* who will go into spheres of influence all around the globe to be visible reminders that God is exactly Who He claims to be." This is our goal each day on Liberty Mountain as we train more than 135,000 students to serve the Lord through their gifts and talents. When they graduate, they will join over 300,000 alumni who are influencing the world in the name of Jesus Christ in their respective fields.

This is the legacy of Liberty University and the mission you are helping us carry out. We look forward to seeing what God will do through Liberty University and our incredible supporters in the year ahead.

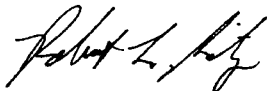
According to our records, your donations to Liberty University and its various affiliates, departments, schools, and programs (including The Journey FM) are:

Total donations:	\$250.00
Fair market value of any gifts sent to you:	\$100.00
Your tax-deductible contribution:	\$150.00

This summary of your 2023 donations to Liberty University is for tax purposes only. No goods or services were received by you in exchange for your donation unless indicated above. Liberty University is exempt from federal income tax under 501(c)(3) of the Internal Revenue Code. Please consult your tax advisor for advice. Liberty University does not advise on tax matters. If any of these donations come from an IRA rollover account, please consult your tax advisor.

Once again, thank you for your generosity toward Liberty University.

Sincerely,



Robert L. Ritz, Ph.D.
Chief Financial Officer

P.S. Should you wish to send a gift, please complete and return the form below.

PENNYMAC LOAN SERVICES, LLC
PO BOX 514387
LOS ANGELES, CA 90051-4387

OMB No. 1545-1380

Form **1098**

Substitute

For calendar year
2023

Mortgage Interest Statement



LAL SPENCER ROACH III
4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903-4933

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. PENNYMAC LOAN SERVICES, LLC P O BOX 514387 LOS ANGELES, CA 90051-4387 (800)777-4001		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 Form 1098 Substitute For calendar year 2023		Mortgage Interest Statement Copy B For Payer/ Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 26-2049351	PAYER'S/BORROWER'S TIN 	1 Mortgage interest received from payer(s)/borrower(s)* \$5,973.27		3 Mortgage origination date 07-26-2019		
PAYER'S/BORROWER'S name LAL SPENCER ROACH III		2 Outstanding mortgage principal \$193,302.52		5 Mortgage insurance premiums		
		4 Refund of overpaid interest \$0.00		6 Points paid on purchase of principal residence \$0.00		
		7 ☒ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.				
Street address (including apt. no.) 4191 ORANGE GROVE BLVD		8 Address or description of property securing mortgage 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903				
City or town, state or province, country, and ZIP or foreign postal code NORTH FORT MYERS, FL 33903-4933						
9 Number of properties securing the mortgage 1	10 Other - Real Estate Taxes Paid \$2,275.37					
Account number (see instructions) 		11 Mortgage acquisition date				

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

Box 5: If Box 5 (Mortgage Insurance Premiums) is populated, that amount may not be deductible. Please consult the IRS or your tax advisor to determine deductibility.



4027 Lake Drive SE
Grand Rapids, MI 49546

Return Service Requested

LAL S ROACH III
4191 ORANGE GROVE BLVD
NORTH FORT MYERS, FL 33903-4933

ANNUAL TAX AND INTEREST STATEMENT 1098-2023

Principal Balance

Current Payment	\$906.00
Ending Balance	\$107,470.92
Principal Applied	\$2,551.52

Manage your mortgage statements on the go!

Visit LMCU.org and sign in to online banking to manage your mortgage and get access to our 24/7 education center, right from your phone or tablet! Plus, sign up for eStatements and you'll receive a notification within online banking letting you know that your statement's ready instead of cluttering your mailbox. Just sign in to online banking at LMCU.org, click your address under Loans, and change your statement delivery preferences to paperless.

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Lake Michigan Credit Union 4027 Lake Drive SE Grand Rapids, MI 49546 (844) 754-6280		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 Form 1098 (Rev. January 2022) For calendar year 20 23		Mortgage Interest Statement Copy B For Payer/ Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 38-1215360		PAYER'S/BORROWER'S TIN [REDACTED]		1 Mortgage interest received from payer(s)/borrower(s)* \$4,343.56		
PAYER'S/BORROWER'S name LAL S ROACH III		2 Outstanding mortgage principal \$110,022.44		3 Mortgage origination date 04/25/2018		
Street address (including apt. no.) 4191 ORANGE GROVE BLVD		4 Refund of overpaid interest \$0.00		5 Mortgage insurance premiums		
City or town, state or province, country, and ZIP or foreign postal code NORTH FORT MYERS, FL 33903-4933		6 Points paid on purchase of principal residence \$0.00		7 ☐ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.		
9 Number of properties securing the mortgage		10 Real Estate Taxes Paid \$3,472.26		8 Address or description of property securing mortgage 12490 EAGLE PERCH LN CAPE CORAL FL 33909		
Account number (see instructions) [REDACTED]		11 Mortgage acquisition date				
		Conv. RES				

LAKE MICHIGAN CREDIT UNION
PO BOX 2848
GRAND RAPIDS, MI 49501-2848

First Class
Presorted
U.S. Postage
PAID
DOXIM

IMPORTANT: TAX DOCUMENT ENCLOSED

RETURN SERVICE REQUESTED

1098



ROACH III LAL SPENCER
4191 ORANGE GROVE BLVD
NORTH FORT MYERS, FL 33903-4933

IMPORTANT - TAX DOCUMENT ENCLOSED

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		* Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount, and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 2023 Form 1098		Mortgage Interest Statement
RECIPIENT'S/LENDER'S TIN 38-1215360		PAYER'S/BORROWER'S TIN [REDACTED]		1 Mortgage interest received from payer(s)/borrower(s)* \$541.58		
PAYER'S/BORROWER'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933		2 Outstanding mortgage principal \$18,382.77		3 Mortgage origination date 10/14/2023		Copy B For Payer/Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
		4 Refund of overpaid interest \$0.00		5 Mortgage insurance premiums \$		
		6 Points paid on purchase of principal residence \$0.00				
		7 ☒ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.				
9 Number of properties securing the mortgage 10		8 Address or description of property securing mortgage		11 Mortgage acquisition date		
Account number (see instructions) [REDACTED]						

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP Commanding Officer (RAS) USCG Pay & Personnel Center 444 SE Quincy St Topeka, KS 66683-3591 Phone: 1-866-772-8724		1 Gross Distribution \$ 50245.00	OMB No. 1545-0119 2023 Form 1099-R	Distributions From Pensions, Annuities, Retirement, or Profit-Sharing Plans, IRAs, Insurance, Contracts, etc.
		2a Taxable Amount \$ 50245.00		
		2b Total Distribution		
PAYERS Federal ID # 52-9980000	RECIPIENT's ID # / ACCOUNT # [REDACTED]	4 Federal Income Tax Withheld \$ 5206.42	7 Distribution Code 7	Copy 2 File this copy with your state, city, or local income tax return, when required.
RECIPIENT'S name, address and ZIP code LAL SPENCER ROACH 4191 ORANGE GROVE BLVD NORTH FT MYERS FL 33903		14 State Tax Withheld \$ 0.00	15 State/Payer's #	16 State Distribution \$ 0.00
		\$ 0.00		\$ 0.00

Form 1099-R

Department of the Treasury -Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP Commanding Officer (RAS) USCG Pay & Personnel Center 444 SE Quincy St Topeka, KS 66683-3591 Phone: 1-866-772-8724		1 Gross Distribution \$ 50245.00	OMB No. 1545-0119 2023 Form 1099-R	Distributions From Pensions, Annuities, Retirement, or Profit-Sharing Plans, IRAs, Insurance, Contracts, etc.
		2a Taxable Amount \$ 50245.00		
		2b Total Distribution		
PAYERS Federal ID # 52-9980000	RECIPIENT's ID # / ACCOUNT # [REDACTED]	4 Federal Income Tax Withheld \$ 5206.42	7 Distribution Code 7	Copy B Report this income on your Federal tax return. If this form shows Federal income tax withheld in Box 4, attach this copy to your return.
RECIPIENT'S name, address and ZIP code LAL SPENCER ROACH 4191 ORANGE GROVE BLVD NORTH FT MYERS FL 33903		14 State Tax Withheld \$ 0.00	15 State/Payer's #	16 State Distribution \$ 0.00
		\$ 0.00		\$ 0.00

Form 1099-R

Department of the Treasury -Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP Commanding Officer (RAS) USCG Pay & Personnel Center 444 SE Quincy St Topeka, KS 66683-3591 Phone: 1-866-772-8724		1 Gross Distribution \$ 50245.00	OMB No. 1545-0119 2023 Form 1099-R	Distributions From Pensions, Annuities, Retirement, or Profit-Sharing Plans, IRAs, Insurance, Contracts, etc.
		2a Taxable Amount \$ 50245.00		
		2b Total Distribution		
PAYERS Federal ID # 52-9980000	RECIPIENT's ID # / ACCOUNT # [REDACTED]	4 Federal Income Tax Withheld \$ 5206.42	7 Distribution Code 7	Copy C For Recipient's records.
RECIPIENT'S name, address and ZIP code LAL SPENCER ROACH 4191 ORANGE GROVE BLVD NORTH FT MYERS FL 33903		14 State Tax Withheld \$ 0.00	15 State/Payer's #	16 State Distribution \$ 0.00
		\$ 0.00		\$ 0.00

Form 1099-R

Department of the Treasury -Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)	OMB No. 1545-0112 2022 Form 1099-INT		Interest Income	
		1 Interest income \$113.40				
		2 Early withdrawal penalty \$0.00				
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]	4 Federal income tax withheld \$0.00	5 Investment expenses \$0.00		Copy 2 To be filed with recipient's state income tax return, when required.
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		6 Foreign tax paid \$0.00	7 Foreign country or U.S. possession			
		8 Tax-exempt interest \$0.00	9 Specified private activity bond interest \$0.00			
		10 Market discount \$0.00	11 Bond premium \$0.00			
		12 Bond premium on Treasury obligations \$0.00	13 Bond premium on tax-exempt bond \$0.00			
Account number (see instructions) [REDACTED]		14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State identification no.		17 State tax withheld

Form 1099-INT

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** WAGE AND TAX STATEMENT **2022**
Copy B - To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

OMB No. 1545-0008
Department of the Treasury - Internal Revenue Service

Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

PREGNANCY AND
MEDICAL RESOURCE
CENTER

Donation Statement

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

Serving for LIFE,

Becky Anderson
Executive Director

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/24/2022	22474	General Operating 2022			Credit Card	\$25.00	\$25.00
2/23/2022	22634	General Operating 2022			Credit Card	\$25.00	\$25.00
3/23/2022	22741	General Operating 2022			Credit Card	\$25.00	\$25.00
4/25/2022	22874	General Operating 2022			Credit Card	\$25.00	\$25.00
5/23/2022	23016	General Operating 2022			Credit Card	\$25.00	\$25.00
6/23/2022	23164	General Operating 2022			Credit Card	\$25.00	\$25.00
7/21/2022	23165	General Operating 2022			ACH	\$25.00	\$25.00
8/22/2022	23294	General Operating 2022			ACH	\$25.00	\$25.00
9/21/2022	23409	General Operating 2022			ACH	\$25.00	\$25.00
10/21/2022	23493	General Operating 2022			ACH	\$25.00	\$25.00
11/22/2022	23624	General Operating 2022			ACH	\$25.00	\$25.00
12/21/2022	23708	General Operating 2022			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2022 to 12/31/2022:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

Verity Pregnancy and Medical Resource Center
8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

**PREGNANCY AND
MEDICAL RESOURCE
CENTER**

Donation Statement

Date: 12/31/2023

Number: 11123

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

"I do not cease to give thanks for you, remembering you in my prayers." Ephesians 1:16

"Thank You" seems like such a small way to show the depth of gratitude we have for all you have done to support Verity in her ministry to reflect and share the gospel and be part of rescuing the unborn and his parents.

Serving for LIFE,

Becky Anderson
Executive Director

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Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/23/2023	23867	General Operating 2023			ACH	\$25.00	\$25.00
2/21/2023	23961	General Operating 2023			ACH	\$25.00	\$25.00
3/21/2023	24038	General Operating 2023			ACH	\$25.00	\$25.00
4/20/2023	24259	General Operating 2023			ACH	\$25.00	\$25.00
5/22/2023	24372	General Operating 2023			ACH	\$25.00	\$25.00
6/21/2023	24522	General Operating 2023			Credit Card	\$25.00	\$25.00
7/21/2023	24607	General Operating 2023			ACH	\$25.00	\$25.00
8/22/2023	24715	General Operating 2023			ACH	\$25.00	\$25.00
9/21/2023	24814	General Operating 2023			ACH	\$25.00	\$25.00
10/23/2023	24947	General Operating 2023			ACH	\$25.00	\$25.00
11/21/2023	25020	General Operating 2023			ACH	\$25.00	\$25.00
12/21/2023	25184	General Operating 2023			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2023 to 12/31/2023:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

LIBERTY UNIVERSITY

Thank You for Giving in 2023

Feb. 2, 2024

Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903-4933

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This is the legacy of Liberty University and the mission you are helping us carry out. We look forward to seeing what God will do through Liberty University and our incredible supporters in the year ahead.

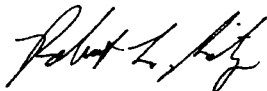
According to our records, your donations to Liberty University and its various affiliates, departments, schools, and programs (including The Journey FM) are:

Total donations:	\$250.00
Fair market value of any gifts sent to you:	\$100.00
Your tax-deductible contribution:	\$150.00

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Once again, thank you for your generosity toward Liberty University.

Sincerely,



Robert L. Ritz, Ph.D.
Chief Financial Officer

P.S. Should you wish to send a gift, please complete and return the form below.

PENNYMAC LOAN SERVICES, LLC
PO BOX 514387
LOS ANGELES, CA 90051-4387

OMB No. 1545-1380

Form **1098**

Substitute

For calendar year
2023

Mortgage Interest Statement



LAL SPENCER ROACH III
4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903-4933

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. PENNYMAC LOAN SERVICES, LLC P O BOX 514387 LOS ANGELES, CA 90051-4387 (800)777-4001		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 Form 1098 Substitute For calendar year 2023		Mortgage Interest Statement Copy B For Payer/ Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 26-2049351	PAYER'S/BORROWER'S TIN [REDACTED]	1 Mortgage interest received from payer(s)/borrower(s)* \$5,973.27		3 Mortgage origination date 07-26-2019		
PAYER'S/BORROWER'S name LAL SPENCER ROACH III		2 Outstanding mortgage principal \$193,302.52		5 Mortgage insurance premiums		
		4 Refund of overpaid interest \$0.00		6 Points paid on purchase of principal residence \$0.00		
Street address (including apt. no.) 4191 ORANGE GROVE BLVD		7 ☒ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.				
City or town, state or province, country, and ZIP or foreign postal code NORTH FORT MYERS, FL 33903-4933		8 Address or description of property securing mortgage 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903				
9 Number of properties securing the mortgage 1		10 Other - Real Estate Taxes Paid \$2,275.37		11 Mortgage acquisition date		
Account number (see instructions) [REDACTED]						

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

Box 5: If Box 5 (Mortgage Insurance Premiums) is populated, that amount may not be deductible. Please consult the IRS or your tax advisor to determine deductibility.

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income \$113.40		2022 Form 1099-INT	
		2 Early withdrawal penalty \$0.00			
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00	
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00	
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession	
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00	
		10 Market discount \$0.00		11 Bond premium \$0.00	
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00	
		14 Tax-exempt and tax credit bond CUSIP no.		15 State	
Account number (see instructions) [REDACTED]				17 State tax withheld	

**Interest
Income**

Copy 2
To be filed with
recipient's state
income tax
return, when
required.

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Form **W-2** WAGE AND TAX STATEMENT **2022**

Copy B - To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

PREGNANCY AND
MEDICAL RESOURCE
CENTER

Donation Statement

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

Serving for LIFE,

Becky Anderson
Executive Director

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/24/2022	22474	General Operating 2022			Credit Card	\$25.00	\$25.00
2/23/2022	22634	General Operating 2022			Credit Card	\$25.00	\$25.00
3/23/2022	22741	General Operating 2022			Credit Card	\$25.00	\$25.00
4/25/2022	22874	General Operating 2022			Credit Card	\$25.00	\$25.00
5/23/2022	23016	General Operating 2022			Credit Card	\$25.00	\$25.00
6/23/2022	23164	General Operating 2022			Credit Card	\$25.00	\$25.00
7/21/2022	23165	General Operating 2022			ACH	\$25.00	\$25.00
8/22/2022	23294	General Operating 2022			ACH	\$25.00	\$25.00
9/21/2022	23409	General Operating 2022			ACH	\$25.00	\$25.00
10/21/2022	23493	General Operating 2022			ACH	\$25.00	\$25.00
11/22/2022	23624	General Operating 2022			ACH	\$25.00	\$25.00
12/21/2022	23708	General Operating 2022			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2022 to 12/31/2022:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

Verity Pregnancy and Medical Resource Center
8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

**PREGNANCY AND
MEDICAL RESOURCE
CENTER**

Donation Statement

Date: 12/31/2023

Number: 11123

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

"I do not cease to give thanks for you, remembering you in my prayers." Ephesians 1:16

"Thank You" seems like such a small way to show the depth of gratitude we have for all you have done to support Verity in her ministry to reflect and share the gospel and be part of rescuing the unborn and his parents.

Serving for LIFE,

Becky Anderson
Executive Director

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Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/23/2023	23867	General Operating 2023			ACH	\$25.00	\$25.00
2/21/2023	23961	General Operating 2023			ACH	\$25.00	\$25.00
3/21/2023	24038	General Operating 2023			ACH	\$25.00	\$25.00
4/20/2023	24259	General Operating 2023			ACH	\$25.00	\$25.00
5/22/2023	24372	General Operating 2023			ACH	\$25.00	\$25.00
6/21/2023	24522	General Operating 2023			Credit Card	\$25.00	\$25.00
7/21/2023	24607	General Operating 2023			ACH	\$25.00	\$25.00
8/22/2023	24715	General Operating 2023			ACH	\$25.00	\$25.00
9/21/2023	24814	General Operating 2023			ACH	\$25.00	\$25.00
10/23/2023	24947	General Operating 2023			ACH	\$25.00	\$25.00
11/21/2023	25020	General Operating 2023			ACH	\$25.00	\$25.00
12/21/2023	25184	General Operating 2023			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2023 to 12/31/2023:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

LIBERTY UNIVERSITY

Thank You for Giving in 2023

Feb. 2, 2024

Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903-4933

Dear Spencer,

With the new year upon us, we wanted to thank you for your investment in Liberty University's mission of *Training Champions for Christ* in 2023. We truly could not continue in this important mission without the generous support and prayers of individuals like you.

As our new president, Dr. Dondi E. Costin, has said, "We are *Training Champions for Christ* who will go into spheres of influence all around the globe to be visible reminders that God is exactly Who He claims to be." This is our goal each day on Liberty Mountain as we train more than 135,000 students to serve the Lord through their gifts and talents. When they graduate, they will join over 300,000 alumni who are influencing the world in the name of Jesus Christ in their respective fields.

This is the legacy of Liberty University and the mission you are helping us carry out. We look forward to seeing what God will do through Liberty University and our incredible supporters in the year ahead.

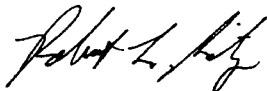
According to our records, your donations to Liberty University and its various affiliates, departments, schools, and programs (including The Journey FM) are:

Total donations:	\$250.00
Fair market value of any gifts sent to you:	\$100.00
Your tax-deductible contribution:	\$150.00

This summary of your 2023 donations to Liberty University is for tax purposes only. No goods or services were received by you in exchange for your donation unless indicated above. Liberty University is exempt from federal income tax under 501(c)(3) of the Internal Revenue Code. Please consult your tax advisor for advice. Liberty University does not advise on tax matters. If any of these donations come from an IRA rollover account, please consult your tax advisor.

Once again, thank you for your generosity toward Liberty University.

Sincerely,



Robert L. Ritz, Ph.D.
Chief Financial Officer

P.S. Should you wish to send a gift, please complete and return the form below.

PENNYMAC LOAN SERVICES, LLC
PO BOX 514387
LOS ANGELES, CA 90051-4387

OMB No. 1545-1380

Form **1098**

Substitute

For calendar year
2023

Mortgage Interest Statement



LAL SPENCER ROACH III
4191 ORANGE GROVE BLVD
NORTH FORT MYERS FL 33903-4933

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. PENNYMAC LOAN SERVICES, LLC P O BOX 514387 LOS ANGELES, CA 90051-4387 (800)777-4001		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 Form 1098 Substitute For calendar year 2023		Mortgage Interest Statement Copy B For Payer/ Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 26-2049351	PAYER'S/BORROWER'S TIN [REDACTED]	1 Mortgage interest received from payer(s)/borrower(s)* \$5,973.27		3 Mortgage origination date 07-26-2019		
PAYER'S/BORROWER'S name LAL SPENCER ROACH III		2 Outstanding mortgage principal \$193,302.52		5 Mortgage insurance premiums		
		4 Refund of overpaid interest \$0.00		6 Points paid on purchase of principal residence \$0.00		
		7 ☒ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.				
Street address (including apt. no.) 4191 ORANGE GROVE BLVD		8 Address or description of property securing mortgage 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903				
City or town, state or province, country, and ZIP or foreign postal code NORTH FORT MYERS, FL 33903-4933		9 Number of properties securing the mortgage 1		10 Other - Real Estate Taxes Paid \$2,275.37		
Account number (see instructions) [REDACTED]		11 Mortgage acquisition date				

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

Box 5: If Box 5 (Mortgage Insurance Premiums) is populated, that amount may not be deductible. Please consult the IRS or your tax advisor to determine deductibility.



4027 Lake Drive SE
Grand Rapids, MI 49546

ANNUAL TAX AND INTEREST
STATEMENT 1098-2023

Principal Balance

Current Payment	\$906.00
Ending Balance	\$107,470.92
Principal Applied	\$2,551.52

Return Service Requested

LAL S ROACH III
4191 ORANGE GROVE BLVD
NORTH FORT MYERS, FL 33903-4933

Manage your mortgage statements on the go!

Visit LMCU.org and sign in to online banking to manage your mortgage and get access to our 24/7 education center, right from your phone or tablet! Plus, sign up for eStatements and you'll receive a notification within online banking letting you know that your statement's ready instead of cluttering your mailbox. Just sign in to online banking at LMCU.org, click your address under Loans, and change your statement delivery preferences to paperless.

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Lake Michigan Credit Union 4027 Lake Drive SE Grand Rapids, MI 49546 (844) 754-6280		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 Form 1098 (Rev. January 2022) For calendar year 20 23	Mortgage Interest Statement Copy B For Payer/Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 38-1215360		PAYER'S/BORROWER'S TIN [REDACTED]		1 Mortgage interest received from payer(s)/borrower(s)* \$4,343.56	
PAYER'S/BORROWER'S name LAL S ROACH III		2 Outstanding mortgage principal \$110,022.44		3 Mortgage origination date 04/25/2018	
Street address (including apt. no.) 4191 ORANGE GROVE BLVD		4 Refund of overpaid interest \$0.00		5 Mortgage insurance premiums	
City or town, state or province, country, and ZIP or foreign postal code NORTH FORT MYERS, FL 33903-4933		6 Points paid on purchase of principal residence \$0.00		7 ☐ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.	
9 Number of properties securing the mortgage 10 Real Estate Taxes Paid \$3,472.26		8 Address or description of property securing mortgage 12490 EAGLE PERCH LN CAPE CORAL FL 33909			
Account number (see instructions) [REDACTED]		11 Mortgage acquisition date			
Conv. RES					

LAKE MICHIGAN CREDIT UNION
PO BOX 2848
GRAND RAPIDS, MI 49501-2848

First Class
Presorted
U.S. Postage
PAID
DOXIM

IMPORTANT: TAX DOCUMENT ENCLOSED

RETURN SERVICE REQUESTED

1098



ROACH III LAL SPENCER
4191 ORANGE GROVE BLVD
NORTH FORT MYERS, FL 33903-4933

IMPORTANT - TAX DOCUMENT ENCLOSED

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, and ZIP or foreign postal code, and telephone number. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		* Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount, and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 2023 Form 1098		Mortgage Interest Statement Copy B For Payer/Borrower The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
RECIPIENT'S/LENDER'S TIN 38-1215360		PAYER'S/BORROWER'S TIN [REDACTED]		1 Mortgage interest received from payer(s)/borrower(s)* \$541.58		
PAYER'S/BORROWER'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933		2 Outstanding mortgage principal \$18,382.77		3 Mortgage origination date 10/14/2023		
		4 Refund of overpaid interest \$0.00		5 Mortgage insurance premiums \$		
		6 Points paid on purchase of principal residence \$0.00		7 ☒ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.		
		8 Address or description of property securing mortgage		11 Mortgage acquisition date		
9 Number of properties securing the mortgage 10		10 Account number (see instructions) [REDACTED]				

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)	OMB No. 1545-0112 2022 Form 1099-INT		Interest Income	
		1 Interest income \$113.40				
		2 Early withdrawal penalty \$0.00				
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]	4 Federal income tax withheld \$0.00	5 Investment expenses \$0.00		Copy 2 To be filed with recipient's state income tax return, when required.
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		6 Foreign tax paid \$0.00	7 Foreign country or U.S. possession			
		8 Tax-exempt interest \$0.00	9 Specified private activity bond interest \$0.00			
		10 Market discount \$0.00	11 Bond premium \$0.00			
		12 Bond premium on Treasury obligations \$0.00	13 Bond premium on tax-exempt bond \$0.00			
Account number (see instructions) [REDACTED]		14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State identification no.		17 State tax withheld

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Form **W-2** WAGE AND TAX STATEMENT **2022**

Copy B - To Be Filed With Employee's FEDERAL Tax Return

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Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

PREGNANCY AND
MEDICAL RESOURCE
CENTER

Donation Statement

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

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Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/24/2022	22474	General Operating 2022			Credit Card	\$25.00	\$25.00
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3/23/2022	22741	General Operating 2022			Credit Card	\$25.00	\$25.00
4/25/2022	22874	General Operating 2022			Credit Card	\$25.00	\$25.00
5/23/2022	23016	General Operating 2022			Credit Card	\$25.00	\$25.00
6/23/2022	23164	General Operating 2022			Credit Card	\$25.00	\$25.00
7/21/2022	23165	General Operating 2022			ACH	\$25.00	\$25.00
8/22/2022	23294	General Operating 2022			ACH	\$25.00	\$25.00
9/21/2022	23409	General Operating 2022			ACH	\$25.00	\$25.00
10/21/2022	23493	General Operating 2022			ACH	\$25.00	\$25.00
11/22/2022	23624	General Operating 2022			ACH	\$25.00	\$25.00
12/21/2022	23708	General Operating 2022			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2022 to 12/31/2022:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

Verity Pregnancy and Medical Resource Center
8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

**PREGNANCY AND
MEDICAL RESOURCE
CENTER**

Donation Statement

Date: 12/31/2023

Number: 11123

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

"I do not cease to give thanks for you, remembering you in my prayers." Ephesians 1:16

"Thank You" seems like such a small way to show the depth of gratitude we have for all you have done to support Verity in her ministry to reflect and share the gospel and be part of rescuing the unborn and his parents.

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Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/23/2023	23867	General Operating 2023			ACH	\$25.00	\$25.00
2/21/2023	23961	General Operating 2023			ACH	\$25.00	\$25.00
3/21/2023	24038	General Operating 2023			ACH	\$25.00	\$25.00
4/20/2023	24259	General Operating 2023			ACH	\$25.00	\$25.00
5/22/2023	24372	General Operating 2023			ACH	\$25.00	\$25.00
6/21/2023	24522	General Operating 2023			Credit Card	\$25.00	\$25.00
7/21/2023	24607	General Operating 2023			ACH	\$25.00	\$25.00
8/22/2023	24715	General Operating 2023			ACH	\$25.00	\$25.00
9/21/2023	24814	General Operating 2023			ACH	\$25.00	\$25.00
10/23/2023	24947	General Operating 2023			ACH	\$25.00	\$25.00
11/21/2023	25020	General Operating 2023			ACH	\$25.00	\$25.00
12/21/2023	25184	General Operating 2023			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2023 to 12/31/2023:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income \$113.40		2022 Form 1099-INT	
		2 Early withdrawal penalty \$0.00			
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00	
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00	
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession	
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00	
		10 Market discount \$0.00		11 Bond premium \$0.00	
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00	
		14 Tax-exempt and tax credit bond CUSIP no.		15 State	
Account number (see instructions) [REDACTED]					

Interest Income

Copy 2
To be filed with recipient's state income tax return, when required.

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Form **W-2** WAGE AND TAX STATEMENT **2022**

Copy B - To Be Filed With Employee's FEDERAL Tax Return

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Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104

Fort Myers, FL 33912

239-433-1929

VERITY
PREGNANCY AND
MEDICAL RESOURCE
CENTER**Donation Statement**

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

Serving for LIFE,

Becky Anderson
Executive Director

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Date	Gift ID	Event	Comment	Check#	Type	Amount Received	Tax-deductible Amount
1/24/2022	22474	General Operating 2022			Credit Card	\$25.00	\$25.00
2/23/2022	22634	General Operating 2022			Credit Card	\$25.00	\$25.00
3/23/2022	22741	General Operating 2022			Credit Card	\$25.00	\$25.00
4/25/2022	22874	General Operating 2022			Credit Card	\$25.00	\$25.00
5/23/2022	23016	General Operating 2022			Credit Card	\$25.00	\$25.00
6/23/2022	23164	General Operating 2022			Credit Card	\$25.00	\$25.00
7/21/2022	23165	General Operating 2022			ACH	\$25.00	\$25.00
8/22/2022	23294	General Operating 2022			ACH	\$25.00	\$25.00
9/21/2022	23409	General Operating 2022			ACH	\$25.00	\$25.00
10/21/2022	23493	General Operating 2022			ACH	\$25.00	\$25.00
11/22/2022	23624	General Operating 2022			ACH	\$25.00	\$25.00
12/21/2022	23708	General Operating 2022			ACH	\$25.00	\$25.00
Total Giving for Period 1/1/2022 to 12/31/2022:						\$300.00	\$300.00

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903**Please return this portion with your gift.**

Donor ID: 15592

Amount Enclosed:

Thank you!

Verity Pregnancy and Medical Resource Center
8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

**PREGNANCY AND
MEDICAL RESOURCE
CENTER**

Donation Statement

Date: 12/31/2023

Number: 11123

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

"I do not cease to give thanks for you, remembering you in my prayers." Ephesians 1:16

"Thank You" seems like such a small way to show the depth of gratitude we have for all you have done to support Verity in her ministry to reflect and share the gospel and be part of rescuing the unborn and his parents.

Serving for LIFE,

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1/23/2023	23867	General Operating 2023			ACH	\$25.00	\$25.00
2/21/2023	23961	General Operating 2023			ACH	\$25.00	\$25.00
3/21/2023	24038	General Operating 2023			ACH	\$25.00	\$25.00
4/20/2023	24259	General Operating 2023			ACH	\$25.00	\$25.00
5/22/2023	24372	General Operating 2023			ACH	\$25.00	\$25.00
6/21/2023	24522	General Operating 2023			Credit Card	\$25.00	\$25.00
7/21/2023	24607	General Operating 2023			ACH	\$25.00	\$25.00
8/22/2023	24715	General Operating 2023			ACH	\$25.00	\$25.00
9/21/2023	24814	General Operating 2023			ACH	\$25.00	\$25.00
10/23/2023	24947	General Operating 2023			ACH	\$25.00	\$25.00
11/21/2023	25020	General Operating 2023			ACH	\$25.00	\$25.00
12/21/2023	25184	General Operating 2023			ACH	\$25.00	\$25.00
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Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: **15592**

Amount Enclosed:

Thank you!

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LAKE MICHIGAN CREDIT UNION PO BOX 2848 GRAND RAPIDS, MI 49501-2848 (616) 242-9790		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income \$113.40		2022 Form 1099-INT	
		2 Early withdrawal penalty \$0.00			
PAYER'S TIN 38-1215360		RECIPIENT'S TIN [REDACTED]		3 Interest on U.S. Savings Bonds and Treas. obligations \$0.00	
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code ROACH III LAL SPENCER 4191 ORANGE GROVE BLVD NORTH FORT MYERS, FL 33903-4933 FATCA filing requirement ☐		4 Federal income tax withheld \$0.00		5 Investment expenses \$0.00	
		6 Foreign tax paid \$0.00		7 Foreign country or U.S. possession	
		8 Tax-exempt interest \$0.00		9 Specified private activity bond interest \$0.00	
		10 Market discount \$0.00		11 Bond premium \$0.00	
		12 Bond premium on Treasury obligations \$0.00		13 Bond premium on tax-exempt bond \$0.00	
		14 Tax-exempt and tax credit bond CUSIP no.		15 State	
Account number (see instructions) [REDACTED]				17 State tax withheld	

**Interest
Income**

Copy 2
To be filed with
recipient's state
income tax
return, when
required.

Form **1099-INT**

www.irs.gov/Form1099int

Department of the Treasury - Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000051					
b Employer identification number 59 - 6001874				1 Wages, tips, other compensation 28,809.70		2 Federal income tax withheld 2,213.71					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,700.58		4 Social security tax withheld 1,841.43					
				5 Medicare wages and tips 29,700.58		6 Medicare tax withheld 430.65					
				7 Social security tips		10 Dependent care benefits					
d Control number 1121 01/06				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

OMB No. 1545-0008

Department of the Treasury - Internal Revenue Service

Form **W-2** WAGE AND TAX STATEMENT **2022**

Copy B - To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

Verity Pregnancy and Medical Resource Center

8890 Salrose Ln Ste 104
Fort Myers, FL 33912
239-433-1929

VERITY

PREGNANCY AND
MEDICAL RESOURCE
CENTER

Donation Statement

Date: 12/31/2022

Number: 9098

Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

It has been our joy to partner with you as we serve unborn children and their parents. We are grateful for your faithfulness, and we want you to know that your love for LIFE and Verity has been such an encouragement to us and the work we do. Thank you, from the bottom of our hearts!

Serving for LIFE,

Becky Anderson
Executive Director

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Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

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Donor ID: 15592

Amount Enclosed:

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Mr. Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903

Please return this portion with your gift.

Donor ID: 15592

Amount Enclosed:

Thank you!

LIBERTY UNIVERSITY

Thank You for Giving in 2023

Feb. 2, 2024

Spencer Roach
4191 Orange Grove Blvd
North Fort Myers, FL 33903-4933

Dear Spencer,

With the new year upon us, we wanted to thank you for your investment in Liberty University's mission of *Training Champions for Christ* in 2023. We truly could not continue in this important mission without the generous support and prayers of individuals like you.

As our new president, Dr. Dondi E. Costin, has said, "We are *Training Champions for Christ* who will go into spheres of influence all around the globe to be visible reminders that God is exactly Who He claims to be." This is our goal each day on Liberty Mountain as we train more than 135,000 students to serve the Lord through their gifts and talents. When they graduate, they will join over 300,000 alumni who are influencing the world in the name of Jesus Christ in their respective fields.

This is the legacy of Liberty University and the mission you are helping us carry out. We look forward to seeing what God will do through Liberty University and our incredible supporters in the year ahead.

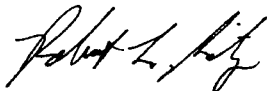
According to our records, your donations to Liberty University and its various affiliates, departments, schools, and programs (including The Journey FM) are:

Total donations:	\$250.00
Fair market value of any gifts sent to you:	\$100.00
Your tax-deductible contribution:	\$150.00

This summary of your 2023 donations to Liberty University is for tax purposes only. No goods or services were received by you in exchange for your donation unless indicated above. Liberty University is exempt from federal income tax under 501(c)(3) of the Internal Revenue Code. Please consult your tax advisor for advice. Liberty University does not advise on tax matters. If any of these donations come from an IRA rollover account, please consult your tax advisor.

Once again, thank you for your generosity toward Liberty University.

Sincerely,



Robert L. Ritz, Ph.D.
Chief Financial Officer

P.S. Should you wish to send a gift, please complete and return the form below.

		a Employee's social security number [REDACTED]		Payroll organization code 11-21-21-90-076		Intradepartment number 0000000064					
b Employer identification number (EIN) 59 - 6001874				1 Wages, tips, other compensation 28,806.12		2 Federal income tax withheld 2,090.76					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 29,697.00		4 Social security tax withheld 1,841.21					
				5 Medicare wages and tips 29,697.00		6 Medicare tax withheld 430.61					
				7 Social security tips		10 Dependent care benefits					
d Control number 1123 01/05				11 Nonqualified plans		12a See instructions for box 12					
e Employee's first name, mi, and last name LAL S ROACH III 4191 ORANGE GROVE BLVD NORTH FORT MYER, FL 33903				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other		12c					
						12d					
						12e					
						f Employee's address and ZIP code					
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** **WAGE AND TAX STATEMENT 2023**
Copy C - For EMPLOYEE'S RECORDS (See *Notice to Employee* on back of Copy B)
AA327 (Rev. 06/09/2023)

OMB No.1545-0008
Department of the Treasury - Internal Revenue Service

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.