



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>1-1-24</u> to <u>7-21-24</u>	
1. Committee I.D. Number 13942	4. Candidate Last Name Spencer First Name Richelle M.I. M 4a. Office Sought Including District # or Community Served (If applicable) Sheriff 4b. County of Residence BARRY
2. Committee Name CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF	5. Committee's Mailing Address 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 Area Code and Phone <u>269-804-3699</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.
6. Treasurer's Name & Residential Address JERRY A SMITH 6800 BROWN RD LAKE ODESSA, MI 48849 Area Code & Phone <u>616-302-0373</u>	7. Treasurer's Business Address Area Code and Phone _____
8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) KELLIE SMITH 6800 BROWN RD. LAKE ODESSA, MI 48849 Area Code and Phone <u>616-481-7367</u>	9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>8-6-2024</u>
Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
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. Current Treasurer or Designated Record keeper <u>Jerry Smith</u> / <u>Jerry Smith</u> Date <u>7-24-24</u> Type or Print Name Signature Candidate <u>Richelle Spencer</u> / <u>Richelle Spencer</u> Date <u>07/24/24</u> Type or Print Name Signature	



1. Committee I.D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>16,745.30</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>16,745.30</u>	(18.) \$ <u>20,712.30</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>311.40</u>	(19.) \$ <u>711.40</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>17,056.70</u>	(20.) \$ <u>21,423.70</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>5400.32</u>	(21.) \$ <u>11,546.39</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>14,035.94</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>14,035.94</u>	(23.) \$ <u>16,393.98</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>11693.58</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>2008.96</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>17,056.70</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>19,065.66</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>14,035.94</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>5029.72</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-3-24</u> Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD BATTLE CREEK, MI 49017		10.00 \$ _____	5663.83 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-3-24</u> Name & Address: LARRY OSBORNE 6925 DONEGAL LN DELTON, MI 49046		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-3-24</u> Name & Address: JILL STEELE 4153 S SHORE DR. DELTON, MI 49046		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>CITY ATTORNEY</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-4-24</u> Name & Address: ROBERT FUERI 5702 RITA DR. NE KALKASKA, MI 49646		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **191.15**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-4-24</u> Name & Address: JACKIE SCHMITZ 7584 BOWENS MILL RD. MIDDLEVILLE, MI 49333		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-4-24</u> Name & Address: STEPHANIE CLARK 1164 STAGECOACH DR BYRON CENTER, MI 49315		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-6-24</u> Name & Address: MORGANNE HUBBELL 1101 PINE AVE GRAND RAPIDS, MI 49504		52.05 \$ _____	72.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-18-24</u> Name & Address: ANGIE BERDECIA 10636 HASTINGS RD CLARKSVILLE, MI 48815		20.82 \$ _____	20.82 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **124.93**

Grand Total of All Schedules 1A
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Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt **4-20-24**

Name & Address:

**LUCAS MORAN
7383 NORTH 35TH ST.
RICHLAND, MI 49083**

10.41
\$ _____

10.41
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt **4-20-24**

Name & Address

**MARIANNE SEIDL
1970 NASHVILLE RD.
HASTINGS MI 49058**

104.10
\$ _____

104.10
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt **4-22-24**

Name & Address:

**KATHY FORSYTH
10955 BOULTER RD.
DELTON, MI 49046**

52.05
\$ _____

52.05
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt **4-23-24**

Name & Address

**JAMES KINNEY
189 FLORENCE ST
WOODLAND, MI 48897**

104.10
\$ _____

104.10
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **LAWYER** Employer **JAMES M KINNEY PLC**

Business Address **P.O. BOX 9, HASTINGS, MI 49058**

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal **270.66**

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

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line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 4-23-24

Name & Address:

DIANE COLES
8405 W VW AVE
SCHOOLCRAFT, MI 49087

26.03
\$

26.03
\$

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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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 4-24-24

Name & Address

ALIZAH BLUNDELL
575 PRAIRIE CREEK RD
IONIA, MI 48846

260.25
\$

260.25
\$

5. If over \$100.00 cumulative, please provide:

Occupation DEPUTY Employer BCSO

Business Address 1212 W STATE ST. HASTINGS, MI 49058

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 4-25-24

Name & Address:

ROSEMARY ANGER
605 W GREEN ST
HASTINGS, MI 49058

260.25
\$

260.25
\$

5. If over \$100.00 cumulative, please provide:

Occupation EQ DIRECTOR Employer INGHAM CO

Business Address 341 S JEFFERSON ST. MASON, MI 48854

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 4-25-24

Name & Address

ARLETTA FEVIG
13202 GILKEY LAKE RD
DELTON, MI 49046

52.05
\$

52.05
\$

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 Subtotal **598.53**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 4-25-24 Name & Address: CATHERINE CASE 820 W MADISON HASTINGS, MI 49058		100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation VET Employer CATHERINE CASE, DVM Business Address 820 W MADISON ST. HASTINGS, MI 49058 Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 4-26-24 Name & Address: BARBARA CASE 1228 COOK RD. HASTINGS MI 49058		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 4-27-24 Name & Address: MEGAN DAVIS 2255 PIFER RD DELTON MI, 49046		10.41 \$ _____	10.41 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 4-29-24 Name & Address: KATHEE PIERCE 5633 RAVINE DR. MIDDLEVILLE, MI 49333		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation SCP Employer AMWAY Business Address 7575 FULTON ST. ADA, MI 49355 Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

318.61

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

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Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-2-24</u> Name & Address: LINDSEY AUSTIN 8075 W IRVING RD MIDDLEVILLE, MI 49333		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-3-24</u> Name & Address: LARRY BENNETT 2139 IROQUOIS TRL. HASTINGS, MI 49058		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>TREE REMOVAL</u> Employer <u>SELF</u> Business Address <u>2139 IROQUOIS TRL. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-4-24</u> Name & Address: MEGAN DAVIS 2255 PIFER RD. DELTON, MI 49046		52.05 \$ _____	62.46 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-3-24</u> Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017		104.10 \$ _____	5767.93 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **312.30**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-5-24</u> Name & Address: JACKIE L SCHMITZ 7584 BOWENS MILL RD. MIDDLEVILLE, MI 49333		25.00 \$ _____	51.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-7-24</u> Name & Address: LINDA LOVCHUK 118 ELSINORE LN BATTLE CREEK, MI 49015		1250.00 \$ _____	1250.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-2-24</u> Name & Address: CHRISTAL LUKASICWICZ 335 W MARSHALL ST. HASTINGS, MI 49058		50.00 \$ _____	50.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-2-24</u> Name & Address: DONDEANA HAMMOND 13557 BANFIELD RD BATTLE CREEK, MI 49017		100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **1425.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-30-24</u> Name & Address: MARGO SHAFER 807 W MAIN ST MIDDLEVILLE, MI 49333		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-30-24</u> Name & Address: MARGO SHAFER 807 W MAIN ST. MIDDLEVILLE, MI 49333		52.05 \$ _____	78.08 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-30-24</u> Name & Address: LARRY MENNETT 2139 IROQUIOS TRL. HASTINGS, MI 49058		104.10 \$ _____	208.20 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>TREE REMOVAL</u> Employer <u>SELF</u> Business Address <u>2139 IROQUIOS TRL. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-1-24</u> Name & Address: SHERRI SNYDER 13156 EAST C AVE. HICKORY CORNERS, MI 49060		260.25 \$ _____	260.25 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>LANDSCAPER</u> Employer <u>GULL LAKE LANDSCAPE CO</u> Business Address <u>13156 EAST C AVE. HICKORY CORNERS, MI 49060</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **442.43**

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-2-24</u></p> <p>Name & Address: SUE MCCARTHY 13620 S JONES RD BATTLE CREEK, MI 49017</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATION</u> Employer <u>MSP</u> Business Address <u>P.O. BOX 2600. BATTLE CREEK, MI 49014</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		100.00 \$ _____	100.00 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-16-24</u></p> <p>Name & Address: SHANE MCNEIL 700 CASS ST. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>106B E STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		500.00 \$ _____	640.00 \$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-27-24</u></p> <p>Name & Address: SHIRLEY V BARNUM 4157 COATS GROVE RD. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		500.00 \$ _____	500.00 \$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-20-24</u></p> <p>Name & Address: JILL HEWITT 4317 TILLOTSON LAKE RD. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		200.00 \$ _____	200.00 \$ _____

Page Subtotal **1300.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-7-24</u></p> <p>Name & Address: STARIA SCOTT 12962 GILKEY LAKE RD. DELTON, MI 49046</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		52.05 \$ _____	52.05 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-7-24</u></p> <p>Name & Address: WILLIAM GREGOR 2246 STANTON DR. MIDDLEVILLE, MI 49333</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	104.10 \$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-7-24</u></p> <p>Name & Address: NIALLA ABBOTT 1320 S HANOVER ST. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>MAIL CARRIER</u> Employer <u>USPS</u> Business Address <u>209 W MILL ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		100.00 \$ _____	100.00 \$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-8-24</u></p> <p>Name & Address: GAIL HORSEFIELD 1647 PINEHILL DR. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	104.10 \$ _____

Page Subtotal **360.25**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-8-24</u> Name & Address: ANNE BORDEN 15875 LEPPER HICKORY CORNERS, MI 49060		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-10-25</u> Name & Address: MICHAEL WACHOWSKI 7150 MILO RD. DELTON, MI 49046		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-13-24</u> Name & Address: VIC CUMMINGS 430 CHARLES ST. MIDDLEVILLE, MI 49333		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-14-24</u> Name & Address: DANIEL GARVIN 6191 S M-37 HWY. HASTINGS, MI 49058		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **155.13**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 5-20-24 Name & Address: MARTIN BUEHLER 9300 S M-43 HWY DELTON, MI 49046		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 5-24-24 Name & Address: PAUL NAGI 5872 NORTH CHARLTON PARK RD. FREEPORT, MI 49325		10.41 \$ _____	10.41 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 5-25-24 Name & Address: PAUL LEVENGOOD 619 E. MARSHALL ST. HASTINGS, MI 49058		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 5-28-24 Name & Address: MARY OVERMAN 9683 SHAWNEE BRANCH RD. PLAINWELL, MI 49080		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **191.56**

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

Enter this total on
line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-21-24</u></p> <p>Name & Address: MARK FELDPAUSCH 611 HARRINGTON RD. DELTON, MI 49046</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		500.00 \$ _____	500.00 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-4-24</u></p> <p>Name & Address: JULIE B LARSON 808 S DEXTER DR. LANSING, MI 48910</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>WORKERS COMP</u> Employer <u>AF GROUP</u></p> <p>Business Address <u>200 N GRAND AVE. LANSING, MI 48933</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		1250.00 \$ _____	1250.00 \$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-4-24</u></p> <p>Name & Address: MICHAEL FITZGERALD 111314 VILLAGE RD. CHASKA, MN 55318</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		125.00 \$ _____	125.00 \$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-4-24</u></p> <p>Name & Address: JUDITH PAWLOSKI 2707 TOWNER BLVD. ANN ARBOR, MI 48104</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		25.00 \$ _____	25.00 \$ _____

Page Subtotal **1900.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 5-31-24

Name & Address:

MARK FLICK
10944 S NORRIS RD.
DELTON, MI 49046

1000.00
\$ _____

1000.00
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation OWNER Employer FRONTLINE MAINTENANCE

[Click Here for Memo Itemization](#) ▼

Business Address 10185 FORD RD. DELTON, MI 49046

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

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Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

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Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

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Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal **1000.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt **6-4-24**

Name & Address:

**KATHERINE H ESTES
849 BEECH ST.
LAKE ODESSA, MI 48849**

500.00

\$ _____

500.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt **6-4-24**

Name & Address

**BRIAN REYNOLDS
111 W. MARSHALL ST.
HASTINGS, MI 49058**

100.00

\$ _____

100.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt **6-11-24**

Name & Address:

**SHANE MCNEIL
700 S. CASS ST.
HASTINGS, MI 49058**

500.00

\$ _____

1140.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **ATTORNEY** Employer **SELF**

Business Address **106B E STATE ST. HASTINGS, MI 49058**

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt **4-3-24**

Name & Address

**JEANNE SWANDER
1513 WEST MAIN ST.
KALAMAZOO, MI 49006**

50.00

\$ _____

50.00

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal **1150.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 6-12-24</p> <p>Name & Address: DAWN KELLER 115 PENNY AVE. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>100.00 \$ _____</p>	<p>100.00 \$ _____</p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 6-12-24</p> <p>Name & Address: RONALD IVEY 120 CASTLE RIDGE DR. BATTLE CREEK, MI 49015</p> <p>5. If over \$100.00 cumulative, please provide: Occupation DEAN Employer KCC</p> <p>Business Address 450 NORTH AVE. BATTLE CREEK, MI 49017</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>200.00 \$ _____</p>	<p>200.00 \$ _____</p>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>\$ _____</p>	<p>\$ _____</p>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>\$ _____</p>	<p>\$ _____</p>

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.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-28-24</u> Name & Address: ROBERT MELISSA MORRISON 6382 ROOK RD. PLAINWELL, MI 49080		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>POWER PLANT</u> Employer <u>CMS ENERGY</u> Business Address <u>6900 E. MICHIGAN. COMSTOCK, MI 49041</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-1-24</u> Name & Address: DAVID BUDD 6001 MARSH RD. SHELBYVILLE, MI 49344		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-4-24</u> Name & Address: DANIEL FLORES P.O. BOX 33 BRADLEY, MI 49311		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-5-24</u> Name & Address: ANGELA RIEDLE 624 E. NORTH ST. HASTINGS, MI 49058		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **234.23**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-7-24</u> Name & Address: LAUREL MILLER 2170 STARR SCHOOL RD. HASTINGS, MI 49058		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-7-24</u> Name & Address: JUDITH RISDON 15471 S M-43 HWY. HICKORY CORNERS, MI 49060		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-9-24</u> Name & Address: KATHY MUTSCHLER 7408 N CROOKED LAKE RD. DELTON, MI 49046		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: MARY BETH ADYNEIC 5607 SAGGIO RD. HASTINGS, MI 49058		500.00 \$ _____	500.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **682.18**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address:

**STEWART FRANK
3096 MCCANN RD.
MIDDLEVILLE, MI 49333**

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

[Click Here for Memo Itemization](#) ▼

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address

**MARY DETTMANN
3096 MCCANN RD.
MIDDLEVILLE, MI 49333**

40.00
\$ _____

94.64
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address:

**KIM WALTON
4303 E. CENTER RD.
HASTINGS, MI 49058**

45.00
\$ _____

45.00
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address

**JERRY WILSON
2772 MCCANN RD.
MIDDLEVILLE, MI 49333**

100.00
\$ _____

100.00
\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#) ▼

Page Subtotal **205.00**

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

Enter this total on
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: KAYLA HUVER 1211 N MICHIGAN AVE. HASTINGS, MI 49058		26.03 \$ _____	76.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: KIMBERLY DEMOTT 3615 MAPLE GROVE RD. HASTINGS, MI 49058		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-13-24</u> Name & Address: RONALD NEIL 3370 S M-43 HWY. HASTINGS, MI 49058		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-14-24</u> Name & Address: ROBERT MELISSA MORRISON 6382 ROOK RD. PLAINWELL, MI 49080		104.10 \$ _____	208.20 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>POWER PLANT</u> Employer <u>CMS ENERGY</u> Business Address <u>6900 E. MICHIGAN. COMSTOCK, MI 49041</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **208.21**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 6-17-24

Name & Address:

STEVEN GULCH
209 LEM PAUL ST
MIDDLEVILLE, MI 49333

26.03

\$ _____

26.03

\$ _____

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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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-18-24

Name & Address:

DALE KRUEGER IV
4166 COATS GROVE RD.
HASTINGS, MI 49058

10.41

\$ _____

10.41

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation FRONT DESK Employer HASTINGS CERC

Business Address 220 W. SOUTH ST. HASTINGS, MI 49058

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6-18-24

Name & Address:

PENNY BARNHARDT
20756 BAUMAN RD.
BATTLE CREEK, MI 49017

104.10

\$ _____

104.10

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation REAL ESTATE Employer SELF EMPLOYED

Business Address 20756 BAUMAN RD. BATTLE CREEK, MI 49017

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6-18-24

Name & Address:

MEGAN DAVIS
2255 PIFER RD.
DELTON, MI 49046

104.10

\$ _____

166.56

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation RETIRED Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal **244.64**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-20-24</u> Name & Address: JEFF STACER 215 GRAND RAPIDS ST. MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00 \$ _____	20.00 \$ _____ Click Here for Memo Itemization ▼
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-20-24</u> Name & Address: MAX ERSKINE 4133 MCKIBBEN RD. DELTON, MI 49046 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00 \$ _____	25.00 \$ _____ Click Here for Memo Itemization ▼
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-23-24</u> Name & Address: MJ HENNESSEY 11575 COBB RD. DELTON, MI 49046 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00 \$ _____	50.00 \$ _____ Click Here for Memo Itemization ▼
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-24-24</u> Name & Address: SARAH HALL 2171 WOODRUFF RD. HASTINGS, MI 49058 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	26.03 \$ _____	26.03 \$ _____ Click Here for Memo Itemization ▼

Page Subtotal **121.03**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt **6-25-24**

Name & Address:

**LARRY OSBORNE
6925 DONEGAL LN.
DELTON, MI 49046**

52.05

\$ _____

210.79

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt **6-25-24**

Name & Address

**MARY FLANNERY
458 EAGLE POINT DR.
LAKE ODESSA, MI 48849**

26.03

\$ _____

26.03

\$ _____

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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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt **6-27-24**

Name & Address:

**JASON WOOD
5514 W STATE RD.
MIDDLEVILLE, MI 49333**

26.03

\$ _____

26.03

\$ _____

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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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt **6-28-24**

Name & Address

**KEELY PEARCE
4682 ABRIGADOR TRAIL NE
GRAND RAPIDS, MI 49321**

26.03

\$ _____

26.03

\$ _____

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 Subtotal **130.14**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-2-24</u></p> <p>Name & Address: DEREK HUMPHREYS 14229 DOSTER RD. PLAINWELL, MI 49080</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>104.10 \$ _____</p>	<p>104.10 \$ _____</p> <p>Click Here for Memo Itemization ▼</p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-27-24</u></p> <p>Name & Address: BETH SMITH 10593 GREEN LK RD. MIDDLEVILLE, MI 49333</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>50.00 \$ _____</p>	<p>50.00 \$ _____</p> <p>Click Here for Memo Itemization ▼</p>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-27-24</u></p> <p>Name & Address: JEAN GEMRICH 2347 DOWLING RD. DELTON, MI 49046</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>400.00 \$ _____</p>	<p>400.00 \$ _____</p> <p>Click Here for Memo Itemization ▼</p>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-14-24</u></p> <p>Name & Address: DALE HOEKSTRA 1532 LIBERTY LN. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		<p>100.00 \$ _____</p>	<p>100.00 \$ _____</p> <p>Click Here for Memo Itemization ▼</p>

Page Subtotal **654.00**

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-28-24</u></p> <p>Name & Address: ROBERT MELISSA MORRISON 6382 ROOK RD. PLAINWELL, MI 49080</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>POWER PLANT</u> Employer <u>CMS ENERGY</u> Business Address <u>6900 E. MICHIGAN AVE. COMSTOCK, MI 49041</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		52.05 \$ _____	260.26 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-29-24</u></p> <p>Name & Address: GAIL HORSEFIELD 1647 PINEHILL DR. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	208.20 \$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-29-24</u></p> <p>Name & Address: MATTHEW CORNISH 5514 W STATE RD. MIDDLEVILLE, MI 49333</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>GENLSER</u> Business Address <u>5514 W STATE RD. MIDDLEVILLE, MI 49333</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	104.10 \$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-29-24</u></p> <p>Name & Address: ALLISON TROYER WISWELL 1010 W GREEN ST. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		41.64 \$ _____	41.64 \$ _____

Page Subtotal 301.89

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-30-24</u></p> <p>Name & Address: KAREN CULVER 969 E M-43 HWY. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	104.10 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-30-24</u></p> <p>Name & Address: LISA HALBERT 94 OSBORNE RD. DELTON, MI 49046</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		78.08 \$ _____	78.08 \$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-30-24</u></p> <p>Name & Address: PENNY BARNHARDT 20756 BAUMAN RD. BATTLE CREEK, MI 49017</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE</u> Employer <u>SELF EMPLOYED</u></p> <p>Business Address <u>20756 BAUMAN RD. BATTLE CREEK, MI 49017</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		104.10 \$ _____	208.20 \$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-2-24</u></p> <p>Name & Address: PAMELA ENGLERTH 395 MEADOW LN. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		250.00 \$ _____	250.00 \$ _____

Page Subtotal **536.28**

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-11-24</u> Name & Address: CHRISTINA BUSH 5500 CURTIS RD. NASHVILLE, MI 49073		50.00 \$ _____	50.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-4-24</u> Name & Address: DEAN HOLZHAUSEN 9257 W M-179 HWY. MIDDLEVILLE, MI 49333		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-8-24</u> Name & Address: CAROL MANTLE 1618 S BROADWAY RD. HASTINGS, MI 49058		26.03 \$ _____	26.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-10-24</u> Name & Address: LARRY OSBORNE 6925 DONEGAL LN. DELTON, MI 49046		104.10 \$ _____	314.89 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **205.13**

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: STEPHANIE HALBERT 20960 NE CAPITOL AVE. BATTLE CREEK, MI 49017		52.05 \$ _____	52.05 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: LAUREL MILLER P.O. BOX 3 HASTINGS, MI 49058		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-14-24</u> Name & Address: STEPHANIE LOFTUS 537 W GREEN ST HASTINGS, MI 49058		104.10 \$ _____	104.10 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-14-24</u> Name & Address: KIMBERLY DEMOTT 3615 MAPLE GROVE RD. HASTINGS, MI 49058		26.03 \$ _____	79.38 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **286.28**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-2-24

Name & Address:

BETH SMITH
10593 GREEN LK. RD.
MIDDLEVILLE, MI 49333

50.00

100.00

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation retired Employer _____

[Click Here for Memo Itemization](#) ▼

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#) ▼

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#) ▼

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#) ▼

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal **50.00**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: ELSPETH INGLIS 11084 GURD RD. DELTON, MI 49046		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: MARK MONSIGMORE 11084 GURD RD. DELTON, MI 49046		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: MARY HART 1204 S CHURCH ST. HASTINGS, MI 49058		20.00 \$ _____	20.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-12-24</u> Name & Address: KIMBERLY MORGAN 32183 28TH AVE. GOBLES, MI 49055		100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>BENTON HARBOR SCHOOL</u> Business Address <u>870 COLFAX AVE. BENTON HARBOR, MI 49022</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **170.00**

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

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line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-15-24</u> Name & Address: DEREK MCCLELLAND 3129 CHERRY VALLEY RD. MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	52.05 \$ _____	52.05 \$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-15-24</u> Name & Address: VICKIE EGGERS 437 N M-37 HWY. HASTINGS, MI 49058 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	104.10 \$ _____	104.10 \$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-19-24</u> Name & Address: JUDITH WILSON 2772 MCCANN RD. MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	260.25 \$ _____	396.85 \$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-19-24</u> Name & Address: DIANE HAMMOND 319 E GREEN ST. HASTINGS, MI 49058 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00 \$ _____	20.00 \$ _____ Click Here for Memo Itemization

Page Subtotal **436.40**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-24-24</u> Name & Address: DAVID SEIDL 1970 NASHVILLE RD. HASTINGS, MI 49058		54.64 \$ _____	54.64 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-25-24</u> Name & Address: COLE LEINAAR 7360 COX RD. BELLEVUE, MI 49021		85.16 \$ _____	85.16 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-28-24</u> Name & Address: JENNY PARKS 7475 DAVENPORT RD. WOODLAND, MI 48897		85.16 \$ _____	85.16 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-29-24</u> Name & Address: LARRY OSBORNE 6925 DONEGAL LN DELTON, MI 49046		54.64 \$ _____	158.74 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **279.60**

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

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line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-30-24</u> Name & Address: CARTER HEWITT 6231 MESSER RD. FREEPORT, MI 49325		112.48 \$ _____	112.48 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>LE</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-1-24</u> Name & Address: JUDITH WILSON 2772 MCCANN RD. MIDDLEVILLE, MI 49333		136.60 \$ _____	136.60 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-1-24</u> Name & Address: KATHY FORSYTH 10955 BOULTER RD. DELTON, MI 49046		54.64 \$ _____	106.69 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-2-24</u> Name & Address: ALIZAH BLUNDELL 575 PRARIE CREEK RD. IONIA, MI 48846		85.16 \$ _____	365.41 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **388.88**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-29-24</u> Name & Address: MICHAEL MILWARD 1504 CAPE RACHELLE DR. BYRON CENTER, MI 49315 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	85.16 \$ _____	85.16 \$ _____ Click Here for Memo Itemization ▼
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-29-24</u> Name & Address: BRYAN FULLER 4474 PAUVERY DR. MIDDLEVILLE, MI 49333 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	85.16 \$ _____	85.16 \$ _____ Click Here for Memo Itemization ▼
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-29-24</u> Name & Address: LOUIS SICILIA 1564 CAPE RACHELLE DR. BYRON CENTER, MI 49315 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	85.16 \$ _____	85.16 \$ _____ Click Here for Memo Itemization ▼
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-30-24</u> Name & Address: MELISSA MORGAN 1818 WOODRUFF RD. HASTINGS, MI 49058 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	88.25 \$ _____	88.25 \$ _____ Click Here for Memo Itemization ▼

Page Subtotal **343.73**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-8-24</u></p> <p>Name & Address: DANIEL GARVIN 6191 S M-37 HWY. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>CORRECTIONS</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>85.16 \$ _____</p>	<p>137.21 \$ _____</p>
		<p>Click Here for Memo Itemization ▼</p>	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-11-24</u></p> <p>Name & Address: HOWARD JAMES 313 MEADOW LN. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>27.32 \$ _____</p>	<p>27.32 \$ _____</p>
		<p>Click Here for Memo Itemization ▼</p>	
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-11-24</u></p> <p>Name & Address: JOYCE JAMES 313 MEADOW LN. HASTINGS, MI 49058</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>27.32 \$ _____</p>	<p>27.32 \$ _____</p>
		<p>Click Here for Memo Itemization ▼</p>	
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-11-24</u></p> <p>Name & Address: MARY DETTMAN 3096 MCCANN RD. MIDDLEVILLE, MI 49333</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		<p>54.64 \$ _____</p>	<p>54.64 \$ _____</p>
		<p>Click Here for Memo Itemization ▼</p>	

Page Subtotal **194.44**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: JOE PLUNKETT 12189 BEAUTERRA RD. HASTINGS, MI 49058		66.19 \$ _____	66.19 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: TONY SEWELL 6400 HAMMOND RD. FREEPORT, MI 49325		50.00 \$ _____	70.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: BRIAN DEVRIES 4529 E M79 HWY. NASHVILLE, MI 49073		27.32 \$ _____	81.96 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: HOWARD JAMES 313 MEADOW LN. HASTINGS, MI 49058		20.00 \$ _____	47.32 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **163.51**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: KELLIE SMITH 6800 BROWN RD. LAKE ODESSA, MI 48849		100.00 \$ _____	823.03 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>CORRECTIONS</u> Employer <u>BCSO</u> Business Address <u>1212 W STATE ST. HASTINGS, MI 49058</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: WILLIAM BRYANS 96 CULBERT DR. HASTINGS, MI 49058		25.00 \$ _____	25.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: AMBER JONSENS 608 INDIAN HILLS HASTINGS, MI 49058		20.00 \$ _____	20.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: TRACY KELLER-BENNETT 2139 IROQUOIS TRL. HASTINGS, MI 49058		40.00 \$ _____	94.64 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **185.00**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: DEBRA SMITH 864 BEECH ST. LAKE ODESSA, MI 48849		50.00 \$ _____	70.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: DANIELLE SPENCER 35885 WILLOW RD. NEW BOSTON, MI 48164		75.00 \$ _____	95.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>FACTORY</u> Employer <u>MILLER TECH SERVICES</u> Business Address <u>47801 W ANCHOR CT. PLYMOUTH, MI 48170</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: BRYAN FULLER 4474 PAUVERY DR. MIDDLEVILLE, MI 49333		100.00 \$ _____	185.16 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>LE</u> Employer <u>MSP</u> Business Address <u>544 N MAIN ST. WAYLAND, MI 49348</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: THOMAS MOHLER 1325 OTTAWA TRAIL HASTINGS, MI 49058		70.00 \$ _____	70.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **295.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address:

**TRACEY KELLER-BENNETT
2139 IROQUOIS TRAIL
HASTINGS, MI 49058**

54.64

\$ _____

54.64

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address

**BRIAN DEVRIES
4529 E M79 HWY
NASHVILLE, MI 49073**

27.32

\$ _____

54.64

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization](#) ▼

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address:

**AUDREY SPENCER-HAIGHT
5947 E STATE RD.
HASTINGS, MI 49058**

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

[Click Here for Memo Itemization](#) ▼

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt **6-12-24**

Name & Address

**TONY COUGHLIN
1905 RIVER RD.
HASTINGS, MI 49058**

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

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Page Subtotal **211.96**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: KIMBERLY DEMOTT 3615 MAPLE GROVE RD. HASTINGS, MI 49058		27.32 \$ _____	53.35 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: ROBERTA TAFFEE 5633 THORNAPPLE LK RD. NASHVILLE, MI 49073		27.32 \$ _____	27.32 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: BRIAN DEVRIES 4529 E M79 HWY. NASHVILLE, MI 49073		27.32 \$ _____	27.32 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6-12-24</u> Name & Address: CARL OLSON 8931 M-37 HWY. DOWLING, MI 49050		85.16 \$ _____	85.16 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **167.12**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-20-24</u></p> <p>Name & Address: ANGELA SPENCER 489 JAMES ST. HOLLAND, MI 49424</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		10.00 \$ _____	10.00 \$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____

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Page Subtotal **10.00**

Grand Total of All Schedules 1A
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ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: BARRY COUNTY AG SOCIETY 1350 N M-37 HWY. HASTINGS, MI 49058	Date of Receipt <u>6-17-24</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ <u>250.00</u>
	<input checked="" type="checkbox"/> Fund Raiser		
Receipt #2 Name & Address: GORDON FOOD SERVICE 30 E COLUMBIA AVE. STE.B BATTLE CREEK, MI 49015	Date of Receipt <u>6-14-24</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input checked="" type="checkbox"/> Other (Specify) <u>RETURN</u>	\$ <u>61.40</u>
	<input checked="" type="checkbox"/> Fund Raiser		
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
	<input type="checkbox"/> Fund Raiser		
Page Subtotal			311.40
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			311.40

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name BARRY COUNTY AG SOCIETY Address 1350 M-37 HWY. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: BARRY CO FAIR <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-21-24 Date	\$ 200.00
Expenditure #2 Name BARRY EXPO COMPLEX Address 1350 M-37 HWY. HASTINGS, MI 49058 <input checked="" type="checkbox"/> Fund Raiser	Purpose: DEPOSIT FUND. <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-21-24 Date	\$ 250.00
Expenditure #3 Name BARRY EXPO COMPLEX Address 1350 M-37 HWY. HASTINGS, MI 49058 <input checked="" type="checkbox"/> Fund Raiser	Purpose: JUNE 12 FUND <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-21-24 Date	\$ 510.00
Expenditure #4 Name J-AD GRAPHICS Address 1351 NORTH M-43 HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: ADVERTISEMENT <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-17-24 Date	\$ 625.20
Expenditure #5 Name WRISTBAND BROS Address 1005 MAIN ST #8130 PAWTUCKET, RI 02860 <input type="checkbox"/> Fund Raiser	Purpose: WRISTBAND ADS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-22-24 Date	\$ 340.00
Subtotal this page			1925.20
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name NEXT STRATEGIES LLC Address 1362 ROCHESTER RD. LEONARD, MI 48367 <input type="checkbox"/> Fund Raiser	Purpose: WEBSITE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	4-5-24 Date	\$ 500.00 Click Here for Memo Itemization Type
Expenditure #2 Name AWESOME CAMPAIGNS INC. Address 1220 ST. CHARLES ST ELGIN, IL 60120 <input type="checkbox"/> Fund Raiser	Purpose: LARGE SIGNS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-31-24 Date	\$ 3120.00 Click Here for Memo Itemization Type
Expenditure #3 Name WIN RED Address 1776 WILSON BLVD. STE. 530 ARLINGTON, VA 22209 <input type="checkbox"/> Fund Raiser	Purpose: REFUND CONTRIBUTION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-27-24 Date	\$208.20 Click Here for Memo Itemization Type
Expenditure #4 Name ALLISON DEVRIES/GREY CASTLE Address ALLISON@GREYCASTLEDIGITAL <input type="checkbox"/> Fund Raiser	Purpose: SOCIAL MEDIA/ADVERTISEMENT <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-15-24 Date	\$ 1350.00 Click Here for Memo Itemization Type
Expenditure #5 Name MENARDS Address MENARDS.COM <input type="checkbox"/> Fund Raiser	Purpose: SIGN HARDWARE/INSTALL <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-14-24 Date	\$263.94 Click Here for Memo Itemization Type
Subtotal this page			5442.14
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MENARDS Address 12765 HARPER VILLAGE DR. STE.200 BATTLE CREEK, MI 49017 <input type="checkbox"/> Fund Raiser	Purpose: SIGN HARDWARE/INSTALL <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-14-24 Date	\$ 76.08
Expenditure #2 Name HOBBY LOBBY Address 6295 S WESTNEDGE AVE PORTAGE, MI 49002 <input checked="" type="checkbox"/> Fund Raiser	Purpose: TABLE SETTING/DECOR <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-11-24 Date	\$ 146.53
Expenditure #3 Name BELLS GENERAL STORE Address 355 E. KALAMAZOO AVE. KALAMAZOO, MI 49007 <input checked="" type="checkbox"/> Fund Raiser	Purpose: BEVERAGE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-11-24 Date	\$ 183.70
Expenditure #4 Name GOLDSWORTHYS Address 4554 W HICKORY RD. HICKORY CORNERS, MI 49060 <input checked="" type="checkbox"/> Fund Raiser	Purpose: ICE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-12-24 Date	\$ 18.00
Expenditure #5 Name GORDON FOOD SERVICE Address 30 E COLUMBIA AVE SUITE B BATTLE CREEK, MI 49015 <input checked="" type="checkbox"/> Fund Raiser	Purpose: FOOD,DRINK, TABLE SETTINGS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-11-24 Date	\$ 305.01
Subtotal this page			729.32
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name BARRY EXPO COMPLEX Address 1350 M-37 HWY. HASTINGS, MI 49058 <input checked="" type="checkbox"/> Fund Raiser	Purpose: VENUE INSURANCE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-12-24 Date	\$ 122.00 Click Here for Memo Itemization Type
Expenditure #2 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142 <input type="checkbox"/> Fund Raiser	Purpose: ADVERTISEMENT MATERIALS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-3-24 Date	\$ 136.37 Click Here for Memo Itemization Type
Expenditure #3 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142 <input type="checkbox"/> Fund Raiser	Purpose: BANNERS FOR EVENTS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-4-24 Date	\$260.14 Click Here for Memo Itemization Type
Expenditure #4 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142 <input type="checkbox"/> Fund Raiser	Purpose: BANNERS FOR EVENTS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-2-24 Date	\$ 100.32 Click Here for Memo Itemization Type
Expenditure #5 Name CAMPAIGN VERIFY INC. Address 1215 31ST ST. NW P.O. BOX 3554 WASHINGTON D.C. 20007 <input type="checkbox"/> Fund Raiser	Purpose: TEXT CAMPAIGN <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-26-24 Date	\$95.00 Click Here for Memo Itemization Type
Subtotal this page			713.83
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name HEIDI SEWELL Address 6400 HAMMOND RD. FREEPORT, MI <input type="checkbox"/> Fund Raiser	Purpose: REPAY IN KIND P.O. BOX <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Memo Itemization Below P.O. Box Purchase USPS Hastings 209 W Mill St. Hastings, MI	4-9-24 Date	\$ 51.00
Expenditure #2 Name ROGER THE PIG ROASTER/ROGER PIERCE Address 8639 ELDORA DR. BYRON CENTER, MI 49315 <input checked="" type="checkbox"/> Fund Raiser	Purpose: PIG ROAST/CATERING <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6-17-24 Date	\$ 1862.00
Expenditure #3 Name KATE PHILLIPS Address KHENSLEY4858@YAHOO.COM 269-838-9119 <input checked="" type="checkbox"/> Fund Raiser	Purpose: DRINK SERVICE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6-12-24 Date	\$ 400.00
Expenditure #4 Name SHELL Address 135 E GREEN ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: FUEL FOR DELIVERING SIGNS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6-29-24 Date	\$ 113.61
Expenditure #5 Name SHELL Address 135 E GREEN ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: FUEL FOR DELIVERING SIGNS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6-26-24 Date	\$ 110.76
Subtotal this page			2537.37
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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Summary Page

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SPEEDWAY Address 7051 SADDLEBAG LAKE RD. WOODLAND, MI 48849 <input type="checkbox"/> Fund Raiser	Purpose: FUEL FOR DELIVERING SIGNS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-22-24 Date	\$ 107.02
Expenditure #2 Name TICKETLEAP Address 1700 SANSOM ST. STE.6 PHILADELPHIA, PA 19103 <input checked="" type="checkbox"/> Fund Raiser	Purpose: SERVICE CHARGE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-20-24 Date	\$ 134.64
Expenditure #3 Name U-HAUL Address 1478 W MICHIGAN AVE. BATTLE CREEK, MI 49037 <input type="checkbox"/> Fund Raiser	Purpose: SIGN TRANSPORT <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-15-24 Date	\$ 120.68
Expenditure #4 Name STATE OF MICHIGAN LIQUOR Address 7150 HARRIS DR. LANSING, MI 48906 <input checked="" type="checkbox"/> Fund Raiser	Purpose: LIQUOR LICENSE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-12-24 Date	\$ 25.00
Expenditure #5 Name U-HAUL Address 701 68TH ST SW BYRON CENTER, MI 49315 <input type="checkbox"/> Fund Raiser	Purpose: SIGN TRANSPORT <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-8-24 Date	\$ 120.68
Subtotal this page			508.02
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name U-HAUL Address 701 68TH ST SW BYRON CENTER, MI 49315 <input type="checkbox"/> Fund Raiser	Purpose: SIGN TRANSPORT <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-6-24 Date	\$ 47.60 Click Here for Memo Itemization Type
Expenditure #2 Name MID LAKES PRINTING Address 121 E ORCHARD P.O. BOX 407 DELTON, MI 49046 <input type="checkbox"/> Fund Raiser	Purpose: SHIRTS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	5-22-24 Date	\$ 704.90 Click Here for Memo Itemization Type
Expenditure #3 Name HASTINGS REMINDER Address 1351 N M-43 HWY. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: PIG ROAST AD <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6-6-24 Date	\$ 459.00 Click Here for Memo Itemization Type
Expenditure #4 Name BARRY COUNT FAIR Address 1350 N M-37 HWY HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser	Purpose: CAMPSITE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7-12-24 Date	\$ 220.00 Click Here for Memo Itemization Type
Expenditure #5 Name FACEBOOK Address 1 HACKER WAY MENLO PARK, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: ADVERTISING <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7-20-24 Date	\$ 492.50 Click Here for Memo Itemization Type
Subtotal this page			1924.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

13942

1. Committee I. D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name WINRED Address 1776 WILSON BLVD. STE. 530 ARLINGTON, VA22209 <input type="checkbox"/> Fund Raiser	Purpose: SERVICE FEE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7-20-24 Date	\$ 256.06
Expenditure #2 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Subtotal this page			256.06
Grand Total of all Schedules 1B (Complete on last page of Schedule)			14,035.94

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

13942

1. Committee I.D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	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 Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>1-3-23</u> 6. <u>Original Amount of Debt:</u> \$ <u>2835.37</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>2835.37</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>1-3-23</u> 6. <u>Original Amount of Debt:</u> \$ <u>1849.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>1849.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>1-3-23</u> 6. <u>Original Amount of Debt:</u> \$ <u>419.74</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>419.74</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

5104.11

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	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 Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>4-18-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>3684.60</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>3684.60</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>4-19-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>232.26</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>232.26</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>4-25-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>100.90</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>100.90</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

4017.76

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

13942

1. Committee I.D. Number

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	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 Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: IN KIND LOAN 5. <u>Date Debt Was Incurred:</u> 5-2-24 6. <u>Original Amount of Debt:</u> \$ 188.02	\$ \$ \$ \$ \$	\$ 0	\$ 188.02 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: IN KIND LOAN 5. <u>Date Debt Was Incurred:</u> 5-16-24 6. <u>Original Amount of Debt:</u> \$ 112.96	\$ \$ \$ \$ \$	\$ 0	\$ 112.96 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: IN KIND LOAN 5. <u>Date Debt Was Incurred:</u> 5-28-24 6. <u>Original Amount of Debt:</u> \$ 205.22	\$ \$ \$ \$ \$	\$ 0	\$ 205.22 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

506.20

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 13942
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

This Schedule itemizes:

a ☐ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	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 Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>5-29-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>254.29</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>254.29</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>6-4-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>128.26</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>128.26</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: <u>IN KIND LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>6-12-24</u> 6. <u>Original Amount of Debt:</u> \$ <u>290.74</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>290.74</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

673.29

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

13942

1. Committee I.D. Number _____
CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF
2. Committee Name _____

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. 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 incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	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 Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	4. Type: IN KIND LOAN 5. <u>Date Debt Was Incurred:</u> 6-14-24 6. <u>Original Amount of Debt:</u> \$ 142.22	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 142.22 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: JULIE B LARSON 808 S DEXTER DR. LANSING, MI 48910	4. Type: LOAN 5. <u>Date Debt Was Incurred:</u> 6-4-24 6. <u>Original Amount of Debt:</u> \$ 1250.00	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 1250.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1392.22

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

11,639.58

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

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.



13942

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 6-12-24	4. Number of Individuals Attending or Participating (whichever is greater) 80	5. Type of Fund Raising Activity PIG ROAST/CORN HOLE	6. Address and Name (If any) of the place where the activity was held. BARRY EXPO 1350 N M-37 <input type="checkbox"/> Private Residence
---------------------------------------	--	---	--

2734.24

7. Total Contributions

311.40

8. Other Receipts

3045.64

9. Gross Receipts (Add lines 7 and 8)

3956.88

10. Total Cost of Event

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

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

Co-Sponsor(s)	Contribution Split (%)	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.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Business Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description YARD SIGNS 5. Date Of Receipt: 4-18-24 6. Vendor Name & Address: AWESOME CAMPAIGNS.COM INC 1220 ST. CHARLES ST. ELGIN, IL 60120 Click Here for Memo Itemization	3684.60	9452.53
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: HEIDI SEWELL 6400 HAMMOND RD. FREESPORT, MI If over \$100.00 cumulative, please provide: Occupation: CORRECTIONS Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description P.O. BOX 5. Date Of Receipt: 3-26-24 6. Vendor Name & Address: USPS HASTINGS 209 W MILL ST. HASTINGS, MI 49058 Click Here for Memo Itemization	\$ 51.00	\$ 221.04
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description FLAGS FOR PARADE/EVENTS 5. Date Of Receipt: 5-16-24 6. Vendor Name & Address: GRACE ALLEY 5595 SCHENCK AVE. ROCKLEDGE, FL 32955 Click Here for Memo Itemization	112.96	10086.67

Page Subtotal **3848.56**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **13942**

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name _____

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Business Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description LARGE SIGN PICK UP AND TRANSPORT 5. Date Of Receipt: 6-4-24 6. Vendor Name & Address: BUDGET RENT A CAR 5500 44TH ST SE UNIT 9 GRAND RAPIDS, MI 49512 Click Here for Memo Itemization	\$ 128.26	\$ 10,684.29
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description REGULAR SIGN PICK UP AND TRANSPORT 5. Date Of Receipt: 4-19-24 6. Vendor Name & Address: DOLLAR RENT A CAR P.O. BOX 35250 TULSA, OK 74153 Click Here for Memo Itemization	\$ 232.26	\$ 9,684.79
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description EVENT SUPPLIES 5. Date Of Receipt: 5-2-24 6. Vendor Name & Address: SAMS CLUB 4326 28TH ST SE KENTWOOD, MI 49512 Click Here for Memo Itemization	\$ 188.02	\$ 9,973.71

Page Subtotal **548.54**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

13942

1. Committee I. D. Number

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Business Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description POSTAGE FOR LARA LICENSE 5. Date Of Receipt: 5-31-24 6. Vendor Name & Address: USPS 90 MCCAMLY ST. BATTLE CREEK, MI 49016 Click Here for Memo Itemization	\$ 9.85	\$ 10,556.03
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description PR EVENT/ADVERTISEMENT 5. Date Of Receipt: 5-29-24 6. Vendor Name & Address: SALVINOS 700 W SUPERIOR ST. WAYLAND, MI 49348 Click Here for Memo Itemization	\$ 254.29	\$ 10,546.18
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description ICE/DRINKS FOR PARADE 5. Date Of Receipt: 4-25-24 6. Vendor Name & Address: SAMS CLUB 12737 6 MILE RD. BATTLE CREEK, MI 49014 Click Here for Memo Itemization	\$ 100.90	\$ 9785.69

Page Subtotal **365.04**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

CANDIDATE COMMITTEE

2. Committee Name _____

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: DEPUTY Employer Name & Business Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description DOOR PRIZES 5. Date Of Receipt: 5-28-24 6. Vendor Name & Address: CHOW HOUND 6749 S WESTNAGE AVE. PORTAGE, MI 49002 Click Here for Memo Itemization	205.22	10,291.89
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description DOOR PRIZES 5. Date Of Receipt: 6-12-24 6. Vendor Name & Address: SAMS CLUB 4326 28TH ST. SE KENTWOOD, MI 49512 Click Here for Memo Itemization	290.74	10,975.03
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description CAMPAIGN SIGN HARDWARE/INSTALL 5. Date Of Receipt: 6-14-24 6. Vendor Name & Address: MENARDS 5300 GULL RD. KALAMAZOO, MI 49048 Click Here for Memo Itemization	142.22	11,117.25

Page Subtotal **638.18**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **5,400.32**

Enter this total
on line 6 of Summary
Page