

CANDIDATE COMMITTEE COVER PAGE

FILED 28 OCT 2022 PM 01:57

KENT COUNTY CLERK GRAND RAPIDS, MICHIGAN

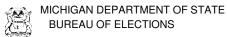
FOR OFFICIAL USE ONLY

3. This Statement covers From: 01/01/2022 Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. to 10/23/2022 1. Committee I.D. Number 4. Candidate Last Name First Name M.I. LISA KNIGHT M 2021040 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name CITY COMMISSIONER, WARD 2, GRAND RAPIDS COMMITTEE TO ELECT LISA KNIGHT 4b. County of Residence KENT COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address 3260 CHENEY AVE NE ANGIE HANKS GRAND RAPIDS, MI 49525 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525 Area Code and Phone (616) 893-5968
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (616) 890-3937 be sent to this address by the filing official. 7. Treasurer's Business Address 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525 Area Code and Phone (616) 890-3937 Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. X Pre-Election OR 9b. Post-Election By checking this item I/We certify any outstanding debt is not on the ballot for the current year: by the committee to the candidate or his or her spouse is here Pre-Election or Post-Election Statement relates to: by discharged and forgiven, and no longer collectible from July Quarterly the committee. The committee has no oustanding assets, Primary owes no lates fees or has any oustanding debt. October Quarterly X General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special Annual Statement (Effective date of dissolution Coverage Year School Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to Caucus Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 11/08/2022 10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my\our knowledge and belief the contents are true, accurate and complete. Submitted electronically. Current Treasurer or signature on file 10/28/2022 Designated Record keeper Date Type or Print Name Signature Submitted electronically, 10/28/2022 signature on file Candidate Date Signature Type or Print Name

1. Committee I.D. Number 2021040

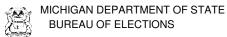
SUMMARY PAGE CANDIDATE COMMITTEE

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	10.001.07	,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ _10,061.07	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 10,061.07	(18.) \$ 10,061.07
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 90.00	(19.) \$ 90.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _10,151.07	(20.) \$ 10,151.07
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 0.00	(21.) \$ 0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0.00	(22.) \$ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 10,847.65	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _10,847.65	(23.) \$ 10,847.65
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS		
(Add Line 10a + Line 10b)	(11.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 350.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 2,180.05	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 10,151.07	
(Line 5, Total Contributions & Other Receipts)		
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>12,331.12</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ 10,847.65	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 1,483.47	•
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CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 01/08/2022 Name & Address: MONICA SPARKS 4764 WOLF RUN AVE SE KENTWOOD, MI 49548 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation OWNER Employer URBAN SPARKS Business Address 2180 44TH ST SE, GRAND RAPIDS, MI 49508 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 01/11/2022 Name & Address EMILY SCHICHTEL 3523 BRIGGS BLVD NE GRAND RAPIDS, MI 49525	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 01/11/2022 Name & Address: KATIE BAKER 63 S MONROE ST NE ROCKFORD, MI 49341	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 01/11/2022 Name & Address KATHY NEWTON 721 WINCHELL ST SE GRAND RAPIDS, MI 49507	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	175.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	

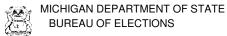


CANDIDATE COMMITTEE

2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

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 01/17/2022 Name & Address: JULIE PARKS 1497 FERNDALE AVE SW GRAND RAPIDS, MI 49534 5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE DIRECTOR Employer GRAND RAPIDS COMMUNITY COLLEGE	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: Direct Direct		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 01/17/2022 Name & Address DEB CLELAND 2252 MONROE AVE NW GRAND RAPIDS, MI 49505	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 01/17/2022 Name & Address: ANGELYN ROYCE 185 MARYLAND AVE NE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide: Occupation SECRETARY Employer ADVENTURE MUSIC Business Address 185 MARYLAND AVE NE, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 01/18/2022 Name & Address TODD AVERY 2078 FERNWOOD DR GEORGETOWN TWP, MI 49428	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	725.00 Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

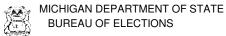
2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 01/18/2022 Name & Address: ADAM VANDREUMEL 10115 BOUNDARY POINT ST LAS VEGAS, NV 89178 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 10.00	_{\$} 10.00
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 01/19/2022 Name & Address LYNN BROWN-TEPPER 5665 JUANITA DR SE KENTWOOD, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE & ARTISTIC DIRECTOR Employer COMMUNITY CIRCLE THEATRE	\$ 100.00	_{\$} 100.00
Business Address 1703 ROBINSON RD SE, 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 01/19/2022 Name & Address: BRENDA MOORE 3722 EDINGTON LN SE GRAND RAPIDS, MI 49508	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation COO Employer URBAN LEAGUE OF WEST MICHIGAN Business Address 745 EASTERN AVE SE, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 01/20/2022 Name & Address BLYTHE KAZMIERCZAK 3169 THORNCREST DR SE GRAND RAPIDS, MI 49546	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation PRINCIPAL Employer BLYTHETALENT Business Address ONLINE, Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	710.00 Enter this total on line 3a of Summary	

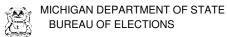
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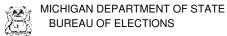
CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 01/25/2022 Name & Address: JOHN VANELST 8347 FAIRWOOD DR GEORGETOWN TWP, MI 49428	_{\$} 75.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 01/30/2022		
Name & Address DEBORAH CLANTON 3135 E GATEHOUSE DR SE GRAND RAPIDS, MI 49546	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 02/15/2022 Name & Address: DEBRA HINES 9662 SCOTSMOOR CT CALEDONIA, MI 49316	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation SELF EMPLOYED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/11/2022 Name & Address SUE MERRELL 2871 PORTER ST SW GRANDVILLE, MI 49418	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation FREELANCE WRITER Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 4 of 24	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/11/2022 Name & Address: MALIQUE GREAR 3849 KENTRIDGE DR SE GRAND RAPIDS, MI 49508 5. If over \$100.00 cumulative, please provide: Occupation CEO Employer POSITIVE IMPACT FOR LIFE	_{\$} 100.00	_{\$} 100.00
Business Address 6026 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49508		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/14/2022 Name & Address RHAE-ANN BOOKER		
3845 WILTON DR SE	_{\$} 200.00	_{\$} 200.00
GRAND RAPIDS, MI 49508		
5. If over \$100.00 cumulative, please provide: Occupation VP OF EQUITY, DIVERSITY AND INCLUSION Employer UNIVERSITY OF MICHIGAN HEALTH-WEST		
Business Address 5900 BYRON CENTER AVE SW, WYOMING, MI 49519		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/25/2022 Name & Address: LISA KNIGHT 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE DIRECTOR Employer GIRLS CHORAL ACADEMY		
Business Address 2920 FULLER AVE NE, GRAND RAPIDS, MI 49505		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 03/25/2022 Name & Address VALISSA ARMSTEAD 5925 KIVERTON RIDGE DR SE KENTWOOD, MI 49508	_{\$} 100.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation DIRECTOR OF DIVERSITY, EQUITY & INCLUSION Employer SPECTRUM HEALTH		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	410.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	-
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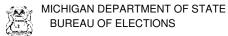


CANDIDATE COMMITTEE

2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 03/26/2022 Name & Address: RACHEL HOOD 28 GUILD ST NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide: Occupation MICHIGAN STATE REPRESENTATIVE Employer STATE OF MICHIGAN Business Address 124 N CAPITOL AVE, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		_{\$} 100.00	<u>\$ 100.00</u>
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/26/2022 Name & Address			
JANAY BROWER 1405 BUCHANAN AVE SW GRAND RAPIDS, MI 49507		\$500.00	\$ 500.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer PUBLIC THREAD			
Occupation OWNER Employer PUBLIC THREAD Business Address 1460 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507	7		
Type of Contribution: Direct Loan from a person Fund Raiser	-		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 03/30/2022 Name & Address: ROBERT UPTON 1407 LAUREL AVE SE GRAND RAPIDS, MI 49506		§ 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer Business Address Type of Contribution:	- -		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/20/2022 Name & Address RICHARD BULKOWSKI 1213 WATSON ST SW GRAND RAPIDS, MI 49504	:	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address	_		
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Grand Total of All Schedule (Complete on last page of Sche	edule)	Enter this total on ine 3a of Summary Page.	

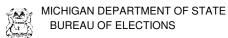


CANDIDATE COMMITTEE

2. Committee Name

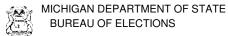
COMMITTEE TO ELECT LISA KNIGHT

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/20/2022 Name & Address: KAREY HAMRICK 3004 OAKWOOD DR SE EAST GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 50.00	_{\$} 50.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/24/2022 Name & Address MELISSA ANDERSON 1581 LARAWAY LAKE DR SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$ 50.00	\$ 50.00
Type of Contribution:		
3. Contribution # 3 Name & Address: SANDRA UPTON 1407 LAUREL AVE SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Employer	§ 50.00	_{\$} 50.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/09/2022 Name & Address MARTA JOHNSON 1343 LOGAN ST SE GRAND RAPIDS, MI 49506	_{\$} 25.00	_{\$} _25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 7 of 24	Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/23/2022 Name & Address: DEBORAH PRYOR-BAYARD 4805 CURWOOD AVE SE KENTWOOD, MI 49508	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation EDUCATION COORDINATOR Employer GRAND RAPIDS AFRICAN AMERICAN MUSEUM & ARCHIVES Business Address 87 MONROE CENTER ST NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/05/2022 Name & Address SALLIE BACON 3056 WOODWARD AVE SW WYOMING, MI 49509	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/08/2022 STUART POLTROCK 6806 OLD 28TH ST SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer SOUND POST STUDIOS Business Address 6806 OLD 28TH ST SE, GRAND RAPIDS, MI 49546 Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100.00	_{\$} 100.00
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/11/2022 Name & Address SCOTT LANCASTER 55 IONIA AVE NW APT 1204 GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide: Occupation RADIOLOGIST Employer ADVANCED RADIOLOGY	_{\$} 250.00	_{\$} _250.00
Business Address 3264 EVERGREEN DR NE, GRAND RAPIDS, MI 49525		
Type of Contribution: Direct Loan from a person Fund Raiser		1
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	-

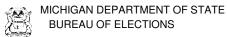


CANDIDATE COMMITTEE

2. Committee Name

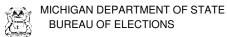
COMMITTEE TO ELECT LISA KNIGHT

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/21/2022 Name & Address: JOSHUA USADEL 8238 WOODSTONE DR SE BYRON CENTER, MI 49315	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/21/2022		
Name & Address KATHERINE WILLIAMS 879 BEECHWOOD ST NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/07/2022 Name & Address: GRACI HARKEMA 55 OTTAWA AVE SW GRAND RAPIDS, MI 49503	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/08/2022 Name & Address HILLARY SCHOLTEN 1027 BENJAMIN AVE SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR COUNSEL Employer MILLER JOHNSON		
Business Address 45 OTTAWA AVE SW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 9 of 24	Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/08/2022 Name & Address: STUART POLTROCK 6806 OLD 28TH ST SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer SOUND POST STUDIOS	_{\$} 100.00	_{\$} 100.00
Business Address 6806 OLD 28TH ST SE, GRAND RAPIDS, MI 49546		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/11/2022 Name & Address ANDRE DIAZ 6500 BARNUM RD MIDDLEVILLE, MI 49333	\$ 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation PUBLIC IMPROVEMENT COORDINATOR Employer DTE ENERGY INC		
Business Address 444 WEALTHY ST SW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/13/2022 STACIE SOTO 1638 HUTCHINSON AVE SE APT E GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation ANALYST Employer SPECTRUM HEALTH		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address TAMARA VANDENBERG 1450 MILTON ST SE GRAND RAPIDS, MI 49506	_{\$} 1,000.00	_{\$} _1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation CO-OWNER THE MEANWHILE BAR INC		
Business Address 1005 WEALTHY ST SE, GRAND RAPIDS, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 10 of 24	Enter this total on line 3a of Summary Page.	

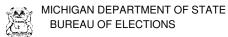


CANDIDATE COMMITTEE

2. Committee Name

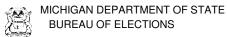
COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address: CAROLYN FERRARI 120 PROSPECT AVE SE	_	
GRAND RAPIDS, MI 49503	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/14/2022		
Name & Address JANAY BROWER		
1405 BUCHANAN AVE SW	_{\$} 100.00	_{\$} 100.00
GRAND RAPIDS, MI 49507	\$	\$
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER PUBLIC THREAD		
Business Address 1460 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address:	_	
CASSANDRA KOBLER	_{\$} 25.00	05.00
862 MAYHEW WOOD DR SE GRAND RAPIDS, MI 49507	§ 23.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/14/2022	-	
Name & Address AMANDA STERLING		
1419 MILTON ST SE	_{\$} 50.00	50.00
GRAND RAPIDS, MI 49506	<u>\$00.00</u>	\$_00.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	al 200.00	
Grand Total of All Schedules 1/		
(Complete on last page of Schedule	Enter this total on line 3a of Summary	.
Page 11 of 24	Page.	



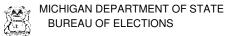
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address: JOSHUA USADEL 8238 WOODSTONE DR SE BYRON CENTER, MI 49315 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address LYNN HEEMSTRA 13925 THOMPSON DR NE LOWELL, MI 49331	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: MEREDITH GREMEL PO BOX 417 BELMONT, MI 49306	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer_		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/14/2022 Name & Address JD CHAPMAN JR 918 PRINCE ST SE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	525.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 12 of 24	Enter this total on line 3a of Summary	
Page _ ' C of _	Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/15/2022 Name & Address: KAREY HAMRICK 3004 OAKWOOD DR SE EAST GRAND RAPIDS, MI 49506	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/19/2022 Name & Address		
STUART POLTROCK 6806 OLD 28TH ST SE GRAND RAPIDS, MI 49546	\$ 40.00	<u>\$</u> 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer SOUND POST STUDIOS		
Business Address 6806 OLD 28TH ST SE, GRAND RAPIDS, MI 49546		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/20/2022 DAN SCHOONMAKER 53 ALTEN AVE NE GRAND RAPIDS, MI 49503	_{\$} 23.79	_{\$} 23.79
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? VES 4. Date of Receipt 07/25/2022 Name & Address EQUITY PAC 325 GLENHAVEN AVE NW GRAND RAPIDS, MI 49504	_{\$} 1,000.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,113.79	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 13 of 24	Enter this total on	J

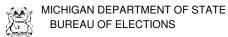


CANDIDATE COMMITTEE

2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address: TAMMY DUBAY 2257 HEATH RD HASTINGS, MI 49058 5. If over \$100.00 cumulative, please provide:	_{\$} 30.00	_{\$} 30.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/26/2022		_
Name & Address BONNIE NAWARA 1801 TAHOE PINE DR SW WYOMING, MI 49519	\$ <u>20.00</u>	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address: JORIM WHITLEY 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525	§ 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address EVA SWITEK 509 CHESHIRE DR NE GRAND RAPIDS, MI 49505	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
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)		
Page 14 of 24	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

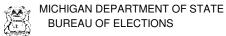
2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address: BLYTHE KAZMIERCZAK 3169 THORNCREST DR SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer BLYTHE TALENT	_{\$} 38.35	_{\$} 38.35
Business Address ONLINE,		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address NICHOLLE APPLEWHITE 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525	_{\$} 18.93	_{\$} 18.93
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/28/2022 Name & Address: JACQUELINE BRAYMAN 585 CARNOUSTIE AVE SE GRAND RAPIDS, MI 49546	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROJECT MANAGER Employer NORTH END WELLNESS COALITION Business Address 223 SPENCER ST NE, GRAND RAPIDS, MI 49505 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/29/2022 Name & Address SULARI WHITE 6386 CASCADE RD SE GRAND RAPIDS, MI 49546	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
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)	Enter this total on line 3a of Summary	

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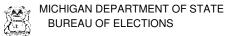


CANDIDATE COMMITTEE

2. Committee Name

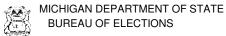
COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contrib middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regard	on is from a Political Comm		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: DANIELLE WILLIAMS 2082 CRANBROOK DR NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR OF ECONOMIC OPPORTUNITIES Business Address 1480 KALAMAZOO	: _{mployer_} AMPLIFY(GR MI 49507	_{\$} 100.00	_{\$} 100.00
	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YNAme & Address GLORIA KOCH 314 LAWNDALE AVE NE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:		pt <u>08/01/2022</u>	_{\$} 75.00	_{\$} 75.00
Occupation Emp	ployer			
Business Address	· · · · · · · · · · · · · · · · · · ·			
Type of Contribution: Direct	oan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: HERB SEAMONS 139 LANGDON AVE NE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:		09/08/2022	_{\$} 75.00	_{\$} 75.00
	mployer			
Business Address	_oan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address BONNIE BURKE 643 SLIGH BLVD NE GRAND RAPIDS, MI 49505	YES 4. Date of Rec	eipt <u>09/14/2022</u>	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	:			
Occupation	Employer			
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
		Page Subtotal	300.00	
Page 16 of 24		rand Total of All Schedules 1A olete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



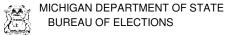
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/16/2022 Name & Address: KYMIE SPRING 1118 DIAMOND AVE NE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/22/2022		
Name & Address RICHARD LIVINGSTON 927 LEONARD ST NE GRAND RAPIDS, MI 49503	\$200.00	<u>\$</u> 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation SEMI RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/23/2022 Name & Address: SUSAN JONES 9550 RICHMOND RD BELDING, MI 48809	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/23/2022 Name & Address JACQUELINE BRAYMAN 585 CARNOUSTIE AVE SE GRAND RAPIDS, MI 49546	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROJECT MANAGER Employer NORTH END WELLNESS COALITION		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 17 of 24	Page.	



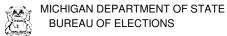
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/23/2022 Name & Address: DANI SOTO 6017 TWIN OAKS DR LAINGSBURG, MI 48848	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/24/2022		
Name & Address BONNIE NAWARA		
1801 TAHOE PINE DR SW	_{\$} 50.00	_{\$} 50.00
WYOMING, MI 49519	\$ 00.00	\$ 00.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: EVA SWITEK 509 CHESHIRE DR NE GRAND RAPIDS, MI 49505	_{\$} 150.00	_{\$} _150.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/24/2022 Name & Address TRACI RICHMOND 630 LAFAYETTE AVE SE GRAND RAPIDS, MI 49503	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	270.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 18 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/24/2022 Name & Address: LYNN BROWN-TEPPER 5665 JUANITA DR SE KENTWOOD, MI 49508 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation EXECUTIVE & ARTISTIC DIRECTOR Employer COMMUNITY CIRCLE THEATRE		
Business Address 1703 ROBINSON RD SE, 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 09/27/2022 Name & Address		
CHARSIE SAWYER 5933 MILL POINT CT SE KENTWOOD, MI 49512	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR EMERITUS Employer CALVIN UNIVERSITY		
Business Address 3201 BURTON ST SE, GRAND RAPIDS, MI 49546		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/28/2022 EUPHEMIA FRANKLIN 8070 WARREN BLVD CENTER LINE, MI 48015	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation DIRECTOR Employer SOUTH EASTERN MICHIGAN INDIANS INC		
Business Address 26641 LAWRENCE AVE, CENTER LINE, MI 48015		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/29/2022 Name & Address DEBORAH CLANTON 3135 E GATEHOUSE DR SE GRAND RAPIDS, MI 49546	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Page 19 of 24	Enter this total on line 3a of Summary Page.	



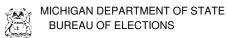
CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/29/2022 Name & Address: GWENDOLYN WALLS 26 HIGHLAND ST SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer	_{\$} 140.00	_{\$} 140.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/03/2022 Name & Address JEFF WINSTON 1525 FORREST AVE NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 Name & Address: ENID GADDIS 1113 LYON ST NE GRAND RAPIDS, MI 49503	\$80.00	_{\$} 80.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/03/2022 CASSANDRA KOBLER 862 MAYHEW WOOD DR SE GRAND RAPIDS, MI 49507	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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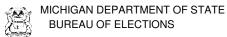
Page <u>ZU</u> of <u>Z4</u>

Page.



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report 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 10/04/2022 Name & Address: DEBRA PERRY 1342 BURTON ST SE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/04/2022		
ANDREA BLUE 56 HARAS CT SW GRAND RAPIDS, MI 49548	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/04/2022 DENISE EVANS 5984 EAST LYN HAVEN DR SE KENTWOOD, MI 49512	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/04/2022		
Name & Address BRANDON HARRIS 4792 BURLINGAME AVE SW WYOMING, MI 49509	_{\$} 40.00	_{\$_} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
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Page 21 of 24	Enter this total on line 3a of Summary Page.	

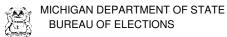


CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/04/2022 Name & Address: NICHOLLE APPLEWHITE 3260 CHENEY AVE NE GRAND RAPIDS, MI 49525 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/04/2022 Name & Address JOSHUA USADEL 8238 WOODSTONE DR SE BYRON CENTER, MI 49315	\$ 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/06/2022 Name & Address: ADAM WILLIAMS 537 SHIRLEY ST NE GRAND RAPIDS, MI 49503	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/13/2022 MARK WEYMOUTH 4362 FOREST PARK DR SW WYOMING, MI 49519	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	90.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

Page.



CANDIDATE COMMITTEE

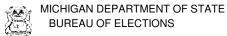
2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

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 10/14/2022 Name & Address: BARBARA HAWKINS-PALMER HAPPY HOLLOW ST SW JAMESTOWN, MI 49418 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 25.00	_{\$} 25.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/17/2022 Name & Address PEG TERKEURST 1730 SCOTT CREEK DR NE PLAINFIELD TWP, MI 49306	_{\$} 100.00	_{\$} 100.00
If over \$100.00 cumulative, please provide: Occupation NOT CURRENTLY EMPLOYED Employer Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/18/2022 YOLANDA BROWN 59 BENJAMIN AVE SE GRAND RAPIDS, MI 49506	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? VES 4. Date of Receipt 10/18/2022 Name & Address EQUITY PAC 325 GLENHAVEN AVE NW GRAND RAPIDS, MI 49504	_{\$} 500.00	_{\$_} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	ı	1
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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Page.



1. Committee I.D. Number

2021040

CANDIDATE COMMITTEE

2. Committee Name

COMMITTEE TO ELECT LISA KNIGHT

	x to indicate if cont	tribution is from a Political Co	ual, enter last name, first name, mmittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: CHRIS GUIS 3035 WATERFO		YES 4. Date of R	eceipt 10/23/2022	_{\$} 250.00	_{\$} 250.00
	IAL MANAGEI	R Employer EP CONST	RUCTION STAFFING INC. D RAPIDS, MI 49546 Fund Raiser		
3. Contribution #2 Name & Address DAWN BAKER 2012 N TERRAC GRAND RAPIDS			eceipt 10/23/2022	\$ 100.00	_{\$} 100.00
	MANAGER 1 CELEBRAT	_ Employer_SHOWSP	AN INC D RAPIDS, MI 49525 Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of F	Receipt	\$	\$
5. If over \$100.00 cumu	ılative, please pro	vide:		Click Here for	Memo Itemization
Occupation		Employer			
Business Address	Direct				
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	Loan from a person YES 4. Date of I	Fund Raiser	\$	\$
3. Contribution # 4 Name & Address 5. If over \$100.00 cumu Occupation Business Address	PAC Receipt?	YES 4. Date of I	Fund Raiser Receipt	\$Click Here for	\$ Memo Itemization
3. Contribution # 4 Name & Address 5. If over \$100.00 cumu	PAC Receipt?	YES 4. Date of I	Fund Raiser Receipt Fund Raiser		\$ Memo Itemization
3. Contribution # 4 Name & Address 5. If over \$100.00 cumu Occupation Business Address	PAC Receipt?	YES 4. Date of I	Fund Raiser Receipt	350.00	\$ Memo Itemization

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line 3a of Summary Page.



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

		z. Oommittee Name	
3. Name & Address From Whom Recei	,	5. Type of Receipt	6. Amount
Receipt #1	Date of Receipt 04/01/2022	Loan from a Lending Institution	
Name & Address:			\$ 15.00
ANONYMOUS		Interest	φ_10.00
		Refund \Rebate	
		Other (Specify) CASH DONATION	
	Fund Raiser	Other (Specify)	
Receipt #2	Date of Receipt 00/00/0000		
Name & Address:	Date of Receipt 08/08/2022	Loan from a Lending Institution	
ANONYMOUS			15.00
		Interest	_{\$} 15.00
		Refund \Rebate	
		neruna (nebate	
		Other (Specify) CASH DONATION	
	Fund Raiser	(-	
Receipt #3	Date of Receipt 09/03/2022	—	
Name & Address:	03/00/2022	Loan from a Lending Institution	
ANONYMOUS		Interest	\$ 15.00
		interest	' <u> </u>
		Refund \Rebate	
		Call out to the CARL DOMATION	
	Пs.	Other (Specify) CASH DONATION	
	Fund Raiser		
Receipt #4 Name & Address:	Date of Receipt <u>09/03/2022</u>	Loan from a Lending Institution	
ANONYMOUS		Loan nom a Lending institution	\$ 10.00
711011111000		Interest	Ψ
		Refund \Rebate	
		Other (Specify) CASH DONATION	
	Fund Raiser	Carlor (opcony)	
Receipt #5	Date of Receipt 09/19/2022	Loan from a Lending Institution	
Name & Address:		Loan from a Lending institution	_{\$} 10.00
ANONYMOUS		Interest	\$ <u>10.00</u>
		Refund \Rebate	
		Other (Specify) CASH DONATION	
	Fund Raiser	Other (Specify)	
Receipt #6	Date of Receipt 09/24/2022	Loop from a Londing Institution	
Namė & Address:	1 09/24/2022	Loan from a Lending Institution	45.00
ANONYMOUS		Interest	\$ <u>15.00</u>
		interest	
		Refund \Rebate	
	Fund Raiser	Other (Specify) ANONYMOUS EVENT DONAT	
Receipt #7			
Name & Address:	Date of Receipt 09/24/2022	Loan from a Lending Institution	
ANONYMOUS			\$ 10.00
		Interest	
		<u> </u>	
		Refund \Rebate	
	[7]	ANONYMOUS EVENT DONAT	
	Fund Raiser	Other (Specify)	
		Page Subtota	al 90.00
		Orand Tatal of All Calcadidate 4 A	<u> </u>
		Grand Total of All Schedules 1A - (Complete on last page of Schedule	
		(Complete on last page of Schedule	5) <u> </u>

Enter this total on line 4 of Summary Page

Page 1 of 1



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CLOVER APP		01/03/2022	\$ 145.32
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	110.02
1455 MARKET ST	- dipoco.		
SF, CA 94103			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name SWIFT PRINTING		01/05/2022	\$ 218.09
	Purpose: CAMPAIGN LITERATURE	Date	\$ <u>210.03</u>
Address 404 BRIDGE ST NW	Purpose:		
GRAND RAPIDS, MI 49504			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name CLOVER APP		01/11/2022	
OLO VERTAL I	ODEDIT CARD DECOCIONO FEEC	01/11/2022 Date	\$ <u>21.04</u>
Address 1455 MARKET ST	Purpose: CREDIT CARD PROCESSING FEES	Dale	
SF, CA 94103			
- ,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name SHANNON COHEN		01/20/2022	
		Date	\$ <u>275.60</u>
Address 1418 COLORADO AVE SE	Purpose: PERSONALIZED THANK YOU CARDS		
GRAND RAPIDS, MI 49507			
G. a. a. 5 . a. a. 12 . c., t.m. 10007	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #5	statement		
'			
Name SENDINBLUE		01/20/2022	\$ 25.00
Address 1402 3RD AVE	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	20.00
#301			
SEATTLE, WA 98101	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	685.05
	Grand Total of all S	Schedules 1B	223.30
	(Complete on last page		



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
	The suppose (Fiequited information)	J. Dale	o. Amount
Expenditure #1			
Name ACTBLUE		01/25/2022	\$ 150.00
Address	Purpose: VAN APP ACCESS FOR CANVASSING	Date	
14 ARROW ST			
CAMBRIDGE, MA 02138			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name CLOVER APP		02/03/2022	F0 00
OLO VEITALI		Date	\$ <u>56.68</u>
Address	Purpose: CREDIT CARD PROCESSING OPTIONS	Dale	
1455 MARKET ST			
SF, CA 94103			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name CLOVER APP		00/00/0000	
OLO VLITATE		02/09/2022	\$ 23.14
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	
1455 MARKET ST			
SF, CA 94103			
П	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name SENDINBLUE		02/22/2022	0= 00
	ONLINE MARKETING AND NEWOLETTERS	Date	\$ <u>25.00</u>
Address	Purpose:ONLINE MARKETING AND NEWSLETTERS		
1402 3RD AVE #301			
SEATTLE, WA 98101			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name STORR PRINTING		02/27/2022	
	CAMPAIGN I ITERATI IRE		\$ 61.85
Address 938 CHERRY ST SE	Purpose: CAMPAIGN LITERATURE	Date	
GRAND RAPIDS, MI 49506			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
		tal this page	010.07
	Subio	iai iiiis paye	316.67
	Grand Total of all		
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

	4 Division (Pagning Information)	I E Data	C A
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name KENT COUNTY Address 300 MONROE AVE NW	Purpose: KENT COUNTY FILING FEE(S)	03/02/2022 Date	\$ <u>150.00</u>
GRAND RAPIDS, MI 49503 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name CLOVER APP Address 1455 MARKET ST	Purpose: CREDIT CARD PROCESSING FEES	03/03/2022 Date	\$ <u>4.58</u>
SF, CA 94103			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name SEWINGSEEDS	VOLUNTEED AND CAMBAIGN TSUIDTS	03/07/2022 Date	\$ <u>450.50</u>
Address ONLINE PURCHASE GRAND RAPIDS,	Purpose: VOLUNTEER AND CAMPAIGN TSHIRTS	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name CLOVER APP		03/09/2022 Date	\$ 12.65
Address 1455 MARKET ST SF, CA 94103	Purpose:	Dale	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name SENDINBLUE		03/21/2022	
Address 1402 3RD AVE #301	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	\$ <u>25.00</u>
SEATTLE, WA 98101 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	642.73
	Grand Total of all	Schadulas 10	3.2.73
	(Complete on last page		



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		1	
Name CLOVER APP		04/04/2022	\$ 41.40
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	Ψ <u>+1.+0</u>
1455 MARKET ST	rurpose.		
SF, CA 94103			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name CLOVER APP		04/07/2022	¢ 24 25
	CREDIT CARD PROCESSING FEES	Date	\$ <u>24.25</u>
Address	Purpose: CREDIT CARD PROCESSING FEES		
1455 MARKET ST SF, CA 94103			
51, OA 34103	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name SENDINBLUE		04/20/2022	\$ 25.00
Address	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	
1402 3RD AVE			
#301 SEATTLE MA 09101	□		
SEATTLE, WA 98101	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name WOO COMMERCE		04/25/2022	\$ 199.00
Address	RECURRING ONLINE DONATION FUNCTION FOR WEBSITE	Date	⋄ <u>133.00</u>
60 29TH ST	Purpose:		
#343			
SF, CA 94110	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name CLOVER APP		0.4/0.5/5555	
	CREDIT CARD BROCESSING FEES	04/25/2022	\$ 5.55
Address 1455 MARKET ST	Purpose:	Date	<u> </u>
SF, CA 94103			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	295.20
	Grand Total of all \$	Schedules 1B	200.20
	(Complete on last page		
		-	<u> </u>



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CLOVER APP		05/11/2022	\$ 19.00
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	10.00
1455 MARKET ST	1 dipose.		
SF, CA 94103			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name STORR PRINTING		05/18/2022	\$ 104.60
	Purpose: CAMPAIGN LITERATURE	Date	\$ <u>104.00</u>
Address 938 CHERRY ST SE	Purpose:		
GRAND RAPIDS, MI 49506			
G17/1145 17/11 150, WII 40000	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name SENDINBLUE		05/20/2022	\$ 25.00
Address	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	
1402 3RD AVE			
#301 SEATTLE, WA 98101			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #4	statement		
•			
Name STORR PRINTING		05/25/2022	\$ 58.72
Address	Purpose: CAMPAIGN LITERATURE	Date	00.72
938 CHERRY ST SE			
GRAND RAPIDS, MI 49506			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name CLOVER APP		06/03/2022	
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	\$ <u>6.33</u>
1455 MARKET ST	Purpose:	24.0	
SF, CA 94103			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	213.65
	Grand Total of all S		
	(Complete on last page	of Schedule)	



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

		T = 5 ·	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name HANDICAP SIGN INC		06/07/2022	\$ 1,362.63
Address	Purpose: YARD SIGNS AND PRINTING	Date	
1142 WEALTHY ST SE	- u.poso.		
GRAND RAPIDS, MI 49506	_		
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name CLOVER APP		06/10/2022	° 17 05
	CREDIT CARD PROCESSING FEES	Date	\$ <u>17.95</u>
Address	Purpose: CREDIT CARD PROCESSING FEES		
1455 MARKET ST SF, CA 94103			
31, OA 94103	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name FACEBOOK		06/15/2022	\$ 12.51
Address	Purpose: FACEBOOK PAID ADVERTISEMENT	Date	<u> 12.01</u>
1 HACKER WAY			
MENLO PARK, CA 94025			
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name HANDICAP SIGN INC		06/16/2022	10710
Address	Purpose: YARD SIGN STANDS	Date	\$ <u>197.16</u>
Address 1142 WEALTHY ST SE	Purpose: TAITO SIGIN STANDS		
GRAND RAPIDS, MI 49506			
S. a. a	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name SENDINBLUE		06/21/2022	¢ 25 00
Address	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	\$ <u>25.00</u>
1402 3RD AVE			
#301 SEATTLE MA 00101	Check box if this expenditure is payment of		
SEATTLE, WA 98101 Fund Raiser	debt or obligation reported on previous		
L unu naisei	statement		
	Subto	tal this page	1,615.25
	Grand Total of all		
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CLOVER APP		07/14/2022	\$ 22.80
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	<u> </u>
1455 MARKET ST	т шрозе.		
SF, CA 94103	_		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #2	statement		
		07/45/0000	
Name FACEBOOK		07/15/2022	\$ 64.56
Address	Purpose:FACEBOOK PAID ADVERTISEMENT	Date	
1 HACKER WAY			
MENLO PARK, CA 94025			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name SENDINBLUE		07/20/2022	
GLINDINDLOL		07/20/2022	\$ <u>25.00</u>
Address 1402 3RD AVE	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	
#301			
SEATTLE, WA 98101	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name CELEBRATION CINEMA			
GELEBRATION CINEWA		07/28/2022	\$ 220.00
Address	Purpose: MOVIE SCREENING EVENT	Date	
2121 CELEBRATION DR NE	,		
GRAND RAPIDS, MI 49525			
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name CLOVER APP		08/03/2022	
	CREDIT CARD PROCESSING FFFS	Date	\$ 75.03
Address 1455 MARKET ST	Purpose: CREDIT CARD PROCESSING FEES	Dale	
SF, CA 94103			
•	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	407.39
	Grand Total of all S	Schedules 1B	
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
	alpose (regained information)	J. Build	5.7 mount
Expenditure #1 Name CLOVER APP Address	Purpose: CREDIT CARD PROCESSING FEES	08/10/2022 Date	\$ <u>33.69</u>
1455 MARKET ST SF, CA 94103			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name STORR PRINTING	CAMPAIONLITEDATURE	08/22/2022 Date	\$ <u>78.61</u>
Address	Purpose: CAMPAIGN LITERATURE	Baio	
938 CHERRY ST SE GRAND RAPIDS, MI 49506			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name SENDINBLUE		08/22/2022	\$ <u>25.00</u>
Address 1402 3RD AVE #301	Purpose: ONLINE MARKETING AND NEWSLETTERS	Date	
SEATTLE, WA 98101 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name CLOVER APP		09/06/2022	\$ 2.73
Address 1455 MARKET ST SF, CA 94103	Purpose:	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name EVENTBRITE		09/07/2022	\$ 150.00
Address 155 5TH ST SF, CA 94103	Purpose: EVENT TICKET	Date	* <u>130.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	290.03
	Grand Total of all ((Complete on last page		



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
			-
Expenditure #1		09/09/2022	
Name CLOVER APP			\$ <u>16.90</u>
Address	Purpose: CREDIT CARD PROCESSING FEES	Date	
1455 MARKET ST			
SF, CA 94103			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name SENDINBLUE		09/20/2022	\$ 25.00
	ONLINE MARKETING AND NEWSLETTERS Purpose:	Date	* <u>20.00</u>
Address 1402 3RD AVE	Purpose:		
#301			
SEATTLE, WA 98101	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name CRESTON NEIGHBORHOOD ASSOCIATION		09/21/2022	\$ 300.00
Address	Purpose: ARTBASH EVENT COMMUNITY SPONSORSHIP	Date	<u> </u>
205 CARRIER ST NE	i dipose.		
GRAND RAPIDS, MI 49505			
_	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name SAM'S CLUB		09/23/2022	
S S S 2 S 2		Date	\$ <u>47.88</u>
Address	Purpose: FOOD FOR FUNDRAISER EVENT	Duio	
3901 ALPINE AVE NW			
COMSTOCK PARK, MI 49321			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name STORR PRINTING		09/23/2022	
	Purpose: MAILERS	Date	\$ 2,575.10
Address 938 CHERRY ST SE	Purpose: 1417 (1221 10	Date	
GRAND RAPIDS, MI 49506	<u> </u>		
•	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	2,964.88
			<u></u>
	Grand Total of all ((Complete on last page)		
	(



1. Committee I. D. Number 2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SAM'S CLUB		09/26/2022	\$ 15.98
Address 3901 ALPINE AVE NW COMSTOCK PARK, MI 49321	Purpose: WATERS FOR VOLUNTEERS	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name MEIJER	VOLUNTEED NAMETAGO	09/26/2022 Date	\$ <u>11.15</u>
Address 3757 PLAINFIELD AVE NE GRAND RAPIDS, MI 49525	Purpose: VOLUNTEER NAMETAGS	Balo	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name FOUR BROTHERS PARTY STORE	FOOD FOR VOLUNTEERS	09/26/2022	\$ <u>59.27</u>
Address 1975 MADISON AVE SE GRAND RAPIDS, MI 49507	Purpose: FOOD FOR VOLUNTEERS	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name CLOVER APP		10/03/2022 Date	\$ 15.13
Address 1455 MARKET ST SF, CA 94103	Purpose: CREDIT CARD PROCESSING FEES	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name CLOVER APP		10/11/2022	
Address 1455 MARKET ST	Purpose: CREDIT CARD PROCESSING FEES	Date	\$ <u>22.15</u>
SF, CA 94103 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	123.68
	Grand Total of all S (Complete on last page		
	(11p.11.11.11.140t page	/ [



1. Committee I. D. Number

2021040

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name CELEBRATION CINEMA		10/12/2022	\$ 340.00
	Purpose: MOVIE FUNDRAISER EVENT	Date	₹ <u>340.00</u>
Address 2121 CELEBRATION DR NE	Purpose:		
GRAND RAPIDS, MI 49525			
,	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name STORR PRINTING		10/20/2022	* 0 000 10
	MAILEDS	Date	\$ 2,928.12
Address	Purpose: MAILERS		
938 CHERRY ST SE			
GRAND RAPIDS, MI 49506			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name SENDINBLUE		10/20/2022	. 05.00
	ONLINE MARKETING AND NEWSLETTERS	Date	\$ <u>25.00</u>
Address 1402 3RD AVE	Purpose: ONLINE MARKETING AND NEWSLETTERS		
#301			
SEATTLE, WA 98101	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name			
			\$
Address	Purpose:	Date	
	Click F	Here for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
			\$
Address	Purpose:	Date	
	Click I	Here for Memo	Itemization Type
	Check box if this expenditure is payment of) I
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	3,293.12

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



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number _____2021040

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the common (Check	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> c rpose checked.)	or forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an	Type of Obligation (Description) Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	6. Indicate original amount of debt			ltem 8)
Debt #1 Corp? Yes Owed to or by: LISA KNIGHT	4. Type: MONETARY FOR PURCHASE REIM	\$		
3260 CHENEY AVE NE	5. <u>Date Debt Was Incurred</u> :	\$		
GRAND RAPIDS, MI 49525	09/24/2022	\$	0.00	s 350.00
	6. Original Amount of Debt	\$	\$ 0.00	\$_350.00_
	\$ 350.00	Ψ		FORGIVEN
		\$	1	·
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
	6. Original Amount of Debt:	\$	_{\$}	\$
	\$	\$		Tropolyen
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	Φ	\ \s	\$
	\$			FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtota	I (Outstanding debt)	350.00
(Co	omplete on last page of Schedule s	Grand Tota showing amounts owed by	of all Schedules 1E or to the committee)	350.00 Enter this total
				בוונסו נוווס נטנמו

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by"" or line 12b "owed to" of the Summary Page

	4	4	
Page	1	of I	



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	6. Address and Name (If any) of the place where the activity was held. BOOKS & MORTAR
03/26/2022	15	READING MONTH EVENT	966 CHERRY ST SE GRAND RAPIDS, MI 49500 Private Residence
7. Total Contributions	600.00		
8. Other Receipts	0.00		
9. Gross Receipts (Add lines 7 a	and 8) 600.00		
10. Total Cost of Event (Total Cost includes In-Kind Cor	0.00 ntributions and All Expenditures	Made For the Event)	
11. Check if event was a joi	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
		<u></u>	
	-		
The committee is requir	red to file a senarate Fund Rais	er Schedule for each fund raising	a 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.

_	1	of 6
Page	1	of O



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 2021040

	LIOE	OFBARATE OU	EET EOD EAOU	C\/C\IT	
	- USE A	SEPARATE SH	EET FOR EACH	EVENI -	
3. Date Event Was Held		of Individuals Attending ating (whichever is	5. Type of Fund Raising	g Activity	6. Address and Name (If any) of t place where the activity was held CITY BUILT BREWING
04/19/2022					820 MONROE AVE NW #155
		10	MEET AND GREE	T EVENT	GRAND RAPIDS, MI 49500 Private Residence
		0.00			
7. Total Contributions					
8. Other Receipts		0.00			
9. Gross Receipts (Add lines 7	and 8)	0.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	0.00	Made For the Event	<u>-</u>	
11. Check if event was a jo				•	
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.

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Summary Page.

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FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

	- 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	6. Address and Name (If any) of the place where the activity was held. THE MEANWHILE BAR, If
07/14/2022	45	CELEBRATE SMALL BUSINESS EVENT	1005 WEALTHY ST SE GRAND RAPIDS, MI 4950 Private Residence
Total Contributions	2,000.00		
. Other Receipts	0.00		
. Gross Receipts (Add lines 7 a	and 8) 2,000.00		
0. Total Cost of Event Fotal Cost includes In-Kind Cor	0.00 ntributions and All Expenditures	s Made For the Event)	
	int fund raiser and complete the		
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
	-	<u></u>	
The committee is requir period covered by the C		er Schedule for each fund raising	g event held during the

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

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



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

period covered by the Campaign Statement.

Summary Page.

Page 4 of 6

 $_{\text{1. Committee I.D. Number}}\ 2021040$

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

NE

	- USE A	A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held	4. Numbe or Particip greater)	r of Individuals Attending pating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of t place where the activity was held CELEBRATION CINEMA
07/26/2022		30	MOVIE THEATER FUNDRAISEI	2121 CELEBRATION DE
7. Total Contributions		386.07		
8. Other Receipts		0.00		
9. Gross Receipts (Add lin	es 7 and 8)	386.07		
10. Total Cost of Event (Total Cost includes In-Kir	nd Contributions	220.00 and All Expenditures	Made For the Event)	
11. Check if event wa	s a joint fund ra	aiser and complete the	following:	
Co-Sponsor(s)		Contribution S (%)	Split	Expenditure Split (%)
				
The committee is	required to file	a separate Fund Rais	er Schedule for each fund rais	ng event held during the

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

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



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 2021040

	- USE A SEPARATE SHI	EET FOR EACH EVENT -	
3. Date Event Was Held	Number of Individuals Attending 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. PRIVATE RESIDENCE
09/24/2022	35	BACKYARD BASH EVENT	3260 CHENEY AVE NE GRAND RAPIDS, MI 49525 Private Residence
7. Total Contributions	395.00		
8. Other Receipts	0.00	 	
9. Gross Receipts (Add lines 7 a	and 8) 395.00	 	
10. Total Cost of Event (Total Cost includes In-Kind Cor	0.00 ntributions and All Expenditures	Made For the Event)	
11. Check if event was a join	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)
	<u>-</u>		
			
			
			
	<u> </u>		

- 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.

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Summary Page.

Page 6 of 6

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT LISA KNIGHT

NE

	- USE A	SEPARATE SH	EET FOR EACH EVENT -	
Date Event Was Held		of Individuals Attending ating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was hel CELEBRATION CINEM
0/04/2022	,	35	MOVIE THEATER EVENT	2121 CELEBRATION D GRAND RAPIDS, MI 49 Private Residence
otal Contributions		675.00		
Other Receipts		0.00		
Gross Receipts (Add lines 7 a	and 8)	675.00		
Total Cost of Event all Cost includes In-Kind Cor	ntributions	340.00 and All Expenditures	Made For the Event	
Check if event was a join		·	,	
Co-Sponsor(s)		Contribution S (%)	Split	Expenditure Split (%)
	_			
	-			
	-			
	-			
	- - -			

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

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