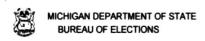


Kent County Clerk Elections Division

CANDIDATE COMMITTEE COVER PAGE

AUG 05 2014 OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	3. This Statement covers:	09/01/13 to 07/20/14	
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
128875		Lenear	Senita	R
		4a. Office Sought Including Dis	trict # or Community Served (If applicat	ble)
2. Committee Name		Third Ward City Comm	nissioner	
Committee to Elect Senita Le	near II	4b. County of Residence KEN	NT	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address	
PO Box 68582		Joseph Jones		
Grand Rapids, MI 49516		2528 Orchard View I	Dr. NE	
(1408 Madison Ave. SE Ste C, 495	607)	Grand Rapids, MI 49	9505	
Area Code and Phone (616) 514-8667 If the address in this box is different from the commimaling address on the Statement of Organization, ribe sent to this address by the filing official.		Area Code & Phone (616) 55	1-5088	
7. Treasurer's Business Address		B. Designated Record eeper Designated Record eeper)	's Name and Mailing Address (If the cor	mmittee has a
		•		
Area Code and Phone		Area Code and Phone		
9. TYPE OF STATEMENT			9 . Dissolution of Candidate Comm	nittee
9a. Pre-Election OR 9b. Post-Election	Required Of is not on the	NLY if candidate	Вy	
			ttee to the discharged and forgiven and no lon	100
Pre-Election or Post-Election Statement relates to:	X July Quar	ertv	the committee.	ige
Primary	[X] July Quan	icity		
General	October C	uarterly	e	
Convention				
	9c. 🗀			
E .	Annua L	al Statement (Effective date of dissolution	
School		Coverage real		_
Caucus	9 . 🗀		Note: The disposition of residual funds	e must be reported on
	amen	ded)	1B and the Summary Page.	
Date of Election, Convention or Caucus		,		
			<u> </u>	
Verification: I/We certify that all reasonable diligenty/our knowledge and belief the contents are true, and the contents are true, and the contents are true, and the contents are true.			ent and attached schedules (if any) and	to the best of
Current Treasurer or Joseph Jones	;	XXXX	← \ 7	/25/14
Designated Record eeper		Signature	Date	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	\mathcal{M}	
Candidate Senita Lenear		Serveta	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	//25/14
Type or Print Name		Signature		
Authority granted under P.A. 388 of 1976		/	/	



1. Committee I.D. Number 128875

SUMMARY PAGE

CANDIDATE COMMITTEE	2. Committee Name Continue To Elect Serina Leriear			
RECEIPTS	Column I This Period	Column II Cumulative this election cycle		
3. Contributions	This Follow	Community this election cycle		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 4,975.00	-		
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE			
c. Subtotal of "Contributions"	(3c.) \$_\$4,975.00	(18.) \$		
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$		
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$4,975.00	(20.) \$		
IN-KIND CONTRIBUTIONS & EXPENDITURES				
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$		
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$		
EXPENDITURES				
8. Expenditures				
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$4,485.40</u>	_		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	_		
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00			
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$4,485.40	(23.) \$		
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)				
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	_		
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00			
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$		
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	(24./4		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$4,217.12			
b. Owed to the Committee (Schedule 1E)	. ,	_		
	(12b.) \$ \$0.00			
40. Sedies Deleves of lest seed filed	(13.) \$ \$0.00			
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)				
14. Amount received during reporting period	(14.) + \$ \$4,975.00			
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$4,975.00			
15. SUBTOTAL Add lines 13 and 14				
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ \$4,485.40			
17. ÈNDING BALANCÉ	(17.) \$ \$489.60	-		
(Subtract line 16 from line 15)	(17.) \$ 4100.00			



 $_{\text{Page}}\underline{\textbf{1}}_{\text{ of}}\underline{\textbf{2}}$

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

128875

CANDIDATE COMMITTEE 2.0	committee Name Committee To Elect So	enita Lene	ar
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Lake Michigan Credit Union Address	Purpose: bank fees	09/30/13 Date	\$ 60.00
PO Box 2848 Grand Rapids, MI 49501 Fund Raiser	Click I Check box if this expenditure is payment of debt or obligation reported on previous statement	lere for Memo	Itemization Type
Expenditure #2 Name JD Consulting Address	Purpose: Robot Calls	09/04/13 Date	\$ 400.00
5721 Division S. Ste. B	Click H	lere for Memo	Itemization Type
Grand Rapids, MI 49548 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name Bright Format Address 5300 Corporate Grove SE Ste 200 Grand Rapids, MI 49512	Purpose: Printer Click H	09/04/13 Date	\$ <u>537.32</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name Media 3 Design Address 2564 Nicholas Dr.	Purpose: graphics work balance	10/03/13 Date	\$ 5.00
2564 Nicriolas Dr. Dorr, MI 49323	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 #5 Name Got Faith Cancer Walk Address gotfaith5kwalk.org	Purpose: registration	10/01/13 Date	\$ 25.00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	\$1,027.32
	Grand Total of all S		

Enter this total on line 8a of Summary Page



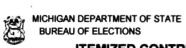
ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

128875

CANDIDATE COMMITTEE 2. C	committee Name Committee To Elect S	enita Lene	ear
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Senita Lenear		01/30/14	s 3000.00
Address	Purpose: reimbursements	Date	-
1330 Rosewood Ave. SE		Here for Memo	Itemization Type
Grand Rapids, MI 49506	_		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name		01/30/14	\$ 458.08
Address	Purpose:	Date	
Audiess			
	Click I	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			s
Address	Purpose:	Date	
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	iere ioi ivienio	nomization Type
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name			
		Date	s
Address	Purpose:		
	Click H	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			_
Address	Purpose:	Date	-
		Here for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	\$3,458.08
	Grand Total of all (Complete on last page		4485.40

Enter this total on line 8a of Summary Page



CAN	ATE	CON	MIT	TEE

Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt Address:	ceipt 09/25/14		
Charles Secchia			
49 Monroe Center		500.00	
Grand Rapids, MI 49503		_s 500.00	\$
5. If over \$100.00 cumulative, please provide:			
Occupation Employer		Click Here fo	r Memo Itemization
Business Address 49 Monroe Center NW Grand Rapids, MI 4	9503		
Type of Contribution:	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Rec	ceipt 09/25/14		
Name & Address			
Stephen Van Andel		500.00	
PO Box 74		_{\$} 500.00	\$
Ada, MI 49301			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
OccupationEmployer Amway			
Business Address 7575 Fulton Street E. Ada, MI 49355			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Re Name & Address:	ceipt 09/25/14		
Steven Heacock		400.00	
2560 Pebblebrook Dr. SE		_{\$} 400.00	S
Grand Rapids, MI 49546			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer Spectrum He	alth		
Business Address 221 Michigan St. NE Grand Rapids,, MI 49503			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
	eceipt 09/25/14		
Name & Address			
Currie Holdings, LLC		000.00	
9000 Byron Commerce Dr. SW		_{\$} 200.00	S
Byron Center, MI 49315			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution:	Fund Raiser		
	Page Subtotal	\$1,600.00	
	Grand Total of All Schedules 1A		1
	mplete on last page of Schedule)	Fatos this total as	J
Page 1 of 5		Enter this total on line 3a of Summary Page.	



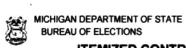
CANDIDATE COMMITTEE

Enter contributor's name and address. If comiddle initial. Check box to indicate if contributions in Committee (PAC) Report all contributions in	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)				
Contribution # 1 PAC Receipt?	YES 4. Date of Rece	eipt 12/27/14				
Name & Address:	_					
Ryan DeVos 126 Ottawa Ave. NW Ste 500						
Grand Rapids, MI 49503			_s 150.00	\$		
5. If over \$100.00 cumulative, please pro	vide:		0			
Occupation	_ Employer		Click Here to	r Memo Itemization		
Business Address DeVos 126 Ottawa	Ave. NW Ste 500 Gran	d Rapids, MI 49503				
Type of Contribution:	Loan from a person	Fund Raiser				
3. Contribution #2 PAC Receipt?	YES 4. Date of Rece	eipt 12/27/14				
Name & Address						
Doug & Maria DeVos			200.00			
126 Ottawa Ave. NW Ste 500			_{\$} 300.00	\$		
Grand Rapids, MI 49503						
5. If over \$100.00 cumulative, please pro-			Click Here for	Memo Itemization		
Occupation	Employer_Amway					
Business Address 7575 Fulton Street	E. Ada, MI 49355					
Type of Contribution:	Loan from a person	Fund Raiser				
Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Rec	eipt 12/27/14				
Daniel & Pamella DeVos			200.00			
126 Ottawa Ave. NW Ste 500			_{\$} 300.00	\$		
Grand Rapids, MI 49503						
5. If over \$100.00 cumulative, please pro	vide:		Click Here for	Memo Itemization		
Occupation	Employer					
Business Address DeVos 126 Ottawa Av	e. NW Ste 500 Grand Rapid	ls, MI 49503				
Type of Contribution: Direct	Loan from a person	Fund Raiser				
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Rec	ceipt 12/27/14				
Elissa & Nate Lowery 126 Ottawa Ave. NW Ste 500			.300.00			
Grand Rapids, MI 49503			\$ 300.00	\$		
5. If over \$100.00 cumulative, please pro	vide:					
Occupation		Click Here for	Memo Itemization			
Business Address DeVos 126 Ottawa Ave. NW Ste 500 Grand Rapids, MI 49503						
		_				
Type of Contribution:	Loan from a person	Fund Raiser		,		
		Page Subtotal	\$1,050.00			
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Page 2 of 5			line 3a of Summary Page.			



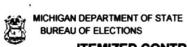
חע	DV.	TE	CON	м	тт	66
1D			COIL	HAH		

Enter contributor's name and address. middle initial. Check box to indicate if Committee (PAC) Report <u>all</u> contribution	contribu	tion is from a Political Comr		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 PAC Recei Name & Address:	ot?	YES 4. Date of Reco	eipt 12/27/14			
Richard & Helen DeVos						
126 Ottawa Ave. NW Ste 5	nn					
Grand Rapids, MI 49503	00			300.00	S	
5. If over \$100.00 cumulative, please	provid	٥٠				
Occupation	•	Employer		Click Here fo	or Memo Itemization	
Business Address DeVos 126 Otta			d Rapids, MI 49503			
Type of Contribution:		Loan from a person	Fund Raiser			
Contribution #2 PAC Receipt	17	YES 4. Date of Reco	eipt 12/27/14			
Name & Address	ш					
Richard & Elisabeth DeVos	. Jr.					
126 Ottawa Ave. NW Ste 5				_s 300.00	\$	
Grand Rapids, MI 49503					T	
5. If over \$100.00 cumulative, please	provide	9 :		Click Here fo	r Memo Itemization	
Occupation	Er	mployer				
Business Address DeVos 126 Otta	wa Av	ve. NW Ste 500 Grand	Rapids, MI 49503			
Type of Contribution: ✓ Direct		Loan from a person	Fund Raiser			
	<u>, </u>					
3. Contribution # 3 PAC Receip Name & Address:	'' L	YES 4. Date of Rec	2eipt 12/27/14			
Rick & Melissa DeVos				000.00		
126 Ottawa Ave. NW Ste 5	nn			_{\$} 300.00	\$	
Grand Rapids, MI 49503	00					
5. If over \$100.00 cumulative, please	provide	o:		Click Here for	Memo Itemization	
Occupation		Employer				
Business Address DeVos 126 Ottawa			ds. MI 49503			
Type of Contribution: Direct		Loan from a person	Fund Raiser			
,,	<u>,, , , , , , , , , , , , , , , , , , ,</u>	_				
3. Contribution # 4 PAC Recei Name & Address	" L	YES 4. Date of Re	ceipt 12/27/14			
Michael & Andrea Abrahan	1					
126 Ottawa Ave. NW Ste 5	00			, 300.00		
Grand Rapids, MI 49503				2-33:30	\$	
5. If over \$100.00 cumulative, please		Click Hose for	Mome Hemisstics			
Occupation		Click Here for	Memo Itemization			
Business Address DeVos 126 Ottawa Ave. NW Ste 500 Grand Rapids, MI 49503						
Type of Contribution: Direct	Г	Loan from a person	Fund Raiser			
Y Direct			Page Subtotal	\$1,200.00	T	
				\$1,200.00	-	
			Grand Total of All Schedules 1A inplete on last page of Schedule)		_	
• -		(0011	-p.o.o on not page of companie)	Enter this total on		
Page 3 of 5				line 3a of Summary Page.		



CANDIDATE COMMITTEE

Enter contributor's name and address. If middle initial. Check box to indicate if con Committee (PAC) Report <u>all</u> contributions		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Rec	eipt 12/27/14		
Cheri DeVos VanderWeide				
126 Ottawa Ave. NW Ste 500)		450.00	
Grand Rapids, MI 49503			_s 150.00	\$
5. If over \$100.00 cumulative, please pr	ovide:		0" 1 11	
Occupation	Employer		Click Here to	r Memo Itemization
Business Address DeVos 126 Ottaw	a Ave. NW Ste 500 Gran	d Rapids, MI 49503		
Type of Contribution:	Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Reco	eipt 12/27/14		
Micaela DeVos 126 Ottawa Ave. NW Ste 500 Grand Rapids, MI 49503)		<u>\$ 150.00</u>	s
5. If over \$100.00 cumulative, please pro	ovide:		Click Here for	r Memo Itemization
Occupation	_ Employer			
Business Address DeVos 126 Ottawa	a Ave. NW Ste 500 Grand	Rapids, MI 49503		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Rec	^{ceipt} 12/27/14		
Dalton DeVos 126 Ottawa Ave. NW Ste 500 Grand Rapids, MI 49503 5. If over \$100.00 cumulative, please pr			\$ 150.00 Click Here for	\$ Memo Itemization
	Employer			
Occupation		ds. MI 49503		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #4 PAC Receipt? Name & Address	YES 4. Date of Re	ceipt 12/27/14		
Monreau DeVos 126 Ottawa Ave. NW Ste 500 Grand Rapids, MI 49503)		_{\$} 150.00	s
5. If over \$100.00 cumulative, please pr	ovide:		Click Here for	Memo Itemization
Occupation	Employer		Olick Here lot	Wello Remization
Business Address DeVos 126 Ottav	va Ave. NW Ste 500 Gran	nd Rapids, MI 49503		
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$600.00	
~		Grand Total of All Schedules 1A nplete on last page of Schedule)	Enter this total on]
Page 4 of 5			line 3a of Summary Page.	



Page 5 of 5

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CAN	חוחו	ATE	CO	мм	тт	FF
COL		716				

Committee To Elect Senita Lenear II

C,	ANDIDATE	COMMITTEE		2. Committee Name		
	t to indicate if cont t all contributions	tribution is from a Politica regardless of amount.		nter last name, first name, tee 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 Receip	12/27/13		
Name & Address:	Objected and 8.4%				-	
Blue Cross Blue		•				
232 S. Capitol Av Lansing, MI 4893					, 500.00	s
5. If over \$100.00 cumu		wide:				
Occupation	•				Click Here for	or Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	П	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date	of Receip	09/26/13		
lame & Address				00/20/10		
Renee Williams						
4234 Stonebridge	Dr SW Apt	. 5			_s 25.00	s
Wyoming, MI 495	•					· ·
5. If over \$100.00 cumu		vide:			Click Here fo	or Memo Itemization
Occupation		Employer				
Business Address	7]					
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3	PAC Receipt?	YES 4. Date	of Receip	ot		
Name & Address:					-	
					s	
					-	-
5. If over \$100.00 cumu	lativo nlesso nm	wide:			Click Here fo	r Memo Itemization
Occupation		_ Employer				
Business Address	Direct	U can from a nomen		Fred Pains		
Type of Contribution:		Loan from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	e of Recei	ipt		
					\$	\$
5. If over \$100.00 cumu	ilative, please pro	ovide:			Click Here fo	r Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Page Subtota	d despe on	
					400,00	-
				and Total of All Schedules 1A ete on last page of Schedule	1111111111	
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Page 5 of 5					Page.	