## REC'D, KENT ELECTIONS OCT 25 2019 PM2:20

### CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

4. Candidate Last Name First Name MJ.  Ysasi — Castanov Milinda C  4a. Office Sought Including District # or Community Served (If applicable)  2nd Ward City Commissioner  4b. County of Residence KENT  6. Treasurer's Name & Residential Address  Rafael Contanan	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	n:
Accordance   Acc	1, Committee I.D, Number		<u></u>	08/27/19 to 10/20/19
Aca Code and Phone Stripe Committee Name Aca Code and Phone The address in this box is different from the committee anding address on this soldiness by the hing clifical.  Area Code and Phone The address in this box is different from the committee anding address on this soldiness by the hing clifical.  Area Code and Phone The address in this box is different from the committee anding address on the Statement of Organization, mail may be sent to this address by the hing clifical.  Area Code and Phone The address in this box is different from the committee anding address on the Statement of Organization, mail may be sent to this address by the hing clifical.  Area Code and Phone Stripe Or STATEMENT So. The Post-Election The Post-Election or Post-Election The Post-Election or Post-Election Statement relates to:  July Quasterly  October Quarterly  October Quarterly  October Quarterly  October Quarterly  October Quarterly  Date of Election, Convention or Caucus  11/105/19  Date of Election, Convention or Caucus  11/105/19  Area Code and Phone Signature  Area Code and Phone  Service of the Responsing Walver.  October Quarterly  October Quarterly  Further (if the dissolution or product on this produce) and this be considered a request for the Reporting Walver.  Further (if the dissolution cannot be granted, that this be considered an equast for the Reporting Walver.  Coverage Year  October Guarterly  Oc	129354			First Name MJ.
Committee to Elect Milinda Ysasi 5. Committee to Alling Address 1345 Columbia Ave NE Grand Rapids MI 19505  Area Code and Phone The address by the filing official 1345 Columbia Ave NE Grand Rapids MI 19505  Area Code and Phone This address by the filing official 19505  Area Code and Phone This address by the filing official 19505  Area Code and Phone The Address Address 19505  Area Code and Phone 296. Dissolution of Candidate Committee 19506  Area Code and Phone 19506  Area Code and Phone 296. Dissolution of Candidate Committee 19506  Area Code and Phone 19506  Area Code and Phone 296. Dissolution of Candidate Committee 19506  Area Code and Phone 296. Dissolution of Candidate Committee 19506  Area Code and Phone 296. Dissolution of Candidate Committee 29706  Area Code and Phone 296. Dissolution of Candidate Committee 29706  Area Code and Phone 296. Dissolution of Candidate Committee 29706  Area Code and Phone 296. Dissolution of Candidate Committee 29706  Area Code and Phone 29706  Beginned Record Keeper's Name and Address (if the committee has a Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper's Name and Address (if the Committee has a Designated Record Keeper's Name and Address (if the Committee has a Designated Record Keeper's Name and Address (if the Committee has a Designated Record Keeper's Name and Address (if the Committee has a Designated Record Keeper's Name and Address (if t	2 Committee Name		4a. Office Sought Including Di	Strict # or Community Served (15 17 17 17
Dommittee to Elect Milinda Ysasi  5. Committee's Maling Address  1. Area Code and Phone (616	• •		2nd Ward City Comm	Issioner
Area Code and Phone (B16) 617-4054  Area Code and Phone (B16) 617-	Committee to Elect Milinda	Ysasi		
Area Code and Phone If the address in this box is different from the committee If the committee in the committee If the convention or Candidate Committee If the convention or Cand	5. Committee's Mailing Address			·
1345 Columbia Ave NE Grand Rapids MI 49505  Area Code and Phone If the address in this box is different from the committee mailing address on the Statement of Organization, mail mays be sent to this address by the filing official.  Area Code and Phone (616) 617-4054  Becommittee In the committee has a Description of Candidate Committee In the ball of the current year.  Be Obsolution of Candidate Committee In the Candidate of the Committee In the Candidate Committee In the Candidate Committee In the Candidate Only of the Current In the Candidate Only of the Curr		ida MI		ential Address
Area Code and Phone If the address in this box is different from the committee mailing address on the Statement of Organization, mail may see shift this address by the filing official.  Area Code & Phone (616) 617-4054  Area Code and Phone (616) 617-4054  B. Designated Record Keeper's Name and Address (If the committee has a Designation of the Substantion Committee has a Designation of the Code and Phone (616) 617-4054  B. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper's Name and Address (If the committee has a	49505	nus IVII		
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7. Treasurer's Business Address 1345 Columbia Ave NE Grand Rapids MI  Area Code and Phone (616) 617-4054  Besignated Record Keeper's Name and Address (if the committee has a Designated Record Keeper's Name and Address (if the committee of the the Committee	Highlig ductess on the Statement of Assestantian	ttee nail may		
Area Code and Phone (616) 617-4054  Area Code and Phone (616) 617-4054  Area Code and Phone (616) 617-4054  Pre-Election OR sb. Post-Election Pre-Election OR sb. Post-Election Pre-Election or Post-Election Statement relates to:    Primary	The state address by the thing binds.		Area Code & Phone (616) 6	17-4054
Area Code and Phone (616) 617-4054  9. TYPE OF STATEMENT  9a. \[ \begin{align*} \text{Pre-Election OR 9b.} \[ \begin{align*} \text{Post-Election or Post-Election} \\ \text{Pre-Election or Post-Election Statement relates to:} \end{align*} \text{Primary} \text{Primary} \text{Primary} \text{Qounterly} Qounte			8. Designated Record Keeper	's Name and Address (if the committee has a
Area Code and Phone (616) 617-4054  9. TyPE OF STATEMENT 9a.   Pre-Election OR 9b.   Post-Election Pre-Election or Post-Election Statement relates to:   July Quarterly   Primary   Primary   Primary   Primary   Post-Election   Post-Election   Post-Election Statement relates to:   Primary   Primar	1345 Columbia Ave NE Grand Rap	oids MI	besignated Necord Neeper)	
9. TYPE OF STATEMENT  9a.   Pre-Election OR 9b.   Post-Election Pre-Election OR 9b.   Post-Election Pre-Election or Post-Election or Post-Election Statement relates to:   Primary   Prima	10000			
9. TYPE OF STATEMENT  9a.   Pre-Election OR 9b.   Post-Election Pre-Election OR 9b.   Post-Election Pre-Election or Post-Election or Post-Election Statement relates to:   Primary   Prima				
9. TYPE OF STATEMENT  9a.   Pre-Election OR 9b.   Post-Election Pre-Election OR 9b.   Post-Election Pre-Election or Post-Election or Post-Election Statement relates to:   Primary   Prima				
9. TYPE OF STATEMENT  9a.   Pre-Election OR 9b.   Post-Election Pre-Election OR 9b.   Post-Election Pre-Election or Post-Election or Post-Election Statement relates to:   Primary   Prima	Area Code and Phone (616) 617-4054			
Second   S		<u> </u>	Area Code and Phone	
Pre-Election or Post-Election Statement relates to:    Primary	1	Required Of	NLY if candidate	
Primary   July Quarterly   July Quarte		current year	ballot for the	IDV the committee to the candidate or his or her enough in home
October Quarterly   October Quarterly   October Quarterly   October Quarterly   October Quarterly   October Quarterly   Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Walver.	L_	Lith Ouar	larh:	the committee. The committee has no oustanding assets
Convention    Special   9c.   Annual Statement ( )   Coverage Year   Effective date of dissolution	<b>i_</b>		-	owes no lates fees or has any oustanding debt.
School School Caucus 9c. Annual Statement (	X General	October C	luarterly	Further, if the dissolution cannot be granted, that this bo
Annual Statement ( Coverage Year  Goucus  Amendment to Coverage Year  Amendment to Coverage Year  Annual Statement ( Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being arrended.)  Date of Election, Convention or Caucus  11/05/19  10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mylour knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper  Type or Print Name  Candidate  Type or Print Name  Type or Print Name  Signature	Convention			considered a request for the Reporting Walver.
Caucus    Caucus   School   Gampaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being armended.)   Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	Special	9c. Annua	al Statement ( )	
(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being armended.)  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.  10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/lour knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper	☐School		Coverage Year	Effective date of dissolution
Date of Election, Convention or Caucus  11/05/19  10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mytour knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper  Type or Print Name  Susi - Current, Aman, Aman, Date  Type or Print Name  Signature	Caucus	9d. Amen	idment to Campaign Statement	
Date of Election, Convention or Caucus  11/05/19  10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mytour knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper  Type or Print Name  Susi - Current, Milinda Susi - Current, Manual Marie Date  Type or Print Name  Signature  Type or Print Name  Signature		indica	te which Statement is being	Note: The disposition of residual funds must be reported on
10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper First Name Signature  Candidate Milinda Susi-Current, Manual Date 10/24/19  Type or Print Name Signature		anen	ded.)	octione to and the Summary Page.
10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.  Current Treasurer or Designated Record keeper Frint Name Signature  Candidate Milinda Susi-Current, Manual Date 10/24/19  Type or Print Name Signature				
Current Treasurer or Designated Record keeper Rafe (Sterror 1 Refaul Attorier)  Type or Print Name  Signature  Type or Print Name  Type or Print Name  Signature  Type or Print Name  Signature  Type or Print Name  Signature	11/05/19			
Current Treasurer or Designated Record keeper Rafe (Sterror 1 Refaul Attorier)  Type or Print Name  Signature  Type or Print Name  Type or Print Name  Signature  Type or Print Name  Signature  Type or Print Name  Signature				
Designated Record keeper Catal (a Starion 1 Report Catalogs  Type or Print Name Signature  Candidate Milinda Sasi-Catana, Manager Date 10/24/19  Type or Print Name Signature	10. Verification: NWe certify that all reasonable dilige my/our knowledge and belief the contents are true, a	ence was used accurate and co	in the preparation of this statement	Lent and attached schedules (if any) and to the best of
Type or Print Name  Signature  Candidate Milinda Sasi-Castaman, Manual Mai Castaman 10/24/19  Type or Print Name Signature		1	Q \ Al	
Candidate		Steinon	1 1@hour Willow Bignature	Date 10/24/19
Type or Print Name . Signature	Candidate Milinda Sasi-Ca	when	, Machine	WHAT (ME - 1 / 104/19
	t		. Signature	Date

1. Committee I.D. Number 129354

## SUMMARY PAGE CANDIDATE COMMITTEE

CANDIDATE COMMITTEE RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 10,597.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$10,597.00	(18.) \$ \$48,409.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$100.00	(19.) \$ \$100.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$10,597.00	(20.) \$ \$48,309.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$1,580.00	(21.) \$ \$6,467.50
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$14,168.64	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$14,168.64	(23.) \$ \$32,324.29
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _\$0.00	
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)	BALANCE STATEMENT  (13.) \$ \$12,420.57  (14.) + \$ \$10,597.00  (15.) = \$ \$23,017.57  (16.) - \$ \$14,168.64  (17.) \$ \$8,848.93	- - - *



# ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 129354

		2. Committee Name Committ	ee to Elect Milinda Ysasi
3. Name & Address From Whom	· · · · · · · · · · · · · · · · · · ·	5. Type of Receipt	
Receipt #1 Name & Address:	Date of Receipt 10/14/19	Loan from a Lending Ir	
Committtee To Elect C	Carlos	Interest	<u>\$_100</u>
Sanchez		✓ Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending i	nstitution
Name & Address.		Interest	¢
			Clink for Many Hamilton True
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Ir	nstitution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	r1	Other (Specify)	
Receipt #4	Fund Raiser Date of Receipt	•	
Name & Address:	Date of Receipt	Loan from a Lending Ir	
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #5 Name & Address:	Date of Receipt	Loan from a Lending In	stitution
Admin de Addressos		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
D 1140	Fund Raiser	Other (Specify)	-
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending I	nstitution
		Interest	\$
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
Receipt #7	Date of Receipt		
Name & Address:		Loan from a Lending I	Institution \$
		Interest	***************************************
		Refund \Rebate	Click for Memo Itemization Type
	Fund Raiser	Other (Specify)	
			Page Subtotal \$100.00
			All Schedules 1A -1
		(Complete on las	t page of Schedule) 0 100.00

Enter this total on line 4 of Summary Page

Page 1 of 1



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

1. Committee I. D. Number 129354

SOUEDOFF I-IL			
CANDIDATE COMM	IITTEE 2. Committee Name Committee to El	ect Milinda Y	sasi
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.	<ul><li>4. Type of In-Kind Contribution (Check applicable box)</li><li>5. Date of Receipt</li><li>6. Name &amp; Address of Vendor from whom goods or services were purchased</li></ul>	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Wike Williams 529 Lakeside Dr SE Apt A GR, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Postage  5. Date Of Receipt: 09/27/19  6. Vendor Name & Address:	245.00	\$ 245.00
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes Name & Address  If over \$100.00 cumulative, please provide:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description	1	\$
Occupation: Employer Name & Address:	Date Of Receipt:      Vendor Name & Address:	Click Here for Memo	Itemization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address:	4.		\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description  5. Date Of Receipt:  6. Vendor Name & Address:	Click Here for Memo	Itemization
Fund Raiser Contribution			
	Page Subtot	\$245.00	\$245.00

Enter this total on line 6 of Summary Page

\$1,580.00

Grand Total of all Schedules 1-IK

(Complete on last page of Schedule)



## **ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK** 

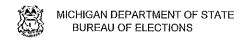
1. Committee I. D. Number 129354

CANDID	ATE	COM	<b>JITTE</b>
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2. Committee Name Committee to Elect Milinda Ysasi

CANDIDATE COMM	IIIIEE		
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: Klaas Kwant 4150 Grand River Drive Grand Rapids, MI 49525  If over \$100.00 cumulative, please provide: Occupation: Technology Manager Employer Name & Business Address: Grand Rapids Community College 143 Bostwick Ave NE, Grand Rapids, MI 49503	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Video Production  5. Date Of Receipt: 10/07/19 6. Vendor Name & Address:	300.00 §	300.00
Fund Raiser Contribution  Contribution # 2 PAC Receipt? Yes Name & Address  Jose Jimenez 1034 Aberdeen St NE Grand Rapids, Mi 49505  If over \$100.00 cumulative, please provide: Occupation: Global Video Production Employer Name & Address: Steelcase Inc. 901 44th St SE Grand Rapids, MI 49508  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Video Production  5. Date Of Receipt: 10/18/19  6. Vendor Name & Address:	000.00 \$	1000.00
Contribution #3 PAC Receipt? Yes Name & Address:  Carl Kelly  If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Postage  5. Date Of Receipt: 09/19/19  6. Vendor Name & Address:	5.00 \$_	35.00
Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$1,580.00	\$1,335.00
		Putauthia iata)	

Enter this total on line 6 of Summary Page



## FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name Committee to Elect Milinda Ysasi

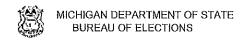
	- USE A	SEPARATE SH	EET FOR EACH	EVENT -	
3. Date Event Was Held		of Individuals Attending ating (whichever is	5. Type of Fund Raising	Activity	6. Address and Name (If any) of the place where the activity was held.
10/17/19	greatery	20	Neighbor Fun	draiser	246 Carroll Ave SE Grand Rapids MI 49506 Karla Amaya-Leone Private Residence
7. Total Contributions		\$845.00			
8. Other Receipts		\$0.00			
9. Gross Receipts (Add lines 7 a	and 8)	\$845.00			ø
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	\$149.35 and All Expenditures	Made For the Event	)	
11. Check if event was a joint				•	
Co-Sponsor(s)		Contribution S (%)	plit	·	Expenditure Split (%)
					Programme Annual Control of the Cont
	•	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	-	MMNywy 1.			

• The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

 Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

• Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page 2 of 2



#### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 129354

2. Committee Name Committee to Elect Milinda Ysasi

		L. 00	mintoo ramo		
	- USE A	SEPARATE SH	EET FOR EACH E	ENT -	
3. Date Event Was Held	or Participa	of Individuals Attending ting (whichever is	5. Type of Fund Raising Ac	6. Address and Nan place where the acti	ne (If any) of the lvity was held.
09/11/19	greater)	28	Fall Fundrais	Rapids, MI 49	bbits
7. Total Contributions	•	\$2,212.00			
8. Other Receipts		\$0.00	_		
9. Gross Receipts (Add lines 7	and 8)	\$2,212.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	\$670.00 and All Expenditure	s Made For the Event)		
11. Check if event was a jo	int fund rai	ser and complete th	e following:		
Co-Sponsor(s)		Contribution (%)	Split	Expenditure Sį (%)	olit
	-				WAVEFORMATION
	-				
The committee is negative	-	accepted Freed Paris			

The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the
period covered by the Campaign Statement.

 Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

• Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page	1	of 2
9-		



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

129354

1. Committee I. D. Number

ommittee	to	Elect	Milinda	Ysasi
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CANDIDATE COMMITTEE 2. Committee Name Committee to Elect Milinda Ysasi				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Expenditure #1  Name BARE ALL CLOTHING  Address  https://bare-all-clothing.myshopify.com	Purpose: Shirts	9/4/201 <mark>9</mark> Date	\$_\$1,000 <b>_{</b>	
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo II	temization Type	
Name Creston Neighborhood Association  Address  205 Carrier St NE # 1, Grand Rapids, MI	Purpose: Ad	9/10/20 <b>1</b>	\$ <u>\$300.0</u>	
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo II	emization Type	
Name EL GRANJERO MEXICAN RESTAURAL  Address 950 Bridge St NW, Grand Rapids, MI 49504	Purpose; Catering  Click H  Check box if this expenditure is payment of debt or obligation reported on previous	9/14/2011 Date ère for Memo It	\$ \$300.0	
Expenditure #4  Name FEDEX  Address  233 Fulton St W, Grand Rapids, MI 49503	statement  Purpose: Printing	9/21/20 <mark>.1</mark> Date	\$ <u>\$155.9</u>	
Fund Raiser	Click Hi Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo It	emization Type	
Expenditure #5 Name GFS STORE Address 1003 Michigan St NE, Grand Rapids, MI 49503  Fund Raiser	Purpose: Food	10/17/20 Date	\$ \$30.62	
	Subto Grand Total of all 8 (Complete on last page		1787.45 \$14,168.64	

Enter this total on line 8a of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

129354	
•	 

CANDIDATE COMMITTEE  2. Committee Name Committee to Elect Milinda Ysasi				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Name HANDICAP SIGN Address 1142 Wealthy St SE, Grand Rapids, MI 49506	Purpose: Yard Signs	9/21/2011 Date	\$ \$801.36	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2  Name Heritage Hill Association  Address	<sub>Purpose:</sub> Ad	10/3/201 Date	\$ <u>\$350.0</u>	
126 College Ave SE, Grand Rapids, MI 49503	Click H	lere for Memo It	temization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		<b>,,</b>	
Name KCI  Address 3901 E Paris Ave S E, Grand Rapids, MI 49512	l <b>m</b>	9/20/201 Date	\$ \$6,369 <b>#</b> emization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #4  Name KCI  Address  3901 E Paris Ave S E, Grand Rapids, MI	<sub>Purpose:</sub> Mailer and postage	10/1/20 <b>1</b> Date	\$ <u>\$1,013</u>	
49512  Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo Ito	emization Type	
Expenditure #5  Name KCI  Address  3901 E Paris Ave S E, Grand Rapids, MI 49512	Purpose: Mailer and postage Click H	10/11/20 Date	\$ <b>\$1,874</b>	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	<del></del>		
	Subto	tal this page	10409.50	
	Grand Total of all ( (Complete on last page		\$14,168.64	

Enter this total on line 8a of Summary Page

2 4 Page of



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

129354

1. Committee I. D. Number

. Committee Name	Committee to	Elect	Milinda	Ysasi	
. Comminues name					

2. 0	Cillinates Mains		<del></del>
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1	· · · · · · · · · · · · · · · · · · ·		
Name LIONS RABBITS		9/11/201	\$ \$370.0₽
Address	Purpose: Event Space	Date	ΨΟ/Ο.Ο
Address 1264 Plainfield Ave NE Crond Penide MI	Purpose:		
1264 Plainfield Ave NE, Grand Rapids, MI 49505	Click H	lere for Memo If	emization Type
	Check box if this expenditure is payment of		
<b>↓</b> Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
·			
Name MIDTOWN NEIGHBORHOOD		8/29/201	\$ \$250.0 <u>₽</u>
Addrona	<sub>Purpose:</sub> Ad	Date	
Address	ruipose.		
1147 Fulton St E, Grand Rapids, MI 49503	Click H	ere for Memo It	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	stalement		
Expenditure #3			
Name MUSIC VINE		10/18/20	6 P400 00
Address	_ Ad	Date	\$ \$120.0₽
Address https://musicvine.com	Purpose: Ad		
mtps.//masicvine.com	Click H	ere for Memo II	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
· · · · · · · · · · · · · · · · · · ·			
Name NGP VAN, INC		10/2/201	\$ \$35.22 <sub>11</sub>
Address	Purpose: Robocalls	Date	Ψ ΨΟΟ.ΖΖΕ
1445 New York Ave NW #200, Washington,	ruipose:		
DC 20005	Click H	ere for Memo It	emization Type
±	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	stalement		
Expenditure #5			
Name Paypal		10/18/20	
Address	Purpose: Donation Processing	Date	\$ <u>\$78.05</u>
paypal.com	raipose		
paypanoon	Click H	ere for Memo It	emization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
✓ Fund Raiser	statement		
	Subto	tal this page	853.27
		,	000,21
	Grand Total of all 5 (Complete on last page		\$14,168.64_
	(Outiplote of last page	. s. solidado)	Enter this total

on line 8a of Summary Page

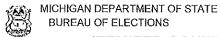


## **ITEMIZED EXPENDITURES SCHEDULE 1B**

129354 1. Committee I, D. Number

CANDIDATE COMMITTEE 2. C	committee Name Committee to Elect Mil	ında Ysası	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		40440400	
Name Square	l .	10/18/20	\$ \$40.68
Address	Purpose: Donation Processing	Date	
squareup.com	Click He	ere for Memo It	emization Type
<b>√</b> Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name STAPLES		8/29/201	\$ \$37.08 <sub>m</sub>
Address	Purpose: Printing	Date	* <del>***********************************</del>
5110 28th St SE, Grand Rapids, MI 49512			
orrozon ot oz, orana rapido, im rootz	Click He	are for Memo Ite	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name STORR PRINTING		9/7/2019	\$ \$576.3 <u>6</u>
Address 938 Cherry St SE, Grand Rapids, MI 49506	Purpose: Mailers printing	Date	» <u>ФЭТО.ЭД</u>
ove strong of one craine respices, im record	Click He	ere for Memo Ite	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name STORR PRINTING		9/17/201	• <b>#</b> 75.05
Address	Purpose: Mailers printing	Date	\$ \$75.25 <mark>⊞</mark>
938 Cherry St SE, Grand Rapids, MI 49506	Purpose:		
out controlly of controller tapiate, in record	Click He	ere for Memo Ite	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name STORR PRINTING		10/5/201	
Address	Purpose: Mailers printing	Dale	\$ <u>\$389.0</u> 5
938 Cherry St SE, Grand Rapids, MI 49506		ere for Memo It	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	sio for Monto to	omization 1 ypo
	Subtol	lal this page	1118.42
	Grand Total of all S (Complete on last page		\$14,168.64 <b>_</b>

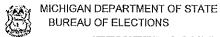
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#### CANDIDATE COMMITTEE

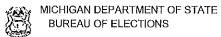
1. Committee I.D. Number \_\_\_\_\_129354

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 09/11/19 Name & Address:		
India Adams-Manns 7828 Timber Canyon Dr SE Ada, MI 49301	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Horo fo	r Memo Itemization
Occupation Community Volunteer Employer NA	Click Here ic	i Wellio Remization
Business Address NA		
Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address		
Lorena Aguayo Marquez 931 Griggs Ave SE Grand Rapids, MI 49507	<sub>\$</sub> \$25.00	<sub>\$</sub> \$75
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:		
Peter Albertini 540 Prospect Ave SE Grand Rapids MI 49503	\$250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Associate Broker at Peter Albertini Properties		
Business Address 3237 Platinum NE, Grand Rapids, MI 49525		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address		
Karla Amaya-Leone 246 Carroll Ave SE Grand Rapids, MI 49506	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Hore for	Momo Homization
OccupationEmployer	Olick Here for	Memo Itemization
Business Address  Type of Contribution:		
Page Subtotal	\$425.00	
Grand Total of All Schedules 1A	\$10,597.00	-
(Complete on last page of Schedule)  Page	Enter this total on line 3a of Summary Page.	J



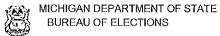
#### CANDIDATE COMMITTEE

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 10/16/19 Name & Address:		
Melissa Anderson 1581 Laraway Lake Dr. SE Grand Rapids, MI 49546	<sub>\$</sub> \$100.00	<sub>\$_</sub> \$200
5. If over \$100.00 cumulative, please provide:  Occupation Consultant Employer Self Employed	Click Here fo	or Memo Itemization
Business Address 1582 Laraway Lake Dr SE Grand Rapids MI 49546		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19 Name & Address	<b>.</b>	
Christina Arnold 4967 Chableau Dr SW Wyoming, MI 49519	<sub>\$</sub> \$50.00	<sub>\$</sub> \$375
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Social Innovation Programs + Partnerships Employer Steel Case		
Business Address 901 44th St SE, Grand Rapids, MI 49508		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/05/19  Name & Address:		
Mary Bauman 7747 Luca Vista Dr NE Rockford MI 49341	<sub>\$</sub> \$25.00	\$
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 Ralser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/03/19  Name & Address		
Rosalynn Bliss 21 Holmdene GR MI 49503	<sub>\$</sub> \$250.00	<sub>\$_</sub> \$350
5. If over \$100.00 cumulative, please provide:	Click Here for	· Memo Itemization
Occupation Mayor Employer City of Grand Rapids	15,5 (6)	arria rectimente
Business Address 300 Monroe Ave NW, Grand Rapids, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$425.00	
Grand Total of All Schedules 1A	\$10,597.00	-
(Complete on last page of Schedule)  Page of	Enter this total on line 3a of Summary Page.	



#### CANDIDATE COMMITTEE

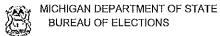
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:		
Douglas Booth 852 Sigsbee St SE Grand Rapids, MI 49506	\$25.00	<sub>\$</sub> \$115
5. If over \$100.00 cumulative, please provide:  Occupation Chief Operating Officer Employer Health Net of West Michigan	Click Here fo	or Memo Itemization
Business Address 620 Century Ave SW #210, Grand Rapids, MI 49503		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address		<del>".</del>
Andrew Brower 1436 Wilcox Park Dr SE Grand Rapids MI 49506	<sub>\$</sub> \$150.00	<sub>\$</sub> \$250
5. If over \$100.00 cumulative, please provide:  Occupation Program Officer Employer WK Kellogg Foundation	Click Here fo	r Memo Itemization
Business Address 1 E Michigan Ave, Battle Creek, MI 49017		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser  3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/15/19  Name & Address:		
Carol Carr 2730 Oakwood Avenue NE Grand Rapids, MI 49505	\$50.00	\$
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		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address		
Sarabeth Carr 1912 Lenawee Rd SE Grand Rapids MI 49506	§\$20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	· Memo Itemization
Occupation Employer	CHOR FIGIG 101	Mono Ronnzation
Business Address		
Page Subtotal	\$245.00	
Grand Total of All Schedules 1A	\$10.597.00	-
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#### **CANDIDATE COMMITTEE**

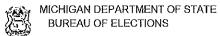
1. Committee I.D. Number \_\_\_\_\_\_129354

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 09/11/19 Name & Address:		
Dorothy Clune 911 Virginia St SE Grand Rapids MI 49506	\$100.00	<sub>\$</sub> \$150
5. If over \$100.00 cumulative, please provide:	Olimbert 1	
Occupation Retired Employer NA	Click Here to	or Memo Itemization
Business Address NA		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19 Name & Address		
Dorothy Clune 911 Virginia St SE Grand Rapids MI 49506	<sub>\$</sub> \$50.00	<sub>\$</sub> \$150
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Retired Employer NA		
Business Address NA		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/29/19 Name & Address:		
Chad Coffman "4790 Rahn Ct Grand Rapids, MI 49525"	\$200.00	<sub>\$</sub> \$650
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Manager Employer Kent County		
Business Address 300 Monroe Ave NW, Grand Rapids, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/03/19 Name & Address		
Shannon Cohen 1418 Colorado Ave SE Grand Rapids, MI 49507	\$50.00	<sub>\$</sub> \$89
5. If over \$100.00 cumulative, please provide:	Oliak Hana for	Mana Haw!
Occupation Employer	Click Here for	r Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	\$400.00	
Grand Total of All Schedules 1A	\$10,597.00	<b>-</b>
(Complete on last page of Schedule)	Enter this total on	
Page of	line 3a of Summary Page.	



#### **CANDIDATE COMMITTEE**

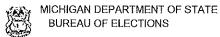
Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee of Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 0     Name & Address:	9/10/19		
Ann Cooper 432 Washington SE Grand Rapids, MI 49	503		
		<sub>\$</sub> \$100.00	<sub>\$</sub> \$300
5. If over \$100.00 cumulative, please provide:		Clink Hara for	r Mama Itamization
Occupation Attorney Employer Self Employed		Click Here to	r Memo Itemization
Business Address 80 Ottawa Ave NW, Grand Rapids, MI 49503			
Type of Contribution: ✓ Direct Loan from a person Fur	nd Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08 Name & Address	/30/19		
James Corbett "2502 LAWNCREST DR NEGRAND RAPIDS, MI 49505	11	\$50.00	<sub>\$</sub> \$150
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Retired Employer NA			
Business Address NA			
Type of Contribution: 🗸 Direct Loan from a person 📗 Fo	ınd Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08	3/30/19		
Kathy Crosby "4113 Grandview Terrace SWGrandville, MI 49418"		\$100.00	<sub>\$</sub> \$350
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Retired Employer NA			
Business Address NA			
Type of Contribution: Direct Loan from a person F	und Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 0 Name & Address	9/07/19		
Tom Dooley 2456 Red Maple Dr SE Grand Rapids MI	49512		
, , , , , , , , , , , , , , , , , , , ,		<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:			*
Occupation Retired Employer NA		Click Here for	Memo Itemization
Business Address NA	•		
	nd Raiser		
	Page Subtotal	\$350.00	
	otal of All Schedules 1A	\$10,597.00	
Page 5 of 23	n last page of Schedule) <sup>L</sup>	Enter this total on line 3a of Summary Page.	-



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_129354

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 08/30/19 Name & Address:		
Anissa Eddie "1235 Prospect Ave SEGRAND RAPIDS, MI 49507"	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Owner Employer Malamiah Juice Bar	Olick Field I	or Memo Remization
Business Address 435 Ionia Ave SW #128, Grand Rapids, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	<del>-</del>	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/13/19  Name & Address		
Deborah Eid 809 Diamond Ave NE Grand Rapids MI 49503	<sub>\$</sub> \$60.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser	_	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address:		
Vanessa Flores 2841 Richmond St NW Gradn Rapids, MI 49504	\$ \$50.00	\$ r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address  Type of Contribution:   Direct Loan from a person   Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address		
Jane M Gietzen "848 Aberdeen NEGrand Rapids, MI 49505"	<sub>\$</sub> \$50.00	<sub>\$</sub> _\$300
5. If over \$100.00 cumulative, please provide:	Ollate Hanne St	r Mama liaminatian
Occupation Director Employer Spectrum Health	Click Here to	r Memo Itemization
Business Address "333 Bridge St NWGrand Rapids, MI 49504"		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$260.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	ψ το,σοτ τοσ	
Page 6 of 23	Enter this total on line 3a of Summary Page.	

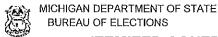


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_129354

2. Committee to Elect Milinda Ysasi

Enter contributor's name and address. If contribution is from an individ middle initial. Check box to indicate if contribution is from a Political Co Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of R Name & Address:	Receip	<sup>t</sup> _09/11/19		
Cherie Giles				
213 Sligh Blvd NE Grand Rapids, MI 49505			<sub>\$</sub> \$25.00	<sub>\$</sub> \$45
5. If over \$100.00 cumulative, please provide:			Click Horo fo	r Memo Itemization
Occupation Employer		<del>.</del>	Olick Here to	r Werro Remization
Business Address				
Type of Contribution: V Direct Loan from a person	$\checkmark$	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of R Name & Address	Receip	1 10/17/19	1	
Joseph Gomez 409 Coldbrook Street Northeast 49503	Gra	nd Rapids, MI	\$25.00	<sub>\$</sub> \$65
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
Occupation Employer		<u></u>		
Business Address	_			
Type of Contribution: Virect Loan from a person	✓	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of F Name & Address:	Receip	ot <u>09/11/19</u>		
Cesar Gonzalez 1055 Lake Michigan Dr NW Grand Rapids, MI 49	9504	4	\$50.00	<sub>\$</sub> _\$100
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Vice President Employer Mercantile I	Bank	<		
Business Address 5610 Byron Center Ave SW, Wyoming, MI 4951				
Type of Contribution:	$\checkmark$	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of I	Recei	pt 09/15/19		
Linda Goulet 207 Carroll Ave SE Grand Rapids,	MI	49506	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:			<b>-</b> W	
Occupation Marketing Professor Employer Davenpo	ort Ur	niversity	Click Here for	Memo Itemization
Business Address 6191 Kraft Ave SE, Grand Rapids, MI	4951	12		
Type of Contribution:		Fund Raiser		
		Page Subtotal		•
	Gra	nd Total of All Schedules 1A	\$10,597.00	-
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7 of 23			line 3a of Summary Page.	



#### CANDIDATE COMMITTEE

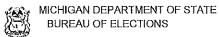
129354 1. Committee I.D. Number \_ 2. Committee Name Committee to Elect Milinda Ysasi

CANDIDATE COMMENT TEE 2.0	ommuee Name		
Enter contributor's name and address. If contribution is from an individual, enter la middle initial. Check box to Indicate if contribution is from a Political Committee or 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 10	/17/19		
Julia Guevara 1716 Lotus Ave SE Grand Rapids, MI 49	506		
		<sub>s</sub> \$75.00	\$
5. If over \$100.00 cumulative, please provide:		011111111	
Occupation Employer		Click Here to	r Memo Itemization
Business Address			
Type of Contribution: V Direct Loan from a person V Func	l Raiser		
B. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/0	03/19		
Terri Handlin Mulligan 2030 S. Terrace LN NE GR MI 4	9505	\$50.00	<sub>\$_</sub> \$85
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 Fur	d Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/	11/19		
Mary Hannon 4544 Woodcreek Dr SE Grand Rapids, MI 49546		\$ \$100.00	<sub>\$</sub> _\$200
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Vice President Employer Aspen Surgical			
Business Address 6945 Southbelt Dr, Caledonia, MI 49316			
	nd Raiser		
B. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10.  Name & Address	/14/19		
Lisa M Hinkel 1450 VAN AUKEN SE GRAND RAPIDS, MI 49508		\$25.00	\$
5. If over \$100.00 cumulative, please provide:		Ollok Hana for	Mama Itamization
Occupation Employer		Click mere for	Memo Itemization
Business Address			
	d Raiser		
	Page Subtotal	\$250.00	

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

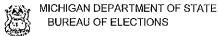
\$10,597.00

Enter this total on line 3a of Summary Page.



#### CANDIDATE COMMITTEE

	oox to indicate if conti	tribution is from a Politi		enter last name, first name, iltee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	PAC Receipt?	YES 4. Dat	e of Recei	pt 09/10/19		
michelle hoexur "440 Morris Ave		pids, MI 49503"			<sub>\$</sub> \$50.00	<sub>\$</sub> \$300
5. If over \$100.00 cur					Click Here f	or Memo Itemization
Occupation CEO		_ Employer_Prope	ller		OBOK FIORCE	or Monto Homeadon
Business Address <u>"4</u>	40 Morris Ave SE	EGrand Rapids, M	1 49503	·		
Type of Contribution:	✓ Direct	Loan from a perse	on	Fund Raiser		
Contribution #2     Name & Address	PAC Receipt?	YES 4. Dat	e of Recel	pt 10/17/19		
Jeannie Hosey	2948 Beechw	vood Dr SE Gra	ınd Raj	oids, MI 49506	<sub>\$</sub> \$50.00	
5. If over \$100.00 cun	nulative, please prov	ovide:			Click Here fo	or Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	✓ Direct	Loan from a perso	n 🗸	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Da	te of Rece	ipt 10/18/19	_	
Rachel Hyde 506 Comstock I	Blvd NE Grand	d Rapids, MI 49	505		<sub>\$</sub> \$50.00	. \$
5. If over \$100.00 cur	nulative, please pro	ovide:			Click Here fo	r Memo Itemization
Occupation		Employer				
Business Address Type of Contribution:	<b>√</b> Direct	Loan from a perso	on _	Fund Raiser	_	
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Da	ate of Rec	eipt 09/16/19		
Ellen James 12	44 Travis St N	NE GR MI 4950	5		<sub>\$</sub> \$25.00	. \$
5. If over \$100.00 cur	nulative, please pro	ovide:			Click Here fo	or Memo Itemization
Occupation		Employer			0.10K 13010 10	· · · · · · · · · · · · · · · · · · ·
Business Address						
Type of Contribution:	✓ Direct	Loan from a pers	on	Fund Raiser		
				Page Subtotal	\$175.00	
				rand Total of All Schedules 1A blete on last page of Schedule)	\$10,597.00	
9 of 23			, - · · · · ·	, 3	Enter this total on line 3a of Summan Page.	<b>y</b>



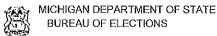
#### **CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Milinda Ysasi

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)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address:	_
Lisabeth Keegan "2035 Diamond NEGrand Rapids, MI 49505"	<sub>\$</sub> \$100.00
5. If over \$100.00 cumulative, please provide:	
Occupation Director Employer Fair Housing Center of West Michigan	Click Here for Memo Itemization
Business Address 20 Hall St SE, Grand Rapids, MI 49506	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address	-
Carl Kelly 940 Monroe Ave NW #219 Grand Rapids, MI 49503	<sub>\$</sub> \$50
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer NA	
Business Address NA	
Type of Contribution:	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:	
Ruth Kelly 940 Monroe NW #219 Grand Rapids 49503	<sub>\$</sub> \$100.00 <sub>\$</sub> \$525
E. If over \$400.00 computative places provide	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:  Occupation City Commissioner Employer City of Grand Rapids	
Occupation City Commissioner Employer City of Grand Rapids  Business Address 300 Monroe Ave NW, Grand Rapids, MI 49503	
Type of Contribution:   Direct  Loan from a person  Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address	
Mary Kenyon 223 Morris Ave SE Grand Rapids, MI 49503	<sub>\$</sub> \$100.00 <sub>\$</sub> \$350
5. If over \$100.00 cumulative, please provide:	
Occupation Retired Employer NA	Click Here for Memo Itemization
Business Address NA	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtot	al \$350.00
Grand Total of All Schedules 1.	
(Complete on last page of Schedul	e) Enter this total on

Page 10 of 23

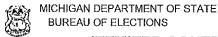
Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

129354 1. Committee I.D. Number

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 09/18/19 Name & Address:	_	
Klaas Kwant "4150 Grand River DriveGrand Rapids, MI 49525"	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:	Oliok Hava f	ou B.A
Occupation Manager Employer Grand Rapids Community College	Click Here h	or Memo Itemization
Business Address 143 Bostwick Ave NE, Grand Rapids, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address		
Gloria Lara PO Box 1822 Grand Rapids MI 49501	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address:	_	
Don Lee 306 Hampton Ave SE Grand Rapids, MI 49506	<sub>\$</sub> \$27.00	<sub>\$</sub> \$54
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address		
Barbara Lester "971 Andover ct se" Kentwood, MI 49508	<sub>\$</sub> \$50.00	\$140
5. If over \$100.00 cumulative, please provide:	Click I lava fo	u Adamaa Marialaadaa
Occupation Community Organizer Employer Heritage Hill Association	Click Here to	r Memo Itemization
Business Address 126 College Ave SE, Grand Rapids, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	\$227.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule		
Page 11 of 23	line 3a of Summary Page.	,



#### CANDIDATE COMMITTEE

129354 1. Committee I.D. Number

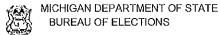
Committee to Elect Milinda Ysasi 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/30/19 Name & Address: Brandy Lovelady Mitchell "6895 Terra Cotta Drive SECaledonia, MI 49316" \$100.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer Self Employed Occupation Consultant "6895 Terra Cotta Drive SECaledonia, MI 49316" Business Address Type of Contribution: Direct Loan from a person Fund Raiser YES 3. Contribution #2 PAC Receipt? 4. Date of Receipt 09/11/19 Name & Address Ericka Lozano-buhl §\$150.00 \$250 842 Giddings Ave SE Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer Mixto Communications Occupation Business Owner Business Address 842 Gidding Ave SE Grand Rapids, MI 49506 Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? 4. Date of Receipt 08/29/19 Name & Address: Jan Maggini 1032 Colrain St SW Wyoming, MI 49509 ° \$50.00 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: 🗸 Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? 4. Date of Receipt 09/15/19 YES Name & Address Edgar Marty 30 College Ave SE Apt 24 Grand Rapids MI 49503 ູ \$50.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation\_ Employer \_ Business Address Fund Raiser Loan from a person Page Subtotal \$350.00

 $_{Page}$  12 of 23

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

\$10,597.00

Enter this total on line 3a of Summary Page.



#### CANDIDATE COMMITTEE

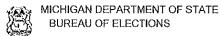
Committee I.D. Number	12935
committee I.D. Number	

2. Committee to Elect Milinda Ysasi

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 F Name & Address:	leceipt?	YES 4. Date of	f Receip	ot <u>09/15/19</u>		
Wendy Marty 30 Colleg	e Ave	SE Apt 24 Gran	d Rap	oids MI 49503		
		·	•		<sub>s</sub> \$50.00	<b>\$139</b>
5. If over \$100.00 cumulative, pla	naca prov	ido			\$	<u>.</u>
Occupation Retired	ase prov	Employer NA			Click Here for	or Memo Itemization
Business Address NA		Employer				
Type of Contribution: V Direct	Γ	Loan from a person		Fund Raiser		
3. Contribution #2 PAC Re	eceipt?		f Receip	ot 09/09/19	**	
Name & Address			•	33,33,13		
Brad Mathis 65 White H	lills NE	Grand Rapids	MI 49	546	<b>\$100.00</b>	
					<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, plo	age nrov	ide			Click Here fo	or Memo Itemization
Occupation Vice President		Employer_Rockford (	Constr	uction	Ollok Fiore ic	I Monio Romandi
Business Address 601 First St		• •	504	<del></del>		
Type of Contribution:	Ī	Loan from a person		Fund Raiser		
3. Contribution #3 PAC Re	eceipt?		of Recei	i <sup>pt</sup> 09/11/19		
Name & Address:			01110001	09/11/19		
"Richard Maycroft" 2803 Gerald Ave NE Gr	and Ra	apids 49505			<sub>\$</sub> \$50.00	\$ \$200
5. If over \$100.00 cumulative, plo	ease prov	ide;			Click Here fo	r Memo Itemization
Occupation IT		Employer Dematic				
Business Address 507 Plymouth	Ave NE,	Grand Rapids, MI 49	505			
Type of Contribution:   Direct		Loan from a person	✓	Fund Raiser		
Contribution # 4 PAC R Name & Address	eceipt?	YES 4. Date	of Rece	elpt 09/02/19		
Ciciley moore "2210 Edgewoo	d Ave G	Grand Rapids, MI 495	46" G	rand Rapids, MI 49546		
,		• •		,	<sub>\$</sub> 55	\$440
					Ψ	\$
5. If over \$100.00 cumulative, pl	•		*1	<b></b>	Click Here fo	r Memo Itemization
Occupation Program Officer		Employer WK Ke	ellogg	roundation		
Business Address 1 E Michig	an Ave,	Battle Creek, MI	49017			
Type of Contribution: 🗸 Direct	<u> </u>	Loan from a person		Fund Raiser		
				Page Subtotal	\$255.00	
				and Total of All Schedules 1A	\$10,597.00	
			Comb	lete on last page of Schedule)	Enter this total on	<del></del>

Page\_\_13\_of\_23

Enter this total on line 3a of Summary Page.

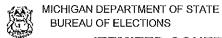


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_129354

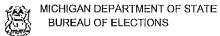
2. Committee to Elect Milinda Ysasi

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 10/02/19 Name & Address:		
Ciciley moore "2210 Edgewood Ave Grand Rapids, MI 49546"		
	<sub>\$</sub> \$55.00	<sub>\$</sub> \$440
5. If over \$100.00 cumulative, please provide:	00-1-11	
Occupation Program Officer Employer WK Kellogg Foundation	Click Here to	or Memo Itemization
Business Address 1 E Michigan Ave, Battle Creek, MI 49017		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	,	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address		
Kristin Moore 217 Hampton Ave SE Grand Rapids, MI 49506	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	_	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address:		
Yazeed Moore 414 Benson Ave NE Grand Rapids, MI 49503	\$50.00	<sub>\$</sub> \$100
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Program Officer Employer WK Kellogg Foundation		
Business Address 1 E Michigan Ave, Battle Creek, MI 49017		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address		_
Nicholas Nortier 108 Quimby St NE Grand Rapids 49505	<sub>ş</sub> \$15.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer	Olloit Fioto (ol	WOMO ROTHERMON
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$170.00	
Grand Total of All Schedules 1A	\$10,597.00	
(Complete on last page of Schedule)  Page of	Enter this total on line 3a of Summary Page.	<sup>1</sup>



#### CANDIDATE COMMITTEE

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 09/11/19 Name & Address;		
Juan Olivarez		
2093 Stickley Dr SE Grand Rapids MI 49546	<sub>\$</sub> \$100.00	<sub>\$</sub> \$250
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Mama Itamization
Occupation Educator Employer Grand Valley State University	Click Here id	or Memo Itemization
Business Address 401 Fulton St W, Grand Rapids, MI 49504		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Ralser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/03/19  Name & Address		
Christine Olmeda 1558 Double Eagle Trail Naples, FL 34120	<sub>\$</sub> \$100.00	<sub>\$</sub> \$200
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Consultant Employer Self Employed		
Business Address 1558 Double Eagle Trail Naples, FL 34120		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:		
Tanya Palit "1707 East Watson DriveTempe, AZ 85283"	<sub>\$</sub> \$25.00	<sub>\$</sub> _\$40
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/19 Name & Address	•	
Robert Qualls "5859 Samrick Ave NEBelmont, MI 49306"	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Official for	WONO ROMBZERON
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$275.00	
Grand Total of All Schedules 1A	\$10,597.00	<b>-</b>
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page	Page.	



#### CANDIDATE COMMITTEE

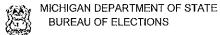
1. Committee I.D. Number \_\_\_\_\_\_129354

2. Committee to Elect Milinda Ysasi

	x to indicate if cont	ributi	on is from a Political Comm	enter last name, first name, ittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	PAC Receipt?		YES 4. Date of Rece	lpt 09/18/19		
	71 Cherrywo	od I	_ane NE Grand Ra	apids MI 49505		
	,			•	\$1,000.00	_
- 14					\$	\$
5. If over \$100.00 cumu			: <sub>mployer</sub> <u>GR Griffins Yo</u>	outh Foundation	Click Here fo	or Memo Itemization
				Juli F Garraguori		
Business Address 130	7	$\neg$		1		
Type of Contribution:	Direct		Loan from a person	Fund Raiser		
Contribution #2     Name & Address	PAC Receipt?	,	ES 4. Date of Recei	pt <u>09/11/19</u>		
Kristin Rahn-Tier "339 Alten Ave N	•	ids,	MI 49503"		<sub>\$</sub> \$25.00	\$
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		Em	ployer	-		
Business Address						
Type of Contribution:	Direct	L	oan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date of Rece	eipt 10/17/19		
Deanna Rolffs 431 Paris Avenu	e SE Grand F	₹ар	ids, MI 49503		\$100.00	<sub>\$</sub> \$300
5. If over \$100.00 cumu	ulativo nigaco nro	vido:			Click Here for	Memo Itemization
Occupation Consultar			mployer_Design Group	International		
Business Address 170 (		-				
Type of Contribution:	Direct		oan from a person	Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?		YES 4. Date of Rec	eipt 10/09/19		
Elizabeth Rosario "8777 Clyde Park		on (	Center, MI 49315"		<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cum	ılative, please pro	vide:				
Occupation Attorney		<b></b> -		ds Law Group, PLLC	Click Here for	Memo Itemization
Business Address 545	28th St SW, \	Nyc	ming, MI 49509			
Type of Contribution:	✓ Direct		Loan from a person	Fund Raiser		
				Page Subtotal	\$1,225.00	
			Gi	rand Total of All Schedules 1A	\$10,597.00	<b>-</b>
			(Comp	plete on last page of Schedule)	Enter this total on	_1
16 , 23					line 3a of Summary	

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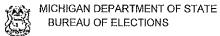
#### CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Milinda Ysasi

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 09/18/19 Name & Address:		
Darel Ross		
"1444 32nd StGrand Rapids, MI 49508"	\$500.00	\$
5. If over \$100.00 cumulative, please provide:	Click Horo fo	r Memo Itemization
Occupation Director Employer Start Garden	Olick Here to	Memo itemization
Business Address 41 Pearl St NW #200, Grand Rapids, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	····	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19 Name & Address		
Lindsey Ruffin 1354 Logan St SE Grand Rapids, MI 49506	<sub>\$</sub> \$50,00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:		
Linda Samuelson 246 Prospect Ave NE Grand Rapids MI 49503	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address	,	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/14/19 Name & Address		ı
Carlos Sanchez 1730 Ridgemoor Dr SE Gradn Rapids, MI 49506	<sub>\$</sub> \$100.00	<sub>\$</sub> \$300
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Director Employer Ferris State University	Click Here (Of	MIGHIO RAHIIZAUON
Business Address 151 Fountain St NE, Grand Rapids, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		1
Page Subtota	\$700.00	
Grand Total of All Schedules 1A	[Ψ 101007 100	
(Complete on last page of Schedule	Enter this total on line 3a of Summary	<del></del>

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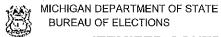


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_129354

2. Committee Name Committee to Elect Milinda Ysasi

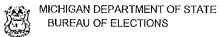
Enter contributor's name and address. If contribution is from an indi middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date on Name & Address:	of Receipt		
David Sawinski 2677 Middleboro Lane NE Gra	and Rapids, MI 49506		
	•	<sub>s</sub> \$500.00	•
5. If over \$100.00 cumulative, please provide:		\$ .	<b>\$</b>
	s GLP Investment Services	Click Here for	or Memo Itemization
Business Address 2824 E Beltline Ave NE, Grand Rapids			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
	f Receipt 09/20/19	T	
Hanna Schulze "1912 Linden Ave SeGrand Rapids, MI 49507"		<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here fo	or Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Name & Address:	of Receipt 10/17/19		
Fred Sebulske 4181 Sabal Pointe Ct SE Gran	d Rapids, MI 49546	<sub>\$</sub> \$50.00	\$
5. If over \$100.00 cumulative places provide:		Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Occupation Employer		·	
Business Address  Type of Contribution:   Direct  Loan from a person	✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date Name & Address	of Receipt 09/11/19		
CJ Shroll 425 Elenor St NE Grand Rapids MI	49505	<sub>\$</sub> \$25.00	\$
5. If over \$100.00 cumulative, please provide:		Click Hara for	r Memo Itemization
Occupation Employer		Click Here Tol	меню кенкакоп
Business Address		•	
Type of Contribution:	✓ Fund Raiser		
	Page Subtotal	\$625.00	
	Grand Total of All Schedules 1A	\$10,597.00	_
10 22	(Complete on last page of Schedule)	Enter this total on line 3a of Summary	_
Page 18 of 23		Page.	



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_129354

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 09/11/19 Name & Address:		**************************************
Eva Sitek 823 Baldwin St SE Grand Rapids MI 49506	<sub>\$</sub> \$50.00	<sub>\$</sub> \$80
5. If over \$100.00 cumulative, please provide:	Click Hara f	or Memo Itemization
Occupation Employer	Ollow Hele II	о мено пенигация
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/25/19  Name & Address		
Sara Smolenski 1111 Montrey Dr SE Grand Rapids MI 49506	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:  Kent County	Click Here fo	or Memo Itemization
Occupation Judge Employer Kent County  300 Mapros Ava NW Crond Rapids Atl 40503		
Business Address 300 Monroe Ave NW, Grand Rapids, MI 49503		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/19  Name & Address:		
Michelle Storey 160 Katherine NE GRAND RAPIDS, MI 49505	<sub>\$</sub> \$50.00	<sub>\$</sub> \$250
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Analyst Employer Michigan Department of Environmental Quality		•
Business Address 350 Ottawa Ave NW # 10, Grand Rapids, MI 49503		
Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/11/19 Name & Address		
Julie Tabberer "248 Dean Street NEGrand Rapids, MI 49505"	<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Hara fo	r Memo Itemization
Occupation Research Librarian Employer Grand Rapids Public Library	Glick Here ID	Memo Remization
Business Address 111 Library St NE, Grand Rapids, MI 49503		
Type of Contribution:     Direct   Loan from a person   Fund Raiser		
Page Subtotal	\$300.00	
Grand Total of All Schedules 1A	\$10.597.00	]
(Complete on last page of Schedule)	Enter this total on	_!
Page 19 of 23	line 3a of Summary Page.	



#### **CANDIDATE COMMITTEE**

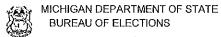
129354 1. Committee I.D. Number \_

2. Committee Name Committee to Elect Milinda Ysasi

Enter contributor's name and address. If contribution is from an indi middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Name & Address:	f Recei	pt _08/30/19		
Jacqueline Taylor 5155 N Quail Crest Dr SE	Gran	d Rapids, MI 49546		
		•	<sub>s</sub> \$50.00	<b>\$350</b>
5. If over \$100.00 cumulative, please provide:			\$	\$
Occupation Consultant Employer Pondera	. Advis	sors	Click Here fo	or Memo Itemization
Business Address 5155 N Quail Crest Dr SE				
Type of Contribution: ✓ Direct Loan from a person		Fund Ralser		
	f Recei	pt 09/16/19	H	
Amy Turner-Thole "1311 WoodshireGrand Rapids, MI 49506"			<sub>\$</sub> \$100.00	\$
5. If over \$100.00 cumulative, please provide:  Occupation Director Employer "First Step	s"		Click Here fo	r Memo Itemization
Business Address 401 Hall St SW Suite 385, Grand Rapid	ls, MI	49503		
Type of Contribution: Direct Loan from a person		Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Name & Address:	of Rece	<sup>ipt</sup> 08/28/19		
Danielle Williams 2082 Cranbrook Dr Grand F	Rapid	ls, MI 49505	<sub>\$</sub> _10	<sub>\$</sub> _\$80
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Employer		•		
Business Address				
Type of Contribution:		Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date Name & Address	of Rece	eipt 09/28/19		
Danielle Williams 2082 Cranbrook Dr Grand F	Rapid	ls, MI 49505	<sub>\$</sub> \$10.00	<sub>\$_</sub> \$80
5. If over \$100.00 cumulative, please provide:			Olf-1, U	. N. A
Occupation Employer			Click Here for	Memo Itemization
Business Address				
Type of Contribution:		Fund Raiser		
The second secon		Page Subtotal	\$170.00	
		and Total of All Schedules 1A	\$10,597.00	-
	(Comp	lete on last page of Schedule)	Enter this total on	_]

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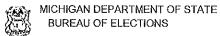
line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_129354

Enter contributor's name and address. If contribution is from an individual, enter last name, middle initial. Check box to indicate if contribution is from a Political Committee or an Indep Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 08/29/19 Name & Address:	
Don Williams 2645 Capilano Dr SE Grand Rapids, MI 49546	
	s \$50.00 s
5. If over \$100.00 cumulative places provide:	\$
If over \$100.00 cumulative, please provide:  Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address	
Mary Alice Williams 529 Lakeside Dr SE Apt A Grand Rapids, N	MI 49506 <sub>\$</sub> \$100.00 <sub>\$</sub> \$378
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer NA	
Business Address NA	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/19 Name & Address:	
Mike Williams 529 Lakeside Dr SE Apt A Grand Rapids, MI 49	\$200.00 s
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	. <u></u>
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/16/19 Name & Address	
Cassandra Younts "705 Kent Hills Rd. NEGrand Rapids, MI 49505"	\$50.00 \$ \$70
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 \$400.00
Grand Total of All S	
(Complete on last page Page 21 of 23	Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number

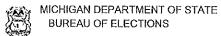
129354

2. Committee to Elect Milinda Ysasi

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 10/17/19 Name & Address:	•	
Cassandra Younts "705 Kent Hills Rd. NE Grand Rapids, MI 49505"	<sub>\$</sub> \$20.00	<sub>\$</sub> \$70
5. If over \$100.00 cumulative, please provide:	02.11	
Occupation Employer	Click Here to	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 09/11/19  Name & Address		
Kathy Ysasi 2205 Rolling Hills Dr SE Grand Rapids, Ml 49506	<sub>\$</sub> \$100.00	<sub>\$</sub> 350
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Retired Employer NA		, , , , , , , , , , , , , , , , , , , ,
Business Address NA		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/17/19  Name & Address:		
Kathy Ysasi 2205 Rolling Hills Dr SE Grand Rapids, MI 49506	§\$50.00	<sub>\$</sub> 350
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/19  Name & Address		
Reina Ysasi 424 Elliot St SE Grand Rapids MI 49507	<sub>\$</sub> \$25.00	<sub>\$_</sub> \$50
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	1	
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$195.00 \$10,597.00 Enter this total on	

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line 3a of Summary Page.



#### CANDIDATE COMMITTEE

1. Committee I.D. Number

129354

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 09/11/19 Name & Address:		
Karina Zarate 617 Wright St NE Grand Rapids, MI 49505	<sub>\$</sub> \$50.00	<sub>\$</sub> \$139
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Engineer Employer C2AE	OHON HOLD IC	Notito Refilization
Business Address 648 Monroe Ave NW, Grand Rapids, MI 49503		
Type of Contribution:   ✓ Direct Loan from a person ✓ Fund Raiser	*	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/07/19 Name & Address		
Richard Zipfel 619 Mohawk Street Columbus OH 43206	<sub>\$</sub> \$25.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/05/19  Name & Address:		
Betty Zylstra 30 College Ave SE Apt 62 Grand Rapids, MI 49503	\$ \$50.00	<sub>\$</sub> _\$100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer NA		
Business Address NA		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/24/19  Name & Address		
Progressive Woman's Alliance PO Box 1315 Grand Rapids MI 49501	\$2,500.00	\$
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation NA Employer NA	Click mere for	Metho Ifethization
Business Address NA  Type of Contribution:  Loan from a person Fund Raiser		
Page Subtotal	42 625 00	·
·	\$2,625.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$10,597.00	
Page_23_of_23_	Enter this total on line 3a of Summary Page.	