



**CANDIDATE COMMITTEE
COVER PAGE**

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

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		
2. Committee Name CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF		4a. Office Sought Including District # or Community Served (If applicable) Sheriff		
5. Committee's Mailing Address 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017		4b. County of Residence BARRY		
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		
7. Treasurer's Business Address		7. Area Code & Phone <u>616-302-0373</u>		
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 <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		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly		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 late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Date of Election, Convention or Caucus <u>8-6-2024</u>		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.)		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 <input type="checkbox"/> Jerry Smith Type or Print Name		Signature <u>Jerry Smith</u> Date <u>7-24-24</u>		
Candidate <u>Richelle Spencer</u> Type or Print Name		Signature <u>Richelle Spencer</u> Date <u>07/24/24</u>		

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 k

Type or Print Name

Signature

• Date

7-24-24

Candidates

Richelle Spencer

1000

Date:

07/24/24

Authority granted under P.A. 388 of 1976

III 2524 3135PM

BARRY COUNTY
CLERK FILED



**SUMMARY PAGE
CANDIDATE COMMITTEE**

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

13942

1. Committee I.D. Number

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.

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

Name & Address:

RICHELLE SPENCER

1150 SHEFFIELD RD

BATTLE CREEK, MI 49017

6. Amount

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

10.00

5663.83

\$ _____

\$ _____

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

Occupation **DEPUTY** Employer **BCSO**

[Click Here for Memo Itemization](#)

Business Address **1212 W STATE ST. HASTINGS, MI**

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

LARRY OSBORNE

6925 DONEGAL LN

DELTON, MI 49046

104.10

104.10

\$ _____

\$ _____

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

Name & Address:

JILL STEELE

4153 S SHORE DR.

DELTON, MI 49046

52.05

52.05

\$ _____

\$ _____

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

Occupation **CITY ATTORNEY** 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 4-4-24

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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 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 4-4-24

Name & Address:

JACKIE SCHMITZ

7584 BOWENS MILL RD.
MIDDLEVILLE, MI 49333

26.03

26.03

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

STEPHANIE CLARK

1164 STAGECOACH DR
BYRON CENTER, MI 49315

26.03

26.03

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

MORGANNE HUBBELL

1101 PINE AVE
GRAND RAPIDS, MI 49504

52.05

72.05

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

ANGIE BERDECIA

10636 HASTINGS RD
CLARKSVILLE, MI 48815

20.82

20.82

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

124.93

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
CAMPAGN 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.

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

Name & Address:

LUCAS MORAN

7383 NORTH 35TH ST.
RICHLAND, MI 49083

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

10.41 10.41
\$ _____ \$ _____

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 #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 _____

[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 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 _____

[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 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**

[Click Here for Memo Itemization](#)

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

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 270.66

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.

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 _____

[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 **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**

[Click Here for Memo Itemization](#)

Business Address **1212 W STATE ST. HASTINGS, MI 49058**

Type of Contribution: Direct Loan from a person Fund Raiser

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**

[Click Here for Memo Itemization](#)

Business Address **341 S JEFFERSON ST. MASON, MI 48854**

Type of Contribution: Direct Loan from a person Fund Raiser

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

1. Committee I.D. Number

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 4-25-24

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**

[Click Here for Memo Itemization](#)

Business Address **820 W MADISON ST. HASTINGS, MI 49058**

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? 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 _____

[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 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 _____

[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 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**

[Click Here for Memo Itemization](#)

Business Address **7575 FULTON ST. ADA, MI 49355**

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

318.61

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

13942

1. Committee I.D. Number

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5-2-24

Name & Address:

LINDSEY AUSTIN
8075 W IRVING RD
MIDDLEVILLE, MI 49333

6. Amount
7. Cumulative for
Elect Cycle for Each
Contributor (Through
date of receipt)

52.05 52.05
\$ \$

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 #2 PAC Receipt? YES 4. Date of Receipt 5-3-24

Name & Address:

LARRY BENNETT
2139 IROQUOIS TRL.
HASTINGS, MI 49058

104.10 104.10
\$ \$

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

Occupation TREE REMOVAL Employer SELF

[Click Here for Memo Itemization](#)

Business Address 2139 IROQUOIS TRL. HASTINGS, MI 49058

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

MEGAN DAVIS
2255 PIFER RD.
DELTON, MI 49046

52.05 62.46
\$ \$

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 4-3-24

Name & Address:

RICHELLE SPENCER
1150 SHEFFIELD RD.
BATTLE CREEK, MI 49017

104.10 5767.93
\$ \$

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

Occupation DEPUTY Employer BCSO

[Click Here for Memo Itemization](#)

Business Address 1212 W STATE ST. HASTINGS, MI 49058

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

1. Committee I.D. Number

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 5-5-24

Name & Address:

JACKIE L SCHMITZ

7584 BOWENS MILL RD.
MIDDLEVILLE, MI 49333

25.00

51.03

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5-7-24

Name & Address:

LINDA LOVCHUK

118 ELSINORE LN
BATTLE CREEK, MI 49015

1250.00

1250.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5-2-24

Name & Address:

CHRISTAL LUKASICWICZ

335 W MARSHALL ST.
HASTINGS, MI 49058

50.00

50.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5-2-24

Name & Address:

DONDEANA HAMMOND

13557 BANFIELD RD
BATTLE CREEK, MI 49017

100.00

100.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation **RETIRED** Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

1. Committee I.D. Number

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)
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 4-30-24

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 _____

[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 4-30-24

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 _____

[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 4-30-24

Name & Address:

LARRY MENNETT

2139 IROQUIOS TRL.

HASTINGS, MI 49058

104.10 208.20
\$ \$

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

Occupation **TREE REMOVAL** Employer **SELF**

[Click Here for Memo Itemization](#)

Business Address **2139 IROQUIOS TRL. HASTINGS, MI 49058**

Type of Contribution: Direct Loan from a person Fund Raiser

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

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 **LANDSCAPER** Employer **GULL LAKE LANDSCAPE CO**

[Click Here for Memo Itemization](#)

Business Address **13156 EAST C AVE. HICKORY CORNERS, MI 49060**

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

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 5-2-24

Name & Address:

SUE MCCARTHY

13620 S JONES RD
BATTLE CREEK, MI 49017

100.00 100.00
\$ _____ \$ _____

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

Occupation **ADMINISTRATION** Employer **MSP**

[Click Here for Memo Itemization](#)

Business Address P.O. BOX 2600. BATTLE CREEK, MI 49014

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4-16-24

Name & Address:

SHANE MCNEIL

700 CASS ST.
HASTINGS, MI 49058

500.00 640.00
\$ _____ \$ _____

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

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

[Click Here for Memo Itemization](#)

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

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

SHIRLEY V BARNUM

4157 COATS GROVE RD.
HASTINGS, MI 49058

500.00 500.00
\$ _____ \$ _____

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 #4 PAC Receipt? YES 4. Date of Receipt 5-20-24

Name & Address:

JILL HEWITT

4317 TILLOTSON LAKE RD.
HASTINGS, MI 49058

200.00 200.00
\$ _____ \$ _____

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

Occupation **HOMEMAKER** Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

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.		1. Committee I.D. Number CAMPAIN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF	13942	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	5-7-24		
Name & Address: STARIA SCOTT 12962 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: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5-7-24		
Name & Address: WILLIAM GREGOR 2246 STANTON DR. MIDDLEVILLE, MI 49333				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					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5-7-24		
Name & Address: NIALLA ABBOTT 1320 S HANOVER ST. HASTINGS, MI 49058				100.00	100.00
5. If over \$100.00 cumulative, please provide:					
Occupation MAIL CARRIER		Employer USPS			
Business Address 209 W MILL ST. HASTINGS, MI 49058					
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	5-8-24		
Name & Address: GAIL HORSEFIELD 1647 PINEHILL DR. 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					

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**

13942

1. Committee I.D. Number

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 5-8-24		
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				
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 5-10-25		
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				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 5-13-24		
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				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 5-14-24		
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				

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**

13942

1. Committee I.D. Number

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				
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				
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				
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				

Page Subtotal

191.56

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

13942

1. Committee I.D. Number

CAMPAGN 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.

3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5-21-24

Name & Address:

MARK FELDPAUSCH
611 HARRINGTON RD.
DELTON, MI 49046

6. Amount

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

500.00 500.00
\$ _____ \$ _____

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

Occupation RETIRED Employer _____

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Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

JULIE B LARSON
808 S DEXTER DR.
LANSING, MI 48910

1250.00 1250.00
\$ _____ \$ _____

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

Occupation WORKERS COMP Employer AF GROUP

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Business Address 200 N GRAND AVE. LANSING, MI 48933

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

MICHAEL FITZGERALD
111314 VILLAGE RD.
CHASKA, MN 55318

125.00 125.00
\$ _____ \$ _____

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

Occupation RETIRED 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 6-4-24

Name & Address:

JUDITH PAWLOSKI
2707 TOWNER BLVD.
ANN ARBOR, MI 48104

25.00 25.00
\$ _____ \$ _____

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 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**

13942

1. Committee I.D. Number

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 MAINTENCE

[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

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

Click Here for Memo Itemization

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address

Click Here for Memo Itemization

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 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
CAMPAIN 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>6-4-24</u>		
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 <u>RETIRED</u> Employer _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-4-24</u>		
Name & Address: BRIAN REYNOLDS 111 W. MARSHALL ST. HASTINGS, MI 49058			100.00	100.00
			\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-11-24</u>		
Name & Address: SHANE MCNEIL 700 S. CASS ST. HASTINGS, MI 49058			500.00	1140.00
			\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u>				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
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				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4-3-24</u>		
Name & Address: JEANNE SWANDER 1513 WEST MAIN ST. KALAMAZOO, MI 49006			50.00	50.00
			\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

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
CAMPAGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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.

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

Name & Address:

DAWN KELLER

115 PENNY AVE.

HASTINGS, MI 49058

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

100.00 100.00
\$ _____ \$ _____

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 6-12-24

Name & Address:

RONALD IVEY

120 CASTLE RIDGE DR.

BATTLE CREEK, MI 49015

200.00 200.00
\$ _____ \$ _____

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

Occupation DEAN Employer KCC

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Business Address 450 NORTH AVE. BATTLE CREEK, MI 49017

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization](#)

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

1. Committee I.D. Number

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? YES 4. Date of Receipt 5-28-24

Name & Address:

ROBERT MELISSA MORRISON

6382 ROOK RD.

PLAINWELL, MI 49080

104.10 104.10
\$ \$

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

Occupation POWER PLANT Employer CMS ENERGY

[Click Here for Memo Itemization](#)

Business Address 6900 E. MICHIGAN. COMSTOCK, MI 49041

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-1-24

Name & Address:

DAVID BUDD

6001 MARSH RD.

SHELBYVILLE, MI 49344

52.05 52.05
\$ \$

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 6-4-24

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 _____

[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 6-5-24

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

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 6-7-24

Name & Address:

LAUREL MILLER

2170 STARR SCHOOL RD.
HASTINGS, MI 49058

104.10

104.10

\$ _____

\$ _____

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 6-7-24

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: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6-9-24

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: Direct Loan from a person Fund Raiser

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

Name & Address:

MARY BETH ADYNIEC

5607 SAGGIO RD.
HASTINGS, MI 49058

500.00

500.00

\$ _____

\$ _____

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

Page Subtotal

682.18

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
CAMPAIN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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: STEWART FRANK 3096 MCCANN RD. MIDDLEVILLE, MI 49333		20.00	20.00
\$ _____ \$ _____			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-12-24</u>	
Name & Address: MARY DETTMANN 3096 MCCANN RD. MIDDLEVILLE, MI 49333		40.00	94.64
\$ _____ \$ _____			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-12-24</u>	
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 _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-12-24</u>	
Name & Address: JERRY WILSON 2772 MCCANN RD. MIDDLEVILLE, MI 49333		100.00	100.00
\$ _____ \$ _____			
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 205.00

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**

13942

1. Committee I.D. Number

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 6-12-24	
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			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 6-12-24	
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			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 6-13-24	
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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt 6-14-24	
Name & Address: ROBERT MELISSA MORRISON 6382 ROOK RD. PLAINWELL, MI 49080		104.10	208.20
5. If over \$100.00 cumulative, please provide: Occupation POWER PLANT Employer CMS ENERGY			
Business Address 6900 E. MICHIGAN. COMSTOCK, MI 49041			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

208.21

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
CAMPAGN 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>6-17-24</u>		
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 _____ Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-18-24</u>		
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 Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address <u>220 W. SOUTH 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				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-18-24</u>		
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 Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address <u>20756 BAUMAN RD. BATTLE CREEK, MI 49017</u>				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-18-24</u>		
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 _____ Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
Page Subtotal <u>244.64</u>				
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**

13942

1. Committee I.D. Number _____

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 6-20-24

Name & Address:

JEFF STACER

215 GRAND RAPIDS ST.
MIDDLEVILLE, MI 49333

20.00

20.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-20-24

Name & Address:

MAX ERSKINE

4133 MCKIBBEN RD.
DELTON, MI 49046

25.00

25.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6-23-24

Name & Address:

MJ HENNESSEY

11575 COBB RD.
DELTON, MI 49046

50.00

50.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

SARAH HALL

2171 WOODRUFF RD.
HASTINGS, MI 49058

26.03

26.03

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

121.03

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**

13942

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>6-25-24</u>		
Name & Address: LARRY OSBORNE 6925 DONEGAL LN. DELTON, MI 49046			52.05	210.79
			\$	\$
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-25-24</u>		
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 _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-27-24</u>		
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 _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-28-24</u>		
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 _____				
Click Here for Memo Itemization <input checked="" type="checkbox"/>				
Business Address _____				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser				

Page Subtotal 130.14

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
CAMPAIN 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>7-2-24</u>	
Name & Address: DEREK HUMPHREYS 14229 DOSTER RD. PLAINWELL, MI 49080		104.10	104.10
		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:			
Occupation <u>RETIRED</u>		Employer _____	
Click Here for Memo Itemization			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-27-24</u>	
Name & Address: BETH SMITH 10593 GREEN LK RD. MIDDLEVILLE, MI 49333		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			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-27-24</u>	
Name & Address: JEAN GEMRICH 2347 DOWLING RD. DELTON, MI 49046		400.00	400.00
		\$ _____	\$ _____
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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-14-24</u>	
Name & Address: DALE HOEKSTRA 1532 LIBERTY LN. HASTINGS, MI 49058		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			

Page Subtotal 654.00
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

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 6-28-24

Name & Address:

ROBERT MELISSA MORRISON

6382 ROOK RD.

PLAINWELL, MI 49080

52.05

260.26

\$

\$

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

Occupation **POWER PLANT** Employer **CMS ENERGY**

[Click Here for Memo Itemization](#)

Business Address **6900 E. MICHIGAN AVE. COMSTOCK, MI 49041**

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-29-24

Name & Address:

GAIL HORSEFIELD

1647 PINEHILL DR.

HASTINGS, MI 49058

104.10

208.20

\$

\$

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 # 3 PAC Receipt? YES 4. Date of Receipt 6-29-24

Name & Address:

MATTHEW CORNISH

5514 W STATE RD.

MIDDLEVILLE, MI 49333

104.10

104.10

\$

\$

[Click Here for Memo Itemization](#)

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

Occupation **MANAGER** Employer **GENLSE**

Business Address **5514 W STATE RD. MIDDLEVILLE, MI 49333**

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6-29-24

Name & Address:

ALLISON TROYER WISWELL

1010 W GREEN ST.

HASTINGS, MI 49058

41.64

41.64

\$

\$

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

301.89

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**

13942

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>6-30-24</u>	
Name & Address: KAREN CULVER 969 E M-43 HWY. HASTINGS, MI 49058		104.10	104.10
		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-30-24</u>	
Name & Address: LISA HALBERT 94 OSBORNE RD. DELTON, MI 49046		78.08	78.08
		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6-30-24</u>	
Name & Address: PENNY BARNHARDT 20756 BAUMAN RD. BATTLE CREEK, MI 49017		104.10	208.20
		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation REAL ESTATE Employer SELF EMPLOYED			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address 20756 BAUMAN RD. BATTLE CREEK, MI 49017			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-2-24</u>	
Name & Address: PAMELA ENGLERTH 395 MEADOW LN. HASTINGS, MI 49058		250.00	250.00
		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____			
Click Here for Memo Itemization <input checked="" type="checkbox"/>			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 536.28

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

13942

1. Committee I.D. Number

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? YES 4. Date of Receipt 6-11-24

Name & Address:

CHRISTINA BUSH

5500 CURTIS RD.

NASHVILLE, MI 49073

50.00 50.00
\$ _____ \$ _____

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

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 _____

[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 7-8-24

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 _____

[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 7-10-24

Name & Address:

LARRY OSBORNE

6925 DONEGAL LN.

DELTON, MI 49046

104.10 314.89
\$ _____ \$ _____

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

Page Subtotal **205.13**

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

13942

1. Committee I.D. Number

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? YES 4. Date of Receipt 7-12-24

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 _____

[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 7-12-24

Name & Address:

LAUREL MILLER
P.O. BOX 3
HASTINGS, MI 49058

104.10 104.10
\$ _____ \$ _____

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 #3 PAC Receipt? YES 4. Date of Receipt 7-14-24

Name & Address:

STEPHANIE LOFTUS
537 W GREEN ST
HASTINGS, MI 49058

104.10 104.10
\$ _____ \$ _____

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 #4 PAC Receipt? YES 4. Date of Receipt 7-14-24

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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**

13942

1. Committee I.D. Number

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? 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
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

13942

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 7-12-24

Name & Address:

ELSPETH INGLIS

11084 GURD RD.
DELTON, MI 49046

25.00

25.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7-12-24

Name & Address:

MARK MONSIGNORE

11084 GURD RD.
DELTON, MI 49046

25.00

25.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7-12-24

Name & Address:

MARY HART

1204 S CHURCH ST.
HASTINGS, MI 49058

20.00

20.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7-12-24

Name & Address:

KIMBERLY MORGAN

32183 28TH AVE.
GOBLES, MI 49055

100.00

100.00

\$ _____

\$ _____

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

[Click Here for Memo Itemization](#)

Occupation TEACHER Employer BENTON HARBOR SCHOOL

Business Address 870 COLFAX AVE. BENTON HARBOR, MI 49022

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

170.00

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**

13942

1. Committee I.D. Number

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7-15-24

Name & Address:

DEREK MCCLELLAND

3129 CHERRY VALLEY RD.

MIDDLEVILLE, MI 49333

52.05 52.05
\$ \$

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 #2 PAC Receipt? YES 4. Date of Receipt 7-15-24

Name & Address:

VICKIE EGGERS

437 N M-37 HWY.

HASTINGS, MI 49058

104.10 104.10
\$ \$

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 # 3 PAC Receipt? YES 4. Date of Receipt 7-19-24

Name & Address:

JUDITH WILSON

2772 MCCANN RD.

MIDDLEVILLE, MI 49333

260.25 396.85
\$ \$

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 # 4 PAC Receipt? YES 4. Date of Receipt 7-19-24

Name & Address:

DIANE HAMMOND

319 E GREEN ST.

HASTINGS, MI 49058

20.00 20.00
\$ \$

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **436.40**

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**

13942

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

2. Committee Name _____

6. Amount

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
--	--	-----------	--

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

Name & Address:

DAVID SEIDL

1970 NASHVILLE RD.
HASTINGS, MI 49058

54.64 **54.64**
\$ _____ \$ _____

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 5-25-24

Name & Address:

COLE LEINAAR

7360 COX RD.
BELLEVUE, MI 49021

85.16 **85.16**
\$ _____ \$ _____

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 5-28-24

Name & Address:

JENNY PARKS

7475 DAVENPORT RD.
WOODLAND, MI 48897

85.16 **85.16**
\$ _____ \$ _____

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 5-29-24

Name & Address:

LARRY OSBORNE

6925 DONEGAL LN
DELTON, MI 49046

54.64 **158.74**
\$ _____ \$ _____

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

Page Subtotal **279.60**

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**

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5-30-24

Name & Address:

CARTER HEWITT
6231 MESSER RD.
FREEPORT, MI 49325

13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

2. Committee Name

6. Amount

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

112.48 112.48
\$ _____ \$ _____

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

Occupation LE Employer BCSO

[Click Here for Memo Itemization](#)

Business Address 1212 W STATE ST. HASTINGS, MI 49058

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-1-24

Name & Address:

JUDITH WILSON
2772 MCCANN RD.
MIDDLEVILLE, MI 49333

136.60 136.60
\$ _____ \$ _____

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

Name & Address:

KATHY FORSYTH
10955 BOULTER RD.
DELTON, MI 49046

54.64 106.69
\$ _____ \$ _____

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 # 4 PAC Receipt? YES 4. Date of Receipt 6-2-24

Name & Address:

ALIZAH BLUNDELL
575 PRARIE CREEK RD.
IONIA, MI 48846

85.16 365.41
\$ _____ \$ _____

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

Occupation DEPUTY Employer BCSO

[Click Here for Memo Itemization](#)

Business Address 1212 W STATE ST. HASTINGS, MI 49058

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 388.88

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**

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.

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

2. Committee Name _____

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5-29-24

Name & Address:

MICHAEL MILWARD

**1504 CAPE RACHELLE DR.
BYRON CENTER, MI 49315**

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

85.16 **85.16**
\$ _____ \$ _____

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 #2 PAC Receipt? YES 4. Date of Receipt 5-29-24

Name & Address:

BRYAN FULLER

**4474 PAUVERY DR.
MIDDLEVILLE, MI 49333**

85.16 **85.16**
\$ _____ \$ _____

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 5-29-24

Name & Address:

LOUIS SICILIA

**1564 CAPE RACHELLE DR.
BYRON CENTER, MI 49315**

85.16 **85.16**
\$ _____ \$ _____

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 5-30-24

Name & Address:

MELISSA MORGAN

**1818 WOODRUFF RD.
HASTINGS, MI 49058**

88.25 **88.25**
\$ _____ \$ _____

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 **343.73**

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 6-8-24

Name & Address:

DANIEL GARVIN

6191 S M-37 HWY.

HASTINGS, MI 49058

85.16

137.21

\$ _____

\$ _____

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

Occupation **CORRECTIONS** Employer **BCSO**

[Click Here for Memo Itemization](#)

Business Address **1212 W STATE ST. HASTINGS, MI 49058**

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-11-24

Name & Address:

HOWARD JAMES

313 MEADOW LN.

HASTINGS, MI 49058

27.32

27.32

\$ _____

\$ _____

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

JOYCE JAMES

313 MEADOW LN.

HASTINGS, MI 49058

27.32

27.32

\$ _____

\$ _____

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

MARY DETTMAN

3096 MCCANN RD.

MIDDLEVILLE, MI 49333

54.64

54.64

\$ _____

\$ _____

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

194.44

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
CAMPAIN 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.

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

Name & Address:

JOE PLUNKETT

12189 BEAUTERRA RD.

HASTINGS, MI 49058

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

66.19 66.19
\$ _____ \$ _____

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 #2 PAC Receipt? YES 4. Date of Receipt 6-12-24

Name & Address:

TONY SEWELL

6400 HAMMOND RD.

FREESTATE, MI 49325

50.00 70.00
\$ _____ \$ _____

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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

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 _____

[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 6-12-24

Name & Address:

HOWARD JAMES

313 MEADOW LN.

HASTINGS, MI 49058

20.00 47.32
\$ _____ \$ _____

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 163.51

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**

13942

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:

KELLIE SMITH

6800 BROWN RD.
LAKE ODESSA, MI 48849

100.00 823.03
\$ _____ \$ _____

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

Occupation **CORRECTIONS** Employer **BCSO**

[Click Here for Memo Itemization](#)

Business Address **1212 W STATE ST. HASTINGS, MI 49058**

Type of Contribution: Direct Loan from a person Fund Raiser

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

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: Direct Loan from a person Fund Raiser

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

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: Direct Loan from a person Fund Raiser

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

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **185.00**

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 6-12-24

Name & Address:

DEBRA SMITH

864 BEECH ST.

LAKE ODESSA, MI 48849

50.00

70.00

\$ _____

\$ _____

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 6-12-24

Name & Address:

DANIELLE SPENCER

35885 WILLOW RD.

NEW BOSTON, MI 48164

75.00

95.00

\$ _____

\$ _____

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

Occupation FACTORY

Employer MILLER TECH SERVICES

[Click Here for Memo Itemization](#)

Business Address 47801 W ANCHOR CT. PLYMOUTH, MI 48170

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

BRYAN FULLER

4474 PAUVERY DR.

MIDDLEVILLE, MI 49333

100.00

185.16

\$ _____

\$ _____

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

Occupation LE

Employer MSP

[Click Here for Memo Itemization](#)

Business Address 544 N MAIN ST. WAYLAND, MI 49348

Type of Contribution: Direct Loan from a person Fund Raiser

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

Name & Address:

THOMAS MOHLER

1325 OTTAWA TRAIL

HASTINGS, MI 49058

70.00

70.00

\$ _____

\$ _____

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

Occupation _____

Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct

Loan from a person

Fund Raiser

Page Subtotal

295.00

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**

13942

1. Committee I.D. Number

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 _____

[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 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 _____

[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 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 _____

[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 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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 211.96

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 6-12-24

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 _____

[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 6-12-24

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 _____

[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 6-12-24

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 _____

[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 6-12-24

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 _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 167.12

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**

13942

1. Committee I.D. Number

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? YES 4. Date of Receipt 7-20-24

Name & Address:

ANGELA SPENCER

489 JAMES ST.

HOLLAND, MI 49424

10.00 10.00
\$ _____ \$ _____

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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 10.00

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

10.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE**

13942

1. Committee I.D. Number _____
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>
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) RETURN	\$ <u>61.40</u>
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) _____	\$ _____
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) _____	\$ _____
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) _____	\$ _____
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) _____	\$ _____
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) _____	\$ _____
			Page Subtotal <u>311.40</u>
			Grand Total of All Schedules 1A -1 (Complete on last page of Schedule) <u>311.40</u>

**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	\$ 200.00
Click Here for Memo Itemization Type			
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	\$ 250.00
Click Here for Memo Itemization Type			
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	\$ 510.00
Click Here for Memo Itemization Type			
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	\$ 625.20
Click Here for Memo Itemization Type			
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	\$ 340.00
Click Here for Memo Itemization Type			
		Subtotal this page	1925.20
		Grand Total of all Schedules 1B (Complete on last page of Schedule)	
		Enter this total on line 8a of 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
<p>Expenditure #1 Name NEXT STRATEGIES LLC Address 1362 ROCHESTER RD. LEONARD, MI 48367</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: WEBSITE</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	4-5-24	\$ 500.00
<p>Expenditure #2 Name AWESOME CAMPAIGNS INC. Address 1220 ST. CHARLES ST ELGIN, IL 60120</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: LARGE SIGNS</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	5-31-24	\$ 3120.00
<p>Expenditure #3 Name WIN RED Address 1776 WILSON BLVD. STE. 530 ARLINGTON, VA 22209</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: REFUND CONTRIBUTION</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	5-27-24	\$ 208.20
<p>Expenditure #4 Name ALLISON DEVRIES/GREY CASTLE Address ALLISON@GREYCASTLEDIGITAL</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: SOCIAL MEDIA/ADVERTISEMENT</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	6-15-24	\$ 1350.00
<p>Expenditure #5 Name MENARDS Address MENARDS.COM</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: SIGN HARDWARE/INSTALL</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	6-14-24	\$ 263.94
		Subtotal this page	5442.14
		Grand Total of all Schedules 1B (Complete on last page of Schedule)	
		Enter this total on line 8a of 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 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)	
		Enter this total on line 8a of 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	Purpose: VENUE INSURANCE	6-12-24 Date	\$ 122.00
<input checked="" type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #2 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142	Purpose: ADVERTISEMENT MATERIALS	6-3-24 Date	\$ 136.37
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #3 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142	Purpose: BANNERS FOR EVENTS	6-4-24 Date	\$ 260.14
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #4 Name 48 HOUR PRINT Address 6410 EASTLAND RD. STE E BROOK PARK, OH 44142	Purpose: BANNERS FOR EVENTS	6-2-24 Date	\$ 100.32
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #5 Name CAMPAIGN VERIFY INC. Address 1215 31ST ST. NW P.O. BOX 3554 WASHINGTON D.C. 20007	Purpose: TEXT CAMPAIGN	6-26-24 Date	\$ 95.00
<input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
	Subtotal this page	713.83	
	Grand Total of all Schedules 1B (Complete on last page of Schedule)		
		Enter this total on line 8a of 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	4-9-24 Date	\$ 51.00 Memo Itemization Below P.O. Box Purchase USPS Hastings 809 W Mill St, Hastings, MI
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	6-17-24 Date	\$ 1862.00 Click Here for Memo Itemization Type <input checked="" type="checkbox"/>
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	6-12-24 Date	\$ 400.00 Click Here for Memo Itemization Type <input checked="" type="checkbox"/>
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	6-29-24 Date	\$ 113.61 Click Here for Memo Itemization Type <input checked="" type="checkbox"/>
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	6-26-24 Date	\$ 110.76 Click Here for Memo Itemization Type <input checked="" type="checkbox"/>
		Subtotal this page	2537.37
		Grand Total of all Schedules 1B (Complete on last page of Schedule)	
		Enter this total on line 8a of 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
<p>Expenditure #1 Name SPEEDWAY Address 7051 SADDLEBAG LAKE RD. WOODLAND, MI 48849</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: FUEL FOR DELIVERING SIGNS</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>6-22-24</p>	<p>\$ 107.02</p>
<p>Expenditure #2 Name TICKETLEAP Address 1700 SANSOM ST. STE.6 PHILADELPHIA, PA 19103</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: SERVICE CHARGE</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>6-20-24</p>	<p>\$ 134.64</p>
<p>Expenditure #3 Name U-HAUL Address 1478 W MICHIGAN AVE. BATTLE CREEK, MI 49037</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: SIGN TRANSPORT</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>6-15-24</p>	<p>\$ 120.68</p>
<p>Expenditure #4 Name STATE OF MICHIGAN LIQUOR Address 7150 HARRIS DR. LANSING, MI 48906</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: LIQUOR LICENSE</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>6-12-24</p>	<p>\$ 25.00</p>
<p>Expenditure #5 Name U-HAUL Address 701 68TH ST SW BYRON CENTER, MI 49315</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: SIGN TRANSPORT</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>6-8-24</p>	<p>\$ 120.68</p>
		<p>Subtotal this page</p>	<p>508.02</p>
		<p>Grand Total of all Schedules 1B (Complete on last page of Schedule)</p>	

Enter this total
on line 8a of
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 U-HAUL Address 701 68TH ST SW BYRON CENTER, MI 49315	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 <input checked="" type="checkbox"/>
Expenditure #2 Name MID LAKES PRINTING Address 121 E ORCHARD P.O. BOX 407 DELTON, MI 49046	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 <input checked="" type="checkbox"/>
Expenditure #3 Name HASTINGS REMINDER Address 1351 N M-43 HWY. HASTINGS, MI 49058	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 <input checked="" type="checkbox"/>
Expenditure #4 Name BARRY COUNT FAIR Address 1350 N M-37 HWY HASTINGS, MI 49058	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 <input checked="" type="checkbox"/>
Expenditure #5 Name FACEBOOK Address 1 HACKER WAY MENLO PARK, CA 94025	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 <input checked="" type="checkbox"/>

Subtotal this page

1924.00

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

Enter this total
on line 8a of
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 WINRED Address 1776 WILSON BLVD. STE. 530 ARLINGTON, VA22209	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
		Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #2 Name Address	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
		Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #3 Name Address	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
		Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #4 Name Address	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
		Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
Expenditure #5 Name Address	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
		Click Here for Memo Itemization Type <input checked="" type="checkbox"/>	
<input type="checkbox"/> Fund Raiser		Subtotal this page	256.06
<input type="checkbox"/> Fund Raiser		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 13942
CAMPAIN 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.	4. Type of Obligation (Description)	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)
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
Debt #1 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>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 0 _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 2835.37	<input type="checkbox"/> FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 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>	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ 1849.00	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ 1849.00	<input type="checkbox"/> FORGIVEN
--	---	--	--	-----------------------------------

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 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>	\$ _____ \$ _____ \$ 0 _____ \$ 419.74	\$ _____ \$ _____ \$ 0 _____ \$ 419.74	<input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

			5104.11
Page Subtotal (Outstanding debt)			
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.	4. Type of Obligation (Description)	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)
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
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> 4-18-24 6. <u>Original Amount of Debt:</u> \$ 3684.60	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 0 _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 0 _____	\$ 3684.60 <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> 4-19-24 6. <u>Original Amount of Debt:</u> \$ 232.26	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ _____ \$ _____ \$ 232.26	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ _____ \$ _____ \$ 0 _____	\$ 232.26 <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> 4-25-24 6. <u>Original Amount of Debt:</u> \$ 100.90	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ _____ \$ 100.90	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ _____ \$ 0 _____	\$ 100.90 <input type="checkbox"/> FORGIVEN
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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.	4. Type of Obligation (Description)	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)
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
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

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.	4. Type of Obligation (Description)	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)
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	5. Indicate date debt was incurred 6. Indicate original amount of debt			
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> 5-29-24 6. <u>Original Amount of Debt:</u> \$ 254.29	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 0 _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ 254.29	<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> 6-4-24 6. <u>Original Amount of Debt:</u> \$ 128.26	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 128.26	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 128.26	<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> 6-12-24 6. <u>Original Amount of Debt:</u> \$ 290.74	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 290.74	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 290.74	<input type="checkbox"/> FORGIVEN
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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.	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	\$ _____ \$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 1250.00	<input type="checkbox"/> FORGIVEN
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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> \$ _____	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 0 _____ \$ _____	\$ _____ \$ _____ \$ 0 _____ \$ _____ \$ 0 _____ \$ 0 _____	<input type="checkbox"/> FORGIVEN
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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 <u>6-12-24</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>80</u>	5. Type of Fund Raising Activity <u>PIG ROAST/CORN HOLE</u>	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

3045 64

9. Gross Receipts (Add lines 7 and 8)

3956.88

10. Total Cost of Event 5000.00
(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

CANDIDATE COMMITTEE

1. Committee I. D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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 all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were
purchased

7. Amount or
Fair Market
Value

8. Cumulative
for Election
Cycle (Through
date in Item 5)

Contribution # 1 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

Goods Donated or Loaned Services Donated

3684.60 9452.53

Goods or Services Purchased by Candidate or Others

Goods or Services Purchased by Candidate or Others- LOAN

YARD SIGNS

Description _____

5. Date Of Receipt: 4-18-24

6. Vendor Name & Address:

AWESOME CAMPAIGNS.COM INC

[Click Here for Memo Itemization](#)

1220 ST. CHARLES ST.

ELGIN, IL 60120

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

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

Goods Donated or Loaned Services Donated

51.00 221.04

Goods or Services Purchased by Candidate or Others

Goods or Services Purchased by Candidate or Others- LOAN

P.O. BOX

Description _____

5. Date Of Receipt: 3-26-24

6. Vendor Name & Address:

USPS HASTINGS

[Click Here for Memo Itemization](#)

209 W MILL ST.

HASTINGS, MI 49058

Name & Address:
HEIDI SEWELL
6400 HAMMOND RD.

If over \$100.00 cumulative, please provide:
Occupation: **CORRECTIONS**

Employer Name & Address:
BCSO

1212 W STATE ST.
HASTINGS, MI 49058

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

112.96 10086.67

Goods Donated or Loaned Services Donated

\$ \$

Goods or Services Purchased by Candidate or Others

Goods or Services Purchased by Candidate or Others- LOAN

FLAGS FOR PARADE/EVENTS

Description _____

5. Date Of Receipt: 5-16-24

6. Vendor Name & Address:

GRACE ALLEY

[Click Here for Memo Itemization](#)

5595 SCHENCK AVE.

ROCKLEDGE, FL 32955

Name & Address:
RICHELLE SPENCER
1150 SHEFFIELD RD.

If over \$100.00 cumulative, please provide:
Occupation: **DEPUTY**

Employer Name & Address:
BCSO

1212 W STATE ST.

HASTINGS, MI 49058

Fund Raiser Contribution

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

CANDIDATE COMMITTEE

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

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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 all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
5. Date of Receipt		
6. Name & Address of Vendor from whom goods or services were purchased		

Contribution # 1 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

Name & Address:
RICHELLE SPENCER
1150 SHEFFIELD RD.
BATTLE CREEK, MI 49017

Goods Donated or Loaned Services Donated

128.26 **10,684.29**

If over \$100.00 cumulative, please provide:
Occupation: **DEPUTY**

Goods or Services Purchased by Candidate or Others
 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](#)



Employer Name & Business Address:

BCSO

1212 W STATE ST.

HASTINGS, MI 49058

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

Name & Address:
RICHELLE SPENCER
1150 SHEFFIELD RD.
BATTLE CREEK, MI 49017

Goods Donated or Loaned Services Donated

232.26 **9,684.79**

If over \$100.00 cumulative, please provide:

Occupation: **DEPUTY**

Goods or Services Purchased by Candidate or Others

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](#)



Employer Name & Address:

BCSO

1212 W STATE ST.

HASTINGS, MI 49058

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes

4. Endorsement or Guarantee of Bank Loan

Name & Address:
RICHELLE SPENCER
1150 SHEFFIELD RD.
BATTLE CREEK, MI 49017

188.02 **9,973.71**

If over \$100.00 cumulative, please provide:

Occupation: **DEPUTY**

Goods Donated or Loaned Services Donated

Employer Name & Address:

BCSO

1212 W STATE ST.

HASTINGS, MI 49058

Fund Raiser Contribution

Goods or Services Purchased by Candidate or Others

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](#)



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

CANDIDATE COMMITTEE

1. Committee I. D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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 all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were
purchased

7. Amount or
Fair Market
Value

8. Cumulative
for Election
Cycle (Through
date in Item 5)

Contribution # 1 PAC Receipt? Yes

Name & Address:

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

Fund Raiser Contribution

4. Endorsement or Guarantee of Bank Loan

Goods Donated or Loaned Services Donated

\$ 9.85 \$ 10,556.03

Goods or Services Purchased by Candidate or Others

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](#)

Contribution # 2 PAC Receipt? 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

Fund Raiser Contribution

4. Endorsement or Guarantee of Bank Loan

Goods Donated or Loaned Services Donated

\$ 254.29 \$ 10,546.18

Goods or Services Purchased by Candidate or Others

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](#)

Contribution #3 PAC Receipt? 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

Fund Raiser Contribution

4. Endorsement or Guarantee of Bank Loan

Goods Donated or Loaned Services Donated

\$ 100.90 \$ 9785.69

Goods or Services Purchased by Candidate or Others

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](#)

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

CANDIDATE COMMITTEE

1. Committee I. D. Number 13942

CAMPAIGN FUND OF COMMITTEE TO ELECT RICHELLE SPENCER FOR SHERIFF

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 all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)	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	5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased Description <u>DOOR PRIZES</u> 5. Date Of Receipt: <u>5-28-24</u> 6. Vendor Name & Address: CHOW HOUND 6749 S WESTNAGE AVE. PORTAGE, MI 49002	<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	<u>205.22</u> <u>10,291.89</u>
If over \$100.00 cumulative, please provide: Occupation: DEPUTY	Employer Name & Business Address: BCSO 1212 W STATE ST. HASTINGS, MI 49058	Click Here for Memo Itemization	
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	5. Date Of Receipt: <u>6-12-24</u> 6. Vendor Name & Address: SAMS CLUB 4326 28TH ST. SE KENTWOOD, MI 49512	<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	<u>290.74</u> <u>10,975.03</u>
If over \$100.00 cumulative, please provide: Occupation:	Click Here for Memo Itemization		
Employer Name & Address:			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: RICHELLE SPENCER 1150 SHEFFIELD RD. BATTLE CREEK, MI 49017	5. Date Of Receipt: <u>6-14-24</u> 6. Vendor Name & Address: MENARDS 5300 GULL RD. KALAMAZOO, MI 49048	<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	<u>142.22</u> <u>11,117.25</u>
If over \$100.00 cumulative, please provide: Occupation:	Click Here for Memo Itemization		
Employer Name & Address:			
<input type="checkbox"/> Fund Raiser Contribution			

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