

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

		REC'D, KENT ELECTION
3. This Statement covers From	n: 1.23.19 to	RECTO, KENT ELECTION 10:10:10:10:10:10:10:10:10:10:10:10:10:1
4. Candidate Last Name	First Name	M.i.
Favale	Kathleen	S.M
4a. Office Sought including Dis	strict # or Community Served ((If applicable)
	. Mayor-Cit	rof East
Board member Euch	C.	and Rapids
	NT	1
	ential Address	
1	•	
	•••	
East Grand naplus,	, IVII 490UO	
770 71	FO 0444	
Area Code & Phone	58.0114	
8. Designated Record Keeper	r's Name and Address (If the c	ommittee has a
Designated Record Keeper)		
	M 	
1		
East Grand Hapids,	, IVII 49506	
Area Code and Phone 773	3.914.0406	
	9e. Dissolution of Candida	ate Committee
NLY if candidate	X Ry checking this item IA	Me certify any outstanding debt
: Danotion the	by the committee to the cand	tidate or his or her snouse is here
	by discharged and forgiven, a	and no longer collectible from
terly	owes no lates fees or has any	y oustanding debt.
Juarterly		
(44,16)	Further, if the dissolution can	not be granted, that this be
	Considered a reduest for the	Reporting vvalver.
al Statement ()		
Coverage Year	Effective date of di	ssolution
ndment to Campaign Statement	12.06.1	9
plete Item 9a, 9b, 9c or 9e to	Moto: The disposition of resid	dual funda must be reported on
~	Schedule 1B and the Summa	
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in the preparation of this stateme	ent and attached schedules (if	any) and to the best of
omplete.		•
4-		10.22.19
Circultura (C	Date	
algnature	$i \hookrightarrow i$	
$\mathcal{L} = \mathcal{L} \times $		10.22.19
/ ()//	Date	
€ 11 E	4. Candidate Last Name Favale 4a. Office Sought Including Dis Board Member Local 4b. County of Residence KE 6. Treasurer's Name & Reside Dino Favale 2557 Hall Street SE East Grand Rapids, Area Code & Phone 773.79 8. Designated Record Keeper Designated Record Keeper Katie Favale 2557 Hall Street SE East Grand Rapids, Area Code and Phone 773 NLY if candidate ballot for the terly Quarterly al Statement () Coverage Year Indiment to Campaign Statement splete Item 9a, 9b, 9c or 9e to ate which Statement is being ded.)	4. Candidate Last Name Favale 4a. Office Sought Including District # or Community Served (Board Member Local 4b. County of Residence KENT 6. Treasurer's Name & Residential Address Dino Favale 2557 Hall Street SE East Grand Rapids, MI 49506 Area Code & Phone 773.758.0114 8. Designated Record Keeper's Name and Address (If the comsignated Record Keeper) Katie Favale 2557 Hall Street SE East Grand Rapids, MI 49506 Area Code and Phone 773.914.0406 9e. Dissolution of Candidate Committee to the cand by discharged and forgiven, the committee. The committee to the cand by discharged and forgiven, the committee. The committee committee. The committee to the cand by discharged and forgiven, the committee. The committee to the cand by discharged and forgiven, the committee. The committee to the cand by discharged and forgiven, the committee. The committee to the cand by discharged and forgiven, the committee. The committee to the cand by discharged and forgiven, the committee. The committee of th

Signature

Type or Print Name

1. Committee I.D. Number 129358

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SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Friends of Katie Favale

Column I	Column II
This Period	Cumulative this election cycle
(3a.) \$16,530.00	
(3b.) \$ NOT APPLICABLE	
(3c.) \$ 16,530.00	(18.) \$
(4.) \$	(19.) \$
(5.) \$16,530.00	(20.) \$
(6.) \$ _2,548.38	(21.) \$
(7.) \$	(22.) \$
(8a.) \$	
(8b.) \$ <u>0</u>	
(8c.) \$ <u>0</u>	
(9.) \$	(23.) \$
(10a.) \$	
(105) \$ 0	
_	
	(24.) \$
(12a.) \$	
(12b.) \$ <u>0</u>	
(13.) \$ 0 (14.) + \$ 16,530.00 (15.) = \$ 16,530.00 (16.) - \$ 15,033.99 (17.) \$ 1,496.01	•
	This Period (3a.) \$ 16,530.00 (3b.) \$ NOT APPLICABLE (3c.) \$ 16,530.00 (4) \$ 0 (5.) \$ 16,530.00 (6.) \$ 2,548.38 (7.) \$ 0 (8a.) \$ 0 (8b.) \$ 0 (8c.) \$ 0 (9.) \$ 15,033.99 (10a.) \$ 0 (10b.) \$ 0 (12a.) \$ 0 (12b.) \$ 0 BALANCE STATEMENT (13.) \$ 0 (14.) + \$ 16,530.00 (15.) = \$ 16,530.00 (16.) - \$ 15,033.99 1 406.01

1. Committee I.D. Number

129358

CANDIDATE COM	ИΙ	T	TEE
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2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/8/19 Name & Address: David Frey 2011 San Lu Rae East Grand Rapids, MI 49506	100.00	100.00 \$	
5. If over \$100.00 cumulative, please provide:			
Occupation Employer	Click Here for	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 3/6/19 Name & Address			
Reynolds A Brander 2648 Lake Drive SE East Grand Rapids, MI 49506	100.00	300.00 \$	
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer	Click Here fo	er Memo Itemization	
Occupation Employer Employer			
Type of Contribution:			
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/3/19 Name & Address: Reynolds A Brander 2648 Lake Drive SE East Grand Rapids, MI 49506	100.00	\$	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization	
Occupation Retired Employer			
Business Address			
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 6/17/19 Name & Address Reynolds A Brander 2648 Lake Drive SE	100.00	200.00	
East Grand Rapids, MI 49506	100.00	300.00	
5. If over \$100.00 cumulative, please provide:		Y	
Occupation Retired Employer	Click Here for	Memo Itemization	
Business Address Type of Contribution:			
Page Subtotal	400.00		
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of	Enter this total on line 3a of Summary Page.		

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

129358

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? VES 4. Date of Receipt 9/24/19 Name & Address: Progressive Women's Alliance of West Michigan P.O. Box 1315 Grand Rapids, MI 49501	250.00 \$	250.00 \$
5. If over \$100.00 cumulative, please provide:	-	
Occupation Employer	Click Here for	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/8/19 Name & Address		
Miriam Aukerman 2717 Hall Street SE Grand Rapids, MI 49506	25.00 \$	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 10/10/19 Name & Address: Suzanne Quigley 6447 S. M-129 Sault Ste. Marie, MI 49783	1000.00	1000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		İ
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/22/19 Name & Address John Kilbourne		
261 Gladstone SE Grand Rapids, MI 49506	25.00 \$	25.00 \$
5. 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		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,300.00	
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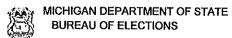
1. Committee I.D. Number

129358

CANDIDATE	COMMITTEE	2. Committee N

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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 6/20/19 Name & Address: Tina Brown 551 Plymouth Avenue SE East Grand Rapids, MI 49506	500.00 \$	\$
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer Business Address	Click Here fo	or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/27/19 Name & Address Tina Brown 551 Plymouth Avenue SE	500.00 \$	1000.00
East Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/29/19 Name & Address: Regina Fitzpatrick 1037 Plymouth Avenue SE Grand Rapids, MI 49506	20.00	20.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/19/19 Name & Address Linda I Shuster 1535 Breton Road SE East Grand Rapids, MI 49506	150.00	150.00 \$
5. If over \$100.00 cumulative, please provide:		
Occupation Professor Employer Western Michigan University	Click Here for	Memo Itemization
Business Address Western Michigan University, Kalamazoo, MI		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Pageof	1,170.00 Enter this total on line 3a of Summary Page.	

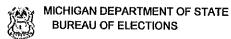


CANDIDATE COMMITTEE

Committee I.D. Number	129358		
2 Committee Name	10 Ade of	Kakie F	avale

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2. Committee warms		01 1001
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 10.1.19		
Karey Hanrick 3004 Oak wood 3004 GR. MIE 49506	\$ 200.00	\$300°
5. If over \$100.00 cumulative, please provide:		
Occupation Lity OMMISSION Employer City of East Grand Business Address +50 Lake Drive. EGR, MI	2 Click Here for	or Memo Itemization
	49506	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt C. L. C.		
Claudine Dungan		
1621 Amberley Ct.	\$ 500.00	0,900.00
5. If over \$100.00 cumulative, please provide:	Click Horo fo	r Mana Itaniticu
5. If over \$100.00 cumulative, please provide: Occupation City (DMMISSIDNA Employer City of East Grand R	apids Hele lo	wemo ternization
Business Address 750 Lake Dr. EBR, HI 49506		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt		
		,
1023 Floral A/g.	\$ 200.00	, 400.00
ESP, LIE 49506		
5. If over \$100.00 cumulative, please provide:		Memo Itemization
Occupation Joy Commission Employer Ity of Cast Grand	Rapids	
Business Address J 750 Cake Dr. UEGR, MI 4"	1806	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt		
Matt teyen	A	
630 ROSCIODOR SC EGR, MI 49506	\$ 15.00	\$
EGP, MI 41506 5. 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		
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CANDIDATE COMMITTEE

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CANDIDATE COMMITTEE 2. Committee Name	reside of	Caro Fauc
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 9.3.17 Name & Address: ORAL AVE. SE Occupation	\$ 75.00 Click Here fo	\$ 15.00 or Memo Itemization
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address LYIS Pachla LZS BYIAT Wood Ave. SE Sea P. MI L4506 5. If over \$100.00 cumulative, please provide:	\$ 50.00 Click Here fo	\$ 50.50
Occupation Employer		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9. 4. 19 Name & Address: That Murua D31 Late Side Dat. SE EGR, MIT 4906 5. If over \$100.00 cumulative, please provide:	s So. So Click Here for	\$ 50.
OccupationEmployer_		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9, 4, 19 Name & Address Tank Ce Sates Z622 Hall Street SE EGR, HI 4750 6 5. If over \$100.00 cumulative, please provide:	\$ 15.00 Click Here for	\$
Occupation Employer		MOMO ROMIZATION
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on tine 3a of Summary Page.	

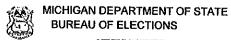
1. Committee I.D. Number	127358		
2. Committee Name	iends of	Kahe	Lavale

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 ()		
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Gary Remostrice RId	1 ~	
CC 10 145 19001	1 de	50
EGR, MT . 47506	\$ <u>{ 5 · </u>	\$ \langle \tau \cdot \cd
5. If over \$100.00 cumulative, please provide:	Click Hara fo	se Momo Haminatina
Occupation Employer	Click Here it	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		
Name & Address David Heina		
256 Gracewood Dr. St	\$ 100.00	100
256 Gracewood Dr. SE Grand Rapids, HI 49506	\$ 100.	\$ [00.
5. If over \$100.00 cumulative, please provide:	Oliok Hara ta	w. M d a mare 10
Occupation Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Loan from a person Fund Raiser	**************************************	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt		
Emily Bridson		
Emily Dridson	2000	-, 2500
1668 Coalcar Ct. SE	\$ \alpha \gamma, -	\$ 25
Kentwood, MI 49508		-
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3.19		
Elizabeth Welch		
7512 lodio, Trail St	00	c/100.00
Cos Haland (Vaccional)	\$ 200.	s +100.00
5. If over \$100.00 cumulative, please provide:		<u> </u>
Occupation Attorney Employer Welch Law	Click Here for	Memo Itemization
Business Address PO Box 6262 GR, MP 49516		
Type of Contribution: Direct Loan from a person Fund Raiser		
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CANDIDATE COMMITTEE

1. Committee I.D. Number 129358
2. Committee Name Friends of Kare Favale

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 9, 4, 9 Name & Address: Wartin Blackurn Zlelle Elmwood Dr. 2 ESR, MI HATTA 5. If over \$100.00 cumulative, please provide:	<u> </u>	\$ \(\otimes \
Occupation Employer		, morne wormzanom
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4.4, 19 Name & Address ANARUA ROYALON ROYALON SE Grand Rapids, MI 47506 5. If over \$100.00 cumulative, please provide:	\$_50.60 Click Here for	\$_50. かつ Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: Sharon Mah 2032 Coronado Dr. SE ESP, MIL 49506 5. If over \$100.00 cumulative, please provide:	\$ 00.00	\$ DD. OO Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
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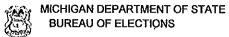
1. Committee I.D. Number 129358

CANDIDATE COMMITTEE	2. Committee Name	iends of	Katie Faval
Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	enter last name first name	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Recei	pt 6.26.19		- ССССОВ СССОВ ССССОВ ССССОВ ССССОВ ССССОВ ССССОВ СССОВ ССОВ ССОВ СССОВ СССОВ ССОВ СОВ
Jane Zawacki 554 Lovett SE 5. If over \$100.00 cumulative, please provide:		<u>\$ 200.00</u>	<u>200.00</u>
	idge leal	ty Click Here to	or Memo Itemization
Business Address 2213 Wealthy #200	EGR, MI	747201	0
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	1 (0.20.19		
Bob Kirchaessner			
1900 El Dorado SE		\$ 125.00	1200
ERR, MI 49506		\$ [2-0]	\$ 10-51
5. If over \$100.00 cumulative, please provide:	`\	Click Here for	Memo Itemization
Occupation Realtor Employer (2000)	de Rea	lty	
Business Address 2213 Wealthy #200	EGR, MI	49506	
Type of Contribution: Loan from a person	Fund Raiser	·	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	6.20.19		
Bryan Walters 1039 Pinacrest EGR, MI 4506	0, 20, ((<u> 250°</u>	\$1000.00
5. If over \$100.00 cumulative, please provide:	.) .	Click Here for	Memo Itemization
Occupation Attorney Employer Variable Business Address 338 Bridge St. #1750 Type of Contribution: Direct Loan from a person	MCCOW GRME 4 Fund Raiser	f9501	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt	ot 6.20.19	24000	200
6.R. MI 49506 5. If over \$100.00 cumulative, please provide:		<u>\$ 200</u>	\$ 200
Occupation Singer Employer Opera	- Grand Ro	Click Here for I	Memo Itemization
Business Address 1320 Fulton Gie.	MI 4950	3	
Type of Contribution: Direct Loan from a person	Fund Raiser	- 	
	Page Subtotal	775.00	

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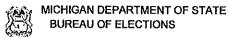
Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



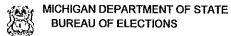
1. Committee I.D. Number 129358	
2 committee Name Friends of Katie	Favale

2. Continue value (11)		
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 6.20.19 Name & Address: Patrick Perls 4655 Plateau View G.R., Let 49525 5. If over \$100.00 cumulative, please provide:	\$ 50.00	\$ 50.00
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 (20.19		
Name & Address R. Osipoff SIL Plymouth Ave. SE GR, MT 49506	\$ 500°°	<u>\$ 500.50</u>
5. If over \$100.00 cumulative, please provide: Occupation Office Asst. Employer GVSU		r Memo Itemization
Business Address 50 Front Ave. Sw G.R., MI 49	20rt	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 6. 20.19 Name & Address: Tank Romanowski Zztl Anderson W. SE EG R, MI H Gold 5. If over \$100.00 cumulative, please provide: Occupation Raiser Employer Tennadae Raa Business Address 2213 Weather #1200, EG R, MI 40 Type of Contribution: Wirect Loan from a person Fund Raiser	. 1	s 250 50 Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5.26.19 Name & Address Lee Weber C+8 Rosewood C.R., HIT + (50)e 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 25.00 Click Here for	\$ 25.50 Memo Itemization
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
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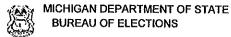
1. Committee I.D. Number	129358		
		Katie Fa	Wale

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 5.26.19 Name & Address: NICOLE HAGIUNG 630 ROSELDOOD ST 26R HT 49506 5. If over \$100.00 cumulative, please provide:	\$1 50. 80	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Occupation Employer	Click nere to	i wello itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6.3.19 Name & Address		
F. Blossom 984 Gladstone EGR, MI 49504	\$ 25°0	\$ 2500
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	Ollon Floro loi	Wello Remization
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.30.19 Name & Address: LUCLINGA Shaw Z135 Wilshive Dr. SE 2GR, HIT 415010 5. If over \$100.00 cumulative, please provide: Occupation Employer	s S 0 D Click Here for	\$ 50. 80 Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5.30.19 Amy Knape 7538 Maple Wood EGR, MIZ 44506	: 7500	s 7500
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Employer	Office 101	weno temzaton
Business Address Type of Contribution:		
Page Subtotal	250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number	129358		
2. Committee Name	ends of	Kane Lava	le
enter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	

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 5.30.19 Name & Address: Douglas Doubling 434 Briar wood St EGP, MIT 4501p 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 15 00 Click Here fo	s 15.80 or Memo Itemization
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5.30.19		
Tom lilma Po Box 68871 GR, HIZ 49512	\$ 2000	* 20 ° 50
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 5.30.19 Name & Address: LV Step Sutsma L050 Conton AVC. SE EGP, MI 41506 5. If over \$100.00 cumulative, please provide: Occupation Tome Maller Employer Self Imployed Business Address L050 Conton EGN, MI 41506 Type of Contribution: Direct Loan from a person Fund Raiser	s 100 - 00 Click Here for	\$ 100.00 Memo Itemization
Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
Brian Miller 1033 Floral Ave. EGR, LII 4950Le	\$ 200.00	\$400.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Ity Commissions Employer City of Cast Grand & Business Address TD Lake Dr. EBR, MI 4950 Type of Contribution: Direct Loan from a person Fund Raiser	lo	Memo Itemization
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



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3. Contribution #2

Name & Address

Occupation _

Business Address Type of Contribution:

3. Contribution # 3

Name & Address:

Occupation_ Business Address Type of Contribution: (

3. Contribution # 4

Name & Address

Occupation_

Business Address __

ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

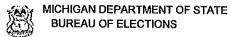
CANDIDATE COMMITTEE

BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	1-9-
SCHEDULE 1A 1. Committee I.D. Number	121338
	iends of Kathe Fava
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 5. 30. 17 Name & Address: 1344	\$50 \$50 SEE SEE SEE SEE SEE SEE SEE SEE SEE SE
. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5.30.19	
Race & Address Kacen Zevi Loos Laurel Ave. SE EGR, MI 49506 If over \$100.00 cumulative, please provide:	\$ 50 \$ 50 \$ Click Here for Memo Itemization
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Business Address	
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ame & Address Willam Marsh ZHHR Beach 200d EGR, MIZ HASULO If over \$100.00 cumulative, please provide: Decupation Employer	STSD STSD Click Here for Memo Itemization
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Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

Page 12 of 25

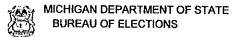


CANDIDATE COMMITTEE

1. Committee I.D. Number 27358	
2 Committee Name Friends of Kahe Fava	le

Page.

2. Committee training		
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 5.30.19 Name & Address: SUSAN KEEL TOI Amberley Ch. EGR, HIT HOODE 5. If over \$100.00 cumulative, please provide: Occupation town waker Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 255. ecc Click Here fo	s ZOO NO sor Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5.30.19 Name, & Address Harrick 3DOL Dakwood Ta. SE 2GR, MT 4950Le 5. If over \$100.00 cumulative, please provide: Occupation Law Brundsial Employer Law of Cast Grand Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 100 00 Papids	\$300. TO
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5,30.) 9 Name & Address: Christopher acts ZLOZZ HAW St. St. EGP, HT HADD 5. If over \$100.00 cumulative, please provide:	S T SO Click Here for	\$ 1500 \$ Memo Itemization
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Business Address Type of Contribution:		
3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5.30. 19 Name & Address Con Point S Ada LIT 4801 5. If over \$100.00 cumulative, please provide:	\$50.00	\$ 50. <u>ce</u>
Occupation Employer	Click Here for	Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

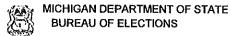
1. Committee I.D. Number 129358
2. Committee Name Frends of Kater Favale

Page.

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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 5.30.		
Name & Address:		
1045 Santa Crut	F 10	e to
EGR, ME 49506 5. If over \$100.00 cumulative, please provide:	\$ 50.	\$ 50,°=
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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt S. ZO. 17		
Elizabeth Welch		
7515 Indian Trail SE	\$ 200.00	, 40000
6.R., MI 49506		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Attorney Employer Welch Law		
Business Address PO BOX 6262 GR, MI 48	16	
Type of Contribution: Loan from a person Fund Raiser	• •	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.28.1		
Hilary Garon	00 00	G1
1148 Conton	\$ 250.	, 250. FD
EBR, MZ 44506	Oliale Danie Con	h.A
5. If over \$109.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation tower Maker Employer Self employed		
Business Address 1148 Covilor EGR, MI 49800		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6.20.4		
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Warren Dettaan 1960 Sherman St. SE	00	~ M
C C LIT WATER	\$ 65 D.	\$ ZSD.
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- 14)	line 3a of Summary	

1. Committee I.D. Nu	mber 2935	<u> </u>		
2. Committee Name	Friends	0	Katie	Favel

2. Committee Name L	101(0/03 1	1-410100
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 9. 1. 19 Name & Address: Devate Home Zol Argustua Dr. SE EDR, MT 49506 5. If over \$100.00 cumulative, please provide: Occupation Principal Employer 2012 Pansuth Business Address Syaud Rapids, MT Type of Contribution: Direct Loan from a person Fund Raiser	V	s 200.80
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt		
Name & Address Dino Favale Z557 Hau St. SE EGR, MI Hado 5. If over \$100.00 cumulative, please provide:		\$ / 600. 50 Memo Itemization
Occupation Executive (DEmployer Wessels & Associates		(
Business Address 2554 Hau St. SE 26 R, MI 49806	. (Hichiga	in Branch)
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Name & Address: Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 5.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 7.22. 9 Contribution #3 PAC Receipt YES 4. Date of Receipt 7.22. 9 Contribution #3 PAC Receip	S D. D. Click Here for	\$50.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5.22-17		
Name & Address Kathlen Bruinsma 1748 Alexander 5. If over \$100.00 cumulative, please provide:	\$ 50.00	\$ 50.00
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Business Address		
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Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 15 of 35	Enter this total on line 3a of Summary Page.	

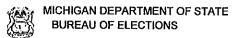


1. Committee I.D. Number	

CANDIDATE COMMITTEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5. 22. [9] Name & Address: LURA Schard 429 Briar WOOd 5. If over \$190.00 cumulative, please provide from St. VP factor Employer Occupation SSt. VP factor Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 250.45 Click Here fo	s Z50.00 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5.24, 19 Name & Address Jennifer Mets 303 Briar 2000 EGR, MIT 49506 5. If over \$100.00 cumulative, please provide:	Click Here for	\$ / ØØ. 50
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5. 24. 19 Name & Address: Wells & Janes Zoutt Lake Dr. EGP, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Home Make Employer Self Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 150.00 Click Here for	\$ 150.00
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5. 26. 19 Name & Address WALLOW BOLGOOD EGP, MP LISO 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 150.50 Click Here for	s
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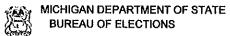


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number	129	355	3		
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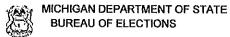
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3. Contribution # 1 PAC Receipt?	YES 4. Date of Rece	int / 57/ 10		date of receipt)
Name & Address: Ted Duncan (Fo) Amberley EGR, MZ 4950	The street	5.26.19	\$ 50.00	\$1050.00
5. If over \$100,00 cumulative, please pro	vide: a.c. O) (
Occupation 10 ect Man	Employer	employed	Click Here fo	or Memo Itemization
		7	1900	
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? [Name & Address	YES 4. Date of Rece	ipt 5.27.19		
Michelle Jeffr	res			
556 Gladstone	(1500	700
EGR, LIE 49501	P			<u> </u>
5. If over \$100.00 cumulative, please prov	•		Click Here for	r Memo Itemization
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Business Address				
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3. Contribution # 4 PAC Receipt?	YES 4. Date of Reco	eipt 5.28.19		
Fruly Bridse 1008 Calcar Kentwood, L	Ct. 4508	3.28.1	\$ 25.00	\$\$50.00
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1. Committee I.D. Number	127528	
2. Committee Name	riends of	Karie Favale

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)
Business Address 1720 Plankeld Ave. G. R. WI	\$ <u>200.00</u> © [Click Here fo	s 200.80 or Memo Itemization
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5.29. 19 Name & Address And Marie Carson 425 Briarwood Grand Rapids, MIT 4904 5. If over \$100.00 cumulative, please provide: OccupationEmployer	\$Click Here fo	s 45.00 r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		į.
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.30, 19 Name & Address: Laack Man Brad Laack Man 3175 Cascade Rd. G. R. MIE 49506 5. If over \$100.00 cumulative, please provide:	\$ / OO . NO Click Here for	\$ <u>/ の</u> ひっ ^{でも} Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5.3D.19 Name & Address Carly Miller 1034 Eastwood EGR, MZ 49506 5. If over \$100.00 cumulative, please provide:	\$ LOD . ego .	\$ 1 00. ₩
OccupationEmployer	OHOR HOLD TOL	MOHIO HOHIIZANOH
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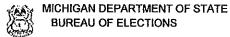
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

129358

Friends of Katie Favale 2. Committee Name

Enter contributor is name and address. Contribution is from an individual, enter last name, first name, microdin initial. Check box to inclinate contribution is me Political Committee or an Independent Proceedings of Section (Contribution Cycle for Each Contribution (PAC) Report at Contributions organicless of amount Pack Receipt YES 4. Date of Receipt S. S						
Name & Address Type of Contribution: Direct Loan from a person Fund Reiser S. Contributi	middle initial. Check box to indicate if con Committee (PAC) Report <u>all</u> contributions	tribution is from a Politic	dividual, e al Commit	nter last name, first name, tee or an Independent	6. Amount	Election Cycle for Each Contributor (Through
Cick Here for Memo Itemization Cocupation Business Address Type of Contribution: Diffect Loan from a person Fund Raiser \$ 150.80 \$ 150.80 Click Here for Memo Itemization Cocupation Employer Page Sublotal Click Here for Memo Itemization Cocupation Employer Click Here for Memo Itemization Click Here for Memo Itemiza	Name & Address: Cleoral Lunc	SKOW	of Receip	5.30.19	\$ 50.00	50.00
Susiness Address Susiness Ad	5. If over \$100.00 cumulative, please pro	ovide:			Click Here fo	or Memo Itemization
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Name & Address	Type of Contribution: Direct	Loan from a person		Fund Raiser		
Occupation Employer	Name & Address: JOSE Holac LOZI Benja GR, MIZ	ond Are.	of Receip	5.31.19		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6. LL. 9 Name & Address Christiae Woller Skar Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 325, 00 Grand Total of Ali Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary						
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6. LL. 9 Name & Address	Rusings Address	Employer		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6. L4. 9 Name & Address Christine Woller Skar Def Lastwood Signature of Skar Click Here for Memo Itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal 375, 00 Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary	Type of Contribution: Direct	Loan from a person		Fund Raiser		
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

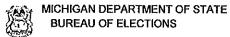
129358

line 3a of Summary

Page.

2. Committee Name Friends of Katie Favale

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 1. 1. 9 Name & Address: Patrick Wash Zst Pecal Lake Blvd. 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 35.00 Click Here fo	\$ 35,00 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt £. 26, 19 Name & Address MICHAEL HOCKSTVA ZZOL HEALH St. EGR, MIL HOSDO 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	\$ 5.00 Click Here fo	s 5. 50 r Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7. 26. 9 Name & Address: CATALLE CONCISTION STORE LOSCULLE TO 3 + 419 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$ / 00.00 Click Here for	\$ /00.00 Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt	\$ 25.00 Click Here for	\$257.00 Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	-



1. Committee I.D. Number

129358

CANDIDATE COMMITTEE 2. Committee Name Friends of Katie Favale			
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		or Memo Itemization	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt \$\.\ \gamma \cdot		\$ /OD.OD r Memo Itemization	
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8, 12, 19 Name & Address: Plymbuth EGR, MX 4506 5. If over \$100.00 cumulative, please provide:	\$ 50.00 Click Here for	\$ 50.00 Memo Itemization	
Occupation Employer			
Business Address Loan from a person Fund Raiser			
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 1. 9 Name & Address	\$ 50.00	\$50.00	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization	
Occupation Employer	OHOR FIGURE 101	WOITO ROTHERUIT	
Business Address			
Type of Contribution: Direct Loan from a person Fund Raiser			
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Page 21_ of 25

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

Enter this total on line 3a of Summary Page.



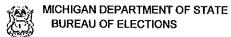
1. Committee I.D. Number

129358

CANDIDATE	CO	MN	ITTEE
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2. Committee Name

Name & Address Name & Address 100.00 100.00	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)
S. If over \$100.00 cumulative, please provide: Cocupation Cocupation Cocupation Cocupation Cocupation City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution: City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution: City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution: Cocupation City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution: Cocupation City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution #2 PAC Receipt? YES A. Date of Receipt A. Date of Receip	Name & Address: Jude Pereira 3045 Woodcliff Circle	100.00	
Click Here for Memo Itemization Cocupation Employer Fund Reiser Type of Contribution: Fund Reiser Click Here for Memo Itemization Fund Reiser Address Claudine Duncan 1621 Amberley Court East Grand Rapids, MI 49506 Fund Reiser Click Here for Memo Itemization Fund Reiser Fund Reiser Click Here for Memo Itemization Fund Reiser Click Here for Memo Itemization Fund Reiser Type of Contribution: Direct	East Grand Rapids, MI 49406	\$	\$
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10.3.19 Name & Address Claudine Duncan 1621 Amberley Court East Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Cocupation City Commissioner Employer City of East Grand Rapids Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3.1.19 Tad Duncan 1621 Amberley Court East Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Cocupation Project Manager Employer Self-Employeed Business Address 1621 Amberley Ct, East Grand Rapids, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 2.4.19 Rusiness Address 1621 Amberley Ct, East Grand Rapids, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser 4. Date of Receipt 2.4.19 Rusiness Address 1621 Amberley Ct, East Grand Rapids, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization	5. If over \$100.00 cumulative, please provide:	Clinic House	ou Mana - Banda - Da
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1621 Amberley Court East Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation City Commissioner Employer City of East Grand Rapids Business Address 750 Lake Drive, East Grand Rapids, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser 7. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3.1.19 Table 1 Amberley Court East Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Project Manager Employer Self-Employeed Business Address 1621 Amberley Ct, East Grand Rapids, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser 7. Contribution #4 PAC Receipt? YES 4. Date of Receipt 2.4.19 Project Manager Loan from a person Fund Raiser Click Here for Memo Itemization Fred Dashnaw 4014 E. Oak Street Page Subtotal 1,600.00 Click Here for Memo Itemization	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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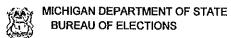
CANDIDATE COMMITTEE

1. Committee I.D. Number

129358

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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 7.3. (9 Name & Address; Selle Care Direct Fund Raiser 4. Date of Receipt 7.3. (9 A Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Receipt? YES 4. Date of Receipt 7.3. (9 PAC Rece	\$ 75.00 Click Here fo	s 15.00 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt (7.3.) 4 Name & Address Trace Douglas 2908 Hawst. SE EG R, MIZ 41506 5. If over \$100.00 cumulative, please provide:		s (OD, OD)
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9, 8. (9) Name & Address: 312 Fulton St. 312 Fulton St. 6. If over \$100.00 cumulative, please provide:	\$ [60].	\$ (OD. 80) 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 4, 4, 19 Name & Address H. C.	\$ 50.00	*
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Business Address Type of Contribution: Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



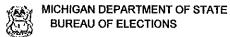
1. Committee I.D. Number

129358

CANDIDA	ATE C	OMMI	T	ree
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2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3.1.19 Name & Address: John Green 563 Belvedere Dr East Grand Rapids, MI 49506	150.00	150.00
5. If over \$100.00 cumulative, please provide:	Ψ	
Occupation Executive Employer Founders Brewery	Click Here f	or Memo Itemization
Business Address 235 Grandville Ave., Grand Rapids, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2.20.19 Name & Address		
Janet Romanowski 2241 Anderson Drive SE East Grand Rapids, MI 49506	100.00	200.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Realtor Employer Greenridge Realty		
Business Address 2213 Wealthy #200, East Grand Rapids, MI 49506		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10.16.19 Name & Address: Bryan Walters		
1039 Pinecrest Ave. SE East Grand Rapids, MI 49506	750.00 \$	1000.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Attorney Employer Varnum Law		
Business Address 333 Bridge Street #1700 Grand Rapids, MI 49501		
Type of Contribution: Direct Loan from a person Fund Raiser		The state of the s
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 2.15.19 Name & Address		
Robert McCarthy 349 Harvest Lane Frankenmuth, MI 48734	1000.00	1000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer	Click Here for	r Memo Itemization
Business Address		ļ
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule) Pageof	Enter this total on line 3a of Summary Page.	



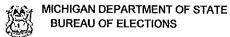
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

129358

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, en middle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report <u>all</u> contributions regardless of amount.	ter last name, first name, e or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address: COLL LOOS OFFICE AN LUCIA EGINAL LOOS 5. If over \$100.00 cumulative, please provide:	9.4.19	\$ (00.00	\$ \(\oldsymbol{O} \oldsymbol{O} \oldsymbol{O} \oldsymbol{O} \)
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Type of Contribution: Direct Loan from a person	Fund Raiser		
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Beth Taylor 2940 Pionser Club EGR, MI 49506 5. If over \$100.00 cumulative, please provide:		\$ 15.00 \$ Click Here for	\$ 15.00 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 Name & Address: JUN BULL HOLD 5. If over \$100.00 cumulative, please provide:	9.4.19	\$ 60 00 Click Here for	\$ 50 bo
Occupation Employer	***************************************		
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt Name & Address Noveen Hyers 1050 Monterey SE EER, MIZ FROW	9.5.19	\$ 75 <u>00</u>	\$ 7500
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer		Official Flore for	Wichio Rettilzation
Business Address			
	Fund Raiser		
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Page DB of 25		Enter this total on line 3a of Summary	



1. Committee I.D. Number

129358

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 4, 9 Name & Address: Ab 19 Al	Ψ	\$ 100.00
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Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7, 8, 19 Name & Address MCUSSA MANSH 2448 Beechwood		4-1)
2448 Beech Wood EGR, MI 49506	\$100.00	\$ 100.
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
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Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9. 14. 19 Name & Address: Low S& Color Low Cel Acc. EGE, MIL 49506 5. If over \$100.00 cumulative, please provide:	\$ 50 00 Click Here for	\$5000 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 9.77.19 Name & Address 1000 Princeton EGP MI 4006 5. If over \$100.00 cumulative, please provide:	\$/00.00	\$ 100,00
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Page RUO of The	Enter this total on line 3a of Summary	

CANDIDATE COMMITTEE

1. Committee I.D. Number

129358

2. Committee Name

Friends of Katie Favale

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 9. 19. 19. 19. 19. 19. 19. 19. 19. 19.		:25.00
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Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9, 19, 19 Name & Address And Dixon (003 Laurel Ave. SGR. MT LATA	\$ 25.00	\$ 35.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
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Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt (0.16.) 9 Hame & Address YES 4. Date of Receipt (0.16.) 9 Hame & Address YE	: 25.00	\$25.00
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ITEMIZED IN-KIND CONTRIBUTIONS

Committee t D. Number 129358

SCHEDULE 1-II	1. Committee I. D. Number 129338	
CANDIDATE COM	AITTEE 2. Committee Name Friends of Katie	Favale
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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address: Bob Woolford 1401 Breton Rd East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Attorney Employer Name & Business Address: Miller Johnson 45 Ottawa Avenue SW #1100 Grand Rapids, MI 49503 Fund Relser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Fundraiser Catering Services 5. Date Of Receipt: May 30,2019 6. Vendor Name & Address:	\$ 800.00 \$ Click Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address David Brown 551 Plymouth Road SE East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Director Employer Name & Address: BCBS B6 Monroe Center NW Grand Rapids, MI 49503 Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Fundraiser Catering Services 5. Date Of Receipt: June 20, 2019 6. Vendor Name & Address:	800.00 \$ N Click Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: Karey Hamrick 3004 Oakwood Drive SE East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: City Commissioner Employer Name & Address: City of East Grand Rapids 750 Lakeside Drive SE East Grand Rapids, MI 49506 Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Drinks for Fundraiser 5. Date Of Receipt: September 4, 2019 6. Vendor Name & Address:	©00.00 \$
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Grand Total of all Schedules 1-lK (Complete on last page of Schedule)

Page 1 of 2

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE LIK

129358 1. Committee I. D. Number

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Friends of Katie Favale				
CANDIDATE COMN				
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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt 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: Phillip Skaggs 2615 Hall Street SE East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Kent County Commissioner Employer Name & Business Address: 300 Monroe Avenue NW Grand Rapids, MI 49503	4646 28th Street SE	300.00 \$		
Fund Raiser Contribution	Grand Rapids, MI 49512			
Contribution # 2 PAC Receipt? Yes Name & Address Angie Walters 1039 Pinecrest Avenue East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Restorative Practice Facilitator Employer Name & Address: The Dispute Resolution Center	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 Food Trays 5. Date Of Receipt: September 4, 2018 6. Vendor Name & Address:	148.38 \$		
of West Michigan 678 Front Street NW Fund Raiser Contribution	Martha's Vineyard 200 Union Avenue Grand Rapids, MI 49503	lick Here for Memo Itemization		
Contribution #3 PAC Receipt? Yes Name & Address: Shannon Smith	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$	\$00.00		
940 Gladstone Avenue SE East Grand Rapids, MI 49506 If over \$100.00 cumulative, please provide: Occupation: VP Communications Employer Name & Address: PulsePoint Foundation	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Fundraiser Food & Drinks 5. Date Of Receipt: September 24, 2019 6. Vendor Name & Address: D&W 2181 Wealthy Street SE East Grand Rapids, MI 49506	iick Here for Memo Itemization		
Fund Raiser Contribution				
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	Grand Total of all Schedules 1-	K 2,548.38		

Enter this total on line 6 of Summary Page

(Complete on last page of Schedule)



129358

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

- USE A SEPARATE SHEET FOR EACH EVENT -				
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is	5. Type of Fund Raising Activity	Address and Name (If any) of t place where the activity was held.	
May 30, 2019	greater) 25	Meet & Greet	1401 Breton Road SE Private Residence	
7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 and 10. Total Cost of Event (Total Cost includes In-Kind Cost	800.00 ntributions and All Expenditures			
11. Check if event was a jo	int fund raiser and complete the	following:		
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)	

 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 3



129358

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

	- USE A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	Address and Name (If any) of place where the activity was held
June 20, 2019	20	Meet and Greet	551 Plymouth Rd East Grand Rapid Private Residence
7. Total Contributions	2,175.00		
3. Other Receipts	0	- Andrew	
). Gross Receipts (Add lines 7 a	2,175.00 and 8)		
 Total Cost of Event Total Cost includes In-Kind Cor 	800.00		
-	int fund raiser and complete the		
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
			-
The committee is	ed to file a separate Fund Raise		

- 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 3



129358

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number ______ Friends of Katie Favale

- USE A SEPARATE SHEET FOR EACH EVENT -			
3. Date Event Was Held	Number of Individuals Attendin or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
September 4, 2019	25	Meet and Greet	1039 Pinecrest Ave. East Grand Rapids
7 Total Cantibutions	1,895.00		Private Residence
7. Total Contributions	0		
8. Other Receipts			
9. Gross Receipts (Add lines 7	1,895.00 and 8)		
10. Total Cost of Event	610.84		

2. Committee Name

11. Check if event was a joint fund raiser and complete the following:

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
Angie Walters	0	24
Karey Hamrick	0	33
Katie Favale	0	43
Claudine Duncan	26	0
Brian Miller	10	0
		W

[•] 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.

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

Page 3 of 3

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.



Expenditure #1

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

3. Name and address of person or vendor to whom paid

1	2	9	3	5	8
	-	·	·	v	v

1. C	ommittee I. D. Number				
2. C	2. Committee Name Friends of Katie Favale				
	4. Purpose (Required Information)	5. Date	6. Amount		
	Purpose: Rally Signs	2.25.1 ⁹	\$ 106.0 <i>0</i>		
		k Here for Memo	Itemization Type		
	Purpose: Business Cards	5.3.19 Date	\$ 62.53		
	Click Check box if this expenditure is payment of debt or obligation reported on previous statement	c Here for Memo I	temization Type		
	Purpose: Literature Printing	5.8.19 Date	\$ 238.5°		
	Click Check box if this expenditure is payment o debt or obligation reported on previous statement	Here for Memo II	emization Type		
	Purpose: Postage	5.24.19 Date	\$ <u>198.0</u> €		
	Click	Here for Memo II	emization Type		

Name Perrigo Printing		2.25.19	s 106.00
Address	Purpose: Rally Signs	Date	\$ 100.00
125 Ottawa Avenue NW Suite #160	Turpose.	U f-u blanca	4
Grand Rapids, MI 49503	 		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	i	
Expenditure #2			
Name Vista Print		5.3.19	s 62.53
Address	Purpose: Business Cards	Date	3
E-Commerce Company	Pulpose.		
	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	,	
Expenditure #3	Statemon		
Name Swift Printing		5.8.19	
	Literature Printing	Date	\$ <u>238.50</u>
Address 404 Bridge Street NW	Purpose: Literature Printing	Dale	
Grand Rapids, MI 49504	Click I	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4		<u> </u>	<i>*************************************</i>
Name U.S. Postal Service		5.24.19	100.05
Address	Postage	Date	\$ 198.0 <i>0</i>
USPS	Purpose:		
1451 Lake Drive	Click I	Here for Memo I	temization Type
Grand Rapids, MI 49506	Check box if this expenditure is payment of		· · · · · · · · · · · · · · · · · · ·
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Sawicki & Son		6.19.19	
Address	_ Parade Banner & Stickers		\$ 584.06
1521 W. LaFayette	Purpose:	Date	
Detroit, MI 48216	l [temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	1,189.09
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	!

Enter this total on line 8a of **Summary Page**



1	2	93	5	8
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1. Committee I. D. Number

2. Committee Name

Friends of Katie Favale

	S. OMBINGE HAING		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			***************************************
Name Horizon Bank		6.28.19	s 7.50
Address	Purpose: Service Chage	Date	
250 Pearl Street NW			
Grand Rapids, MI 49504	Click I	tere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			****
Name Walmart		7.1.19	
		7.1.19	_{\$} 113.78
Address	Parade Decorations/Supplies	Date	*
	Purpose:		
5859 28th Street SE	Oliate	lava for Money	tatat
Grand Rapids, MI 49546	GIICK F	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #3			
Name Perrigo Printing			
· ·····g··············g		7.2.19	s 708.3⊊
Address	Printing Cards/Literature	Date	\$ · · · · · · · ·
125 Ottawa NW	Purpose:	2010	
Grand Rapids, MI 49503	Click H	ara for Mama	Itamization Toma
Grand Hapids, IVII 45005	 	ere ioi Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name Swift Printing		8.7.19	
			\$ 238.5¢
Address	Purpose: Literature Printing	Date	
404 Bridge Street NW			
Grand Rapids, MI 49504	Click H	ere for Memo '	itemization Type
,		3,0 101 11,011,0 1	iternization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Sawicki & Son		8.9.19	
Address	Pumose: Yard Signs	0.0.10	\$ 2173.00
Address	Purpose: Tard Signs	Date	
1521 W. LaFayette	·		
Detroit, MI 48216		ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Statement	r	
	Subtota	al this page	3,241.13
		, <u>, , , , , , , , , , , , , , , , , , </u>	
	Grand Total of all So		ľ
	(Complete on last page	oi ocueanie)	

\$ 9

Enter this total on line 8a of Summary Page



129358

1. Committee I. D. Number	

i. Committee i. D. N.	nulbat ————————————————————————————————————
2. Committee Name	Friends of Katie Favale

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1	.,	V. 2000	V. / WIIVEIR
Name U.S. Postal Service		8.28.19	
Traille U.S. 1 UStal Selvice		0.20.1	\$ 165.0 <i>D</i>
Address	Purpose: Postage	Date	
USPS	Click H	Jora for Mama	Itemization Type
1451 Lake Drive		IGIG IOI INGILIO	nemization Type
Grand Rapids, MI 49506	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name Swift Printing		8.30.1 ⁰	s 344.5 <i>0</i>
Address	Purpose: Literature Printing	Date	\$ 044.5
Address ADA Bridge Street NIM	Purpose:		
404 Bridge Street NW Grand Rapids, MI 49504	Click H	ere for Memo	Itemization Type
Grand naplus, Wii 49504			nomeation 13po
The pairs	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Baker Tent Rental		9.3.19	005 11
Address	Purnose: Table/Linens Rental		\$ 262.46
Address 201 Matilda St. NE	Purpose: Table/Enterts Heritar	Date	
Grand Rapids, MI 49503	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		tomzator Typo
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name Lakeside PTO			
Lakeside PTO		9.10.19	. 515.70
Address	Lakesido School Fundralser Sponsorehip	Date	\$ 515.72
Lakeside School	Purpose:		
2523 Hall Street SE	Click He	ere for Memo I	temization Type
East Grand Rapids, MI 49506	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name Swift Printing		9.18.19	
Address	Mailer Printing/Postage -	Date	\$ 851.1 5
404 Bridge Street NW	Purpose:	Dato	
Grand Rapids, MI 49504		ere for Memo li	temization Type
990mmq	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtota	Il this page	2,138.83
		· *	_,
	Grand Total of all So (Complete on last page of		

3 of 9

Enter this total on line 8a of Summary Page



ı	29	3	58	
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1. Committee I. D. Number

CANDIDATE COMMITTEE	2. Committee Name Friends of Katie Favo	ale	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Perrigo Printing Address	Invitations/Rally Signs	9.24.1 ^c (\$ <u>190.80</u>
125 Ottawa Avenue NW Suite #160 Grand Rapids, MI 49503	Click		o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	F	
Expenditure #2 Name Swift Printing		9.25.1 ^c (\$ 1,996.5\
Address 404 Bridge Street NW Grond Bonido MI 40504	Purpose: Mailer Printing/Postage	Date Here for Memo	Itemization Type
Grand Rapids, MI 49504	Check box if this expenditure is payment of debt or obligation reported on previous statement		нетиганон тур е
Expenditure #3 Name Olives Restaurant Address 2162 Wealthy Street SE	Purpose: Host/Hostess Gifts	9.26.17 Date	\$ <u>210.00</u>
East Grand Rapids, MI 49506	Check box if this expenditure is payment of		Itemization Type
Fund Raiser Expenditure #4	debt or obligation reported on previous statement		
Name Swift Printing Address 404 Bridge Street NW	Mailer Printing/Postage	9.30.1 ⁰ / _{Date}	\$ <u>1143.9</u> 2.
Grand Rapids, MI 49504	Click F	lere for Memo	Itemization Type
Fund Raiser Expenditure #5	debt or obligation reported on previous statement		
Name D&W Fresh Market Address 2181 Wealthy Street SE	Purpose: Meet & Greet Supplies	10.1.1 ²	\$ <u>72.52</u>
East Grand Rapids, MI 49506	Click F Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo I	Itemization Type
	Subto	tal this page	3,613.75
	Grand Total of all S	Schedules 1B	

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



1	293	5	8
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1. Committee I. D. Number

SCHEDOLE 18			
CANDIDATE COMMITTEE	2. Committee Name Friends of Katie Fav	∕ale	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		** 440	
Name Bulleye Group		10.4.19	_{\$} 511.45
Address	Purpose: Campaign T-shirts	Date	*
5000 36th Street Se		-tr Llora for Mame	- 44ination Time
Grand Rapids, MI 49512			Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #2		·	
Name Swift Printing		10.8.19	s 625.4 <i>0</i>
•••	Mailer Printing/Postage	Date	\$ 023.40
Address 404 Bridge Street NW	Purpose:		
Grand Rapids, MI 49504	Click	k Here for Memo	Itemization Type
Grand Hapido, IIII -1000-1	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous	Л	
Expenditure #3	Statement		
Name Swift Printing		40.44.10	າ
· ·	Mailor Printing/Postage	10.11.[9	1 \$ 1450.46
ddress 404 Bridge Street NW	Purpose: Mailer Printing/Postage	Date	
Grand Rapids, MI 49506	Click	k Here for Memo I	Itemization Type
	Check box if this expenditure is payment o		Monneau . yp.
Fund Raiser	debt or obligation reported on previous	1	
Expenditure #4	statement	-	
lame Swift Printing		10 11 19	
•	Mailer Delating (Death or	10.14.[°(s 1748. _[7
Address 404 Bridge Street NW	Mailer Printing/Postage	Date	
Grand Rapids, MI 49504	Click	Ham kee Hama	en e
Ciana Hapias, wii 48504		Here for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
xpenditure #5			
lame			
Address	Burnana	 Date	\$
	Purpose:	Date	
		Here for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	i	
	statement		
	Subt	total this page	4,335.48

Enter this total on line 8a of Summary Page

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

5 <u>6</u>9



129358

1. Committee I. D. Number

2. Committee Name Friends of Katie Favale

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		1	
Name Facebook	į.	4.30.19	s 17.93
A.M.	Purpose: Post Boosting	Date	\$ 17.93
Address 1 Hacker Way	Purpose: Tost Boosting	wato	
Menlo Park, CA 94025	Click H	ere for Memo I	Itemization Type
7.10.1020	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Facebook		5.31.19	s 46.08
	Post Boosting	Date	\$ 40.00
Address	Purpose:		
1 Hacker Way	Click He	ere for Memo I	temization Type
Menlo Park, CA 94025		210 107 11101110 1	tomization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3		- "WW	
Name Facebook		704 40	
		7.31.19	\$ 30.56
Address	Purpose: Post Boosting	Date	
1 Hacker Way			
Menio Park, CA 94025	i —	ere for Memo II	emization Type
—	L_Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Facebook	,	8.22.19	
	<u> </u>	Date	\$ 50.00
Address	Purpose: Post Boosting	Date	
1 Hacker Way	OF LUI	(54 11	
Menlo Park, CA 94025		re for Memo It	emization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Facebook	,	9.30.19	
Address	Post Boosting -		\$ 29.14
Address 1 Hacker Way	Purpose:	Date	
Menlo Park, CA 94025	Click He	ere for Memo II	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
		, , , , , , , , , , , , , , , , , , ,	170 74
	Subtota	i this page	173.71
	Grand Total of all So	t	
	(Complete on last page of	of Schedule)	

Enter this total on line 8a of Summary Page

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129358

1. Committee I. D. Number

2. Committee Name Friends of Katie Favale

2 Name and address of names or yander to whom wild		T	
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Nationbuilder		7.24.1 ⁹	s 29.00
	Website Hosting	Date	\$ 23.00
Address	Purpose: Website Hosting	Date	
520 S. Grand Avenue	Click	Here for Memo I	temization Tyne
Los Angeles, CA 90071			tomzedion rypo
 1	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name Nationbuilder		8.24.19	
		· · · · · · · · · · · · · · · · · · ·	\$ 29.00
Address	Purpose: Website Hosting	Date	
520 S. Grand Avenue	,		
Los Angeles, CA 90071	Click I	Here for Memo I	temization Type
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name Nationbuilder		9.24.19	20.00
Address	Purpose: Website Hosting	Date	\$ 29.00
Address 520 S. Grand Avenue	Purpose:	Date	
Los Angeles, CA 90071	Click I	Here for Memo It	emization Type
Los Angeles, OA 90071	l 		onimation Typo
Crust petro	Check box if this expenditure is payment of debt or obligation reported on previous	-	
Fund Raiser	statement		
Expenditure #4	:		
Name Facebook		1.31.19	
			\$ 24.84
Address	Purpose: Post Boosting	Date	
1 Hacker Way			
Menlo Park, CA 94025	Click I	lere for Memo It	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name Facebook		2.28.19	
Address	Purpose Post Boosting	Date	\$ 35.16
1 Hacker Way	Purpose:	Date	
Menlo Park, CA 94025	Click i	Here for Memo It	emization Type
	Check box if this expenditure is payment of		, ,
Fund Raiser	debt or obligation reported on previous statement		Messeveral
			
	Subto	tal this page	144.00

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

> Enter this total on line 8a of Summary Page

Page \pm of $\underline{9}$



129358

1. Committee I. D. Number

Friends of Katie Favale

	committee Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Nationbuilder Address 520 S. Grand Avenue	Purpose: Website Hosting	2.24.1 ⁹	\$ 29.00
Los Angeles, CA 90071	Click F	lere for Memo l	Itemization Type
Fund Raiser Expenditure #2	Check box if this expenditure is payment of debt or obligation reported on previous statement	-	
Name Nationbuilder		2 24 19	
Address 520 S. Grand Avenue	Purpose: Website Hosting	3.24.1 ⁹ Date	\$ 29.00
Los Angeles, CA 90071	Click H	lere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Nationbuilder	Website Heating	4.24.19	\$ 29.00
Address 520 S. Grand Avenue	Purpose: Website Hosting	Date	
Los Angeles, CA 90071	Click H	ere for Memo It	temization Type
2007 ingoloo, 07(0007)	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name Nationbuilder		5.24.19	s 29.00
Address 520 S. Grand Avenue	Purpose: Website Hosting	Date	
Los Angeles, CA 90071	Click Ho	ere for Memo It	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Nationbuilder		6.24.19	
Address 520 S. Grand Avenue	Purpose: Website Hosting	Date	\$ 29.00
Los Angeles, CA 90071	Click H	ere for Memo It	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtota	al this page	145.00
	Grand Total of all S (Complete on last page		

Enter this total on line 8a of Summary Page

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129358

1. Committee I. D. Number	

Friends of Katie Favale CANDIDATE COMMITTEE 2. Committee Name 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 10.12.[9 Name Facebook 50.00 Post Boosting Address 1 Hacker Way Click Here for Memo Itemization Type Menlo Park, CA 94025 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name Date Address Purpose: _ Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name Address Date Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous **Fund Raiser** statement Expenditure #4 Name Address Purpose: ____ Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Address Purpose: __ Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous **Fund Raiser** statement Subtotal this page

(Complete on last page of Schedule)

Grand Total of all Schedules 1B

Enter this total on line 8a of Summary Page

 $P_{\text{age}} = \frac{9}{9}$ of $\frac{9}{9}$