

BALLOT QUESTION COMMITTEE COVER PAGE

RECT), KENT SLECTIONS DOT 27 2023 AMLOINS

		Г		FOR OFFICIAL USE ONLY	
Report must be legible, typed or prin treasurer or designated record keeps	nted in ink and signed by the er.		3.This Statement covers From: 7/21/	23 _{To} 10/22/23	
1. Committee I.D. Number 2023022			•	7 Belmar Dr. SE, Grand bids, MI 49508	
2. Committee Name Yes for GR Kids			Area Code and Phone: 61682833 If the address in this box is different froi the Statement of Organization, mail ma official.	332 m the committee mailing address on y be sent to this address by the filing	
Darrene Lee, 1557 Beima	r Dr. SE, Grand Rap	ids, M	11 49508		
Area Code and Phone 6168283	332				
6. Treasurer's Business Address 1557 Belmar Dr. SE, Gran 49508		7. Des (lf t Darle 49508	signated Record Keeper's Name and M he committee has a Designated Record Ne Lee, 1557 Belmar Dr. S 3	ailing Address Keeper) E, Grand Rapids, MI	
Area Code and Phone		Area C	Code and Phone 6168283332		
8. TYPE OF STATEMENT: 8a. PRE- ELECTION OR POST- ELECTION Pre-Election or Post-Election Statement relates to: PRIMARY GENERAL SCHOOL SPECIAL OTHER: Date of Election:	8b. FEBRUARY STATEMENT APRIL STATEMENT JULY STATEMENT OCTOBER STATEMENT 8c. ANNUAL STATEMEN Coverage Year)	- IT	8d: Post Petition Sample Filing under MCL 168.483a (Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition) 8e. AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)	By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.	
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.					
Current Treasurer or Designated Record Keeper	able diligence was used in the pents are true, accurate and coi	oreparati implete.	on of this statement and attached sched	dules (if any) and to the best of	



SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

2. Committee Name Yes for GR Kids

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
Contributions a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) \$ 28,200.00	Sumulative for Election Gyole
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) \$ 28,200.00	(18.) \$ 29,145.00
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ 0.00	(19.) \$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ 28,200.00	(20.) \$ 29,145.00
IN-KIND CONTRIBUTIONS		
In-Kind Contributions a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ 250.00	
b. Uniternized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
•7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ 250.00	(21.) \$ 1,495.00
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ 20,561.96	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>0.00</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ 0.00	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ 0.00	
e. Subtotal of Expenditures	(8e.) \$ 20,561.96	(22.) \$ _20,561.96
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ 0.00	(23.) \$ 0.00
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ 20,561.96	(24.) \$ _20,561.96
IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ 0.00	(25.) \$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 4E)	(12a.)\$ 0.00	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ 0.00	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 945.00	
 Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts) 	(14.) + 28,200.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = 29,145.00	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - 20,561.96	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 8,584.00	*

^{*}If your ending balance is negative, please recheck your math.



ITEMIZED CONTRIBUTIONS SCHEDULE 4A RALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

BALLOT QUESTION O	COMMITTEE 2. Committee N	_{ame} Yes for GR K	lids	
Please enter contributors name and address middle initial.	s. If contribution is from an individual, enter la		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt 7/26/23			
Rohwer, Milton			E00.00	_{\$} 500.00
30 College Ave SE #64, Gran	d Rapids, MI 49503		\$ 500.00	*
5. If over \$100.00 cumulative, please prov	ride:		Click Here for Me	mo Itemization
Occupation Retired	Employer			
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 0726/23			
Kribs, Rhonda 10760 Sun Da Go Dr. SE, Mi	ddleville, MI 49333		\$ 250.00	\$250.00
5. If over \$100.00 cumulative, please prov	ide:		Click Here for Mer	no Itemization
	Employer Grand Rapids Public S		CHOIC FOI MOI	no nomization
	her King Jr. St., Grand Rapids			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address: Lewis, Katherine	4. Date of Receipt <u>7/31/2023</u>			
2534 Summit Ridge, Grand R	apids, MI 49405		\$100.00	\$ 200.00
5. If over \$100.00 cumulative, please pro	vide:	(Click Here for Mem	no Itemization
Occupation Retired	Employer			
Business Address — Z D	П. ,			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
B. Contribution # 4 Name & Address:	4. Date of Receipt <u>8/02/23</u>			
Roby, Leadriane 2534 Summit Ridge, Grand R	apids, MI,49508		\$500.00	\$_500.00
5. If over \$100.00 cumulative, please prov	ide:		Click Here for Mer	mo Itemization
Occupation Superintendant	Employer Grand Rapids Public	Schools	Olloit Flore for Mer	no termization
Business Address 1331 Martin Luth	er King Jr. St. Grand Rapids,	MI 49506		
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
		Page Subtotal	1350	
		etal of All Schedules 4A	28,200.00	
1 18	(Complete of	last page of Schedule)	Enter this total	_
Page of			on line 3a of Summary Page	





ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I,D. Number 2023022
2. Committee Name Yes for GR Kids

Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 8/02/23		
Dean, Kellie	# 5000	5000.00
4812 Aurelius Rd, Lansing	\$ \$5000	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here for M	emo Itemization
Occupation President/Owner Employer Dean Transportation		
Business Address 4812 Aurelius Rd, Lansing, MI 48910		
Type of Contribution: □Direct □ Loan from a person ✓ Fund Raiser		
3. Contribution # 2 4. Date of Receipt 8/03/23		
Name & Address: Shaffer, Dave		
415 Leonard St NW, Ste. 110, Grand Rapids, MI,	_s 1000	_{\$} 1000
49504	Ψ	
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation CEO Employer 415 Leonard St NW, Grand Rapid		
Business Address 415 Leonard St NW, Grand Rapids, MI 49504		
Type of Contribution:		
3. Contribution # 3 Name & Address: 4. Date of Receipt8/03/23		
Smart, David		
5584 Albright, SW, Grandville, MI 49418	_{\$} _250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Executive Director Fa Employer Grand Rapids Public Schools		
Business Address 900 Union NE, Grand Rapids, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 A. Date of Receipt 8/08/23 Name & Address:		
Barnes, Eric		
2041 Ontonagon SE, Grand Rapids, MI , 49507	_{\$} _100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Me	umo Itamization
Occupation Employer	Olick Here for Me	THO REITHZAUOTI
Business Address		
Type of Contribution: 🗸 Direct Loan from a person Fund Raiser		
Page Subto	tal 6350.00	
Grand Total of All Schedules	.,	
2 18 (Complete on last page of Schedu	Enter this total	
Page of	on line 3a of Summary	
	Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee 1.D. Number 2023022

BALLOT QUESTION COMI	WITTEE 2. Committee	Name Yes for GR	Kids	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 8/08/23			
Evans, John 1961 Leonard St NE			_{\$} 100	_{\$} 100
Grand Rapids, MI 49505	_		<u> </u>	
5. If over \$100.00 cumulative, please provide:	B		Click Here for Me	mo Itemization
Occupation Empl	oyer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 8/08/23			
llahi, Rukshana 1046 Veto St NW, Grand Rapids,	MI 49504		\$ <u>200</u>	_{\$} _200
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Executive Director of Employee	_{oyer} <u>Grand Rapids Public</u>	Schools		
Business Address 1331 Martin Luther I	King Jr St. SE, Grand R	apids, MI 495		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 4. Name & Address: Nelson, Karl	Date of Receipt8/10/23			
6227 Acropolis Drive SE Grand Rapids, MI 49546			_{\$_} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:			Oliale Uses for Marie	- 10 5 - 0
1	_{oyer} Grand Rapids Publ	ic Schools	Click Here for Mem	o itemization
	King Jr. St. , Grand Rapi	ds, MI 49506		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. E	Date of Receipt 8/11/23			
Hendrix, Leon	W			
8224 Boardwalk Dr,			250	250
Byron Center, MI 49315	_	,	\$ 250	\$ <u>250</u>
5. If over \$100,00 cumulative, please provide:	H		Click Here for Men	a Itamization
Occupation Executive Director of Emplo	oyer Grand Rapids Public	Schools	Ollow Liefe for Meli	io iterriization
Business Address 1331 Martin Luther K	Ing, Jr St. Grand Rapids	s, MI 49506		
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
		Page Subtotal	800.00	
3 18 Page of		Total of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of Summary Page	



ole tellorine (* 4)

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

BALLOT QUESTION COMM	/ITTEE 2. Committee	Name Yes for GR I	Kids	
Please enter contributors name and address. If comiddle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1 4. I Name & Address:	Date of Receipt 8/11/23			
Beresford, Matthew 2372 Longmeadow Street Northwe	est		\$ 250	\$ 250
Grand Rapids, MI 49504			Click Here for Me	mo Itemization
5. If over \$100.00 cumulative, please provide:	0 15 11 5 11			
Occupation Executive Leadership Emplo				
Business Address 1331 Martin Luther K	Ging Jr. St. Grand Rapids	s, MI 49506		
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt <u>8/11/23</u>			
Lusk, Anna 53 Skyline Cir NW, Grand Rapids	, MI 49504		\$ 300	_{\$} 300
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	no Itemization
Occupation Assistant Superinten Emplo	_{oyer} Grand Rapids Public	Schools		
Business Address Assistant Superinter	ndent of HR/General Co	unsel		
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 4. I	Date of Receipt8/13/23			
Atkins, Mel				
4489 Versatile Ct. SW,			_{\$} 100	_{\$} 100
Wyoming, MI 49418			<u> </u>	Φ
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
OccupationEmple	oyer			
Business Address —				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. E Name & Address:	Pate of Receipt 8/16/23		7 N T W W W T T T T T T T T T T T T T T T	
Gardner, Donald				
3145 East Fulton NE			_{\$} 100	_{\$} 100
Grand Rapids MI 49506			\$	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Emplo	yer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
		Page Subtotal	750.00	
		Total of All Schedules 4A	28,200.00	
4 18	(Complete	on last page of Schedule)	Enter this total	I
Page of			on line 3a of Summary Page	,



Gleannichm

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>2023022</u>

BALLOT QUESTION COMMITTEE 2. Committee Name Yes for GR	Kids	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: 4. Date of Receipt 8/17/23		
Rockford Construction	7000	5000
601 First St. NW, Grand Rapids, MI 49504	_{\$} 5000	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 2 Name & Address: 4. Date of Receipt 8/18/23		
Bliss, Rosalynn, 21 Holmdene Blvd,	400	400
Grand Rapids, MI 49503	_{\$} 100	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 A. Date of Receipt 8/19/23 Name & Address:		
Harmsen, John 7589 Sunfish Lake Court Northeast, Rockford, MI 49341	_{\$} _250	\$ 250
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	no Itemization
Occupation Executive Director of Employer Grand Rapids Public Schools		
Business Address 1331 Martin Luther King Southeast Grand Rapids, MI 49		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 8/19/23		
Notario-Risk, Nicole		
829 Russwood St. NE, Grand Rapids, MI 49505	_{\$} 25.00	_s 25.00
5. If over \$100.00 cumulative, please provide:	·	Ψ
Occupation Employer	Click Here for Men	no Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule	00 2 - 22	,



* Clear Form

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

BALLOT QUESTION COM	MITTEE 2. Commi	ittee Name Yes for Gr k	(ids	
Please enter contributors name and address. If c middle initial.	enter contributors name and address. If contribution is from an individual, enter last name, first name,			7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address;	Date of Receipt 8/28/23			,
Dean, Kellie 4812 Aurelius Rd, Lansing, MI 48	910		_{\$} 5000	\$ <u>10.000</u>
5. If over \$100.00 cumulative, please provide: Occupation President/Owner Empl	_{loyer} Dean Transportati	on	Click Here for M	emo Itemization
Business Address 4812 Aurelius Rd, La	*			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address: Walton, Mary	Date of Receipt 8/28/23			
1911 Francis SE, Grand Rapids, MI 49507			\$ 20.00	\$ 20.00
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Empl	oyer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address: Lee, Tamara 1557 Belmar Dr SE Grand Rapids, MI	Date of Receipt <u>8/30/23</u>		_{\$} _20.00	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
OccupationEmpl	loyer			no nomization
Business Address				
Type of Contribution: 🗹 Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. r Name & Address: Clinton, Thomas 238 Madison Ave SE,	Date of Receipt 8/30/23		_{\$} 100.00	_s 100.00
Grand Rapids, MI 49503			\$ 100.00	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Emplo	oyer			
Business Address		FT		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
6 18 Page of		Page Subtotal nd Total of All Schedules 4A ete on last page of Schedule)	Enter this total on line 3a of Summary Page	



*Clear#Joins

ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>2023022</u>

BALLOT QUESTION COM	IMITTEE 2. Committe	e Name Yes for GR	Kids	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.				7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4 Name & Address:	Date of Receipt 8/31/23			date of fodelpt/
Gordan Foods 4990 Clay Ave SW, Grand Rapids, MI 49548			\$ <u>1000</u>	<u>\$ 1000</u>
5. If over \$100.00 cumulative, please provide:			Click Here for M	emo Itemization
Occupation Em	ployer			
Business Address				
Type of Contribution: Vinect	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	. Date of Receipt 9/02/23			
People, Eureka 3192 Anisko Dr,			_{\$} _50.00	_{\$} 50.00
Grand Rapids, MI 49525 5. If over \$100.00 cumulative, please provide:	+		08-1-11	
	Janes		Click Here for Me	mo Itemization
Business Address	oloyer			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address: Robertson, Dale 3370 Brookpoint Dr. SE, Grand Rapids, MI 49546	Date of Receipt <u>9/05/23</u>		_{\$} _50.00	\$ 50.00 ·
5. If over \$100.00 cumulative, please provide:	Œ		Click Here for Men	no Itemization
OccupationEm	oloyer			
Business Address —				
Type of Contribution: Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 4. Name & Address:	Date of Receipt 9/06/23			
Stier, Lucas				
835 Calvin Ave SE,	\$		s 100.00	_s 100.00
Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide:			Ψ	a
·			Click Here for Mer	no Itemization
Linp	loyer			
Business Address Type of Contribution: Direct	Loan from a person	□ ₅		
7 18 Page of	Grand	Page Subtotal Total of All Schedules 4A on last page of Schedule)	1200.00 Enter this total on line 3a of Summary Page	· .



Clearionn

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022
2. Committee Name Yes for GR Kids

Please enter contributors name a middle initial.			enter las	t name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date	of Receipt 9/0623				
Wolters, Kate						
2260 Cascade Springs	Drive, SE,				\$ 500.00	\$ 500.00
Grand Rapids 49546					Click Here for Me	
5. If over \$100.00 cumulative, p.					Ollow Here for Me	THO RETINZATION
Occupation Director	• •	901 44th Street, G	rand	Rapids, M		
Business Address 901 44th	Street, Grand	Rapids, MI				
Type of Contribution: 🗸 Direct	ct	Loan from a person		Fund Raiser		
Contribution # 2 Name & Address:	4. Date	of Receipt 9/07/23				
Jones, Joe 2528 Orchard View Dr	ivo Northonat				_{\$} 250.00	_s 250.00
Grand Rapids, MI 4950					\$ 200.00	\$
5. If over \$100.00 cumulative, pl		H			Click Here for Men	no Itemization
OccupationSenior Pastor		Brown Hutcherson	Mini	stries		no nomedion
Business Address 618 Jeffe						
Type of Contribution: Direct		oan from a person	1/F	und Raiser		
3. Contribution # 3	4. Date	of Receipt9/7/23				
Name & Address: Hennessy, Carol						
1510 Kenan Avenue No	orthwest				_{\$} 50.00	_{\$} 50.00
Grand Rapids, MI 4950					\$	\$
5. If over \$100.00 cumulative, pl	lease provide:				Click Here for Mem	o Itemization
Occupation	Employer					
Business Address			_			
Type of Contribution: Direct		oan from a person	√ F	und Raiser		
3. Contribution # 4 Name & Address:	<u></u>	of Receipt 9/7/23				
Cranson, Jeffrey		7 011720				
2618 College Ave., Gra	nd Rapids. M	49505			400.00	100.00
,	,				\$ <u>100.00</u>	\$ 100.00
5. If over \$100.00 cumulative, ple	ease provide:				Click Here for Men	no Itemization
Occupation	Employer					NO NO NI DATION
Business Address						
Type of Contribution: Dire	ct	Loan from a person	\checkmark	Fund Raiser		
-				Page Subtotal	900.00	
				of All Schedules 4A		-
8 18		(Compl	ete on la	st page of Schedule)	Enter this total	
Page of					on line 3a of	

Page





ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

2. Committee Name Yes for GR Kids

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 9/7/23		
Crabb, Elizabeth		
2464 Coit Avenue NE	_{\$} 100.00	\$ <u>100.00</u>
Grand Rapids, MI, 49505	Olista Harra fara Maria	
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Fundraiser Employer Literacy Center of West Michigan		
Business Address 1120 Monroe Avenue NW Suite 240, Grand Rapids, MI		
Type of Contribution:		
3. Contribution # 2 4. Date of Receipt 9/9/23		
Name & Address: Golazeswki, John		
1384 Olde Evergreen Way	_{\$} 100.00	_{\$} 100.00
Holland, MI 49423	Φ	Ψ
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 Name & Address: 4. Date of Receipt 9/10/23		
Clayton-Trigg, Diane		
4342 Saint Annes Avenue Southeast	_{\$} _25.00	_{\$} <u>25.00</u>
Kentwood, MI 49512 ■		
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 4. Date of Receipt 9/11/23 Name & Address:		
Kurt Johnson		
1331 Martin Luther King Jr St SE	_{\$} 250.00	_e 250.00
Grand Rapids, MI 49506	Ψ	Φ
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Kurt Johnson Executi Employer Grand Rapids Public Schools		
Business Address 1331 Martin Luther King Jr St SEGrand Rapids, MI 495		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	475.00	
Grand Total of All Schedules 4A		
(Complete on last page of Schedule)	
9 18 Page of	Enter this total on line 3a of	
	Summary Page	



ACleanEoune

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

TRIBUTIONS
1. Committee I.D. Number 2023022
E 4A
ON COMMITTEE
2. Committee Name Yes for GR Kids

Please enter contributors name and address. If middle initial.			st name, tirst name,	6. Amount	Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address;	4. Date	of Receipt 9/11/23			
Flores, Jose' 1066 Grandville Ave. SW			- - -	_{\$} 50.00	\$ 50.00
Grand Rapids, MI 49503				Click Here for Me	mo Itemization
5. If over \$100.00 cumulative, please provide) :			ONOR FIOTO TO THE	MIO NOMIZZUOI
Occupation En	nployer				
Business Address					
Type of Contribution: Direct		Loan from a person	Fund Raiser		
Name & Address:	4. Date	e of Receipt <u>9/12/23</u>			
Landon, Martin				100.00	_{\$} 100.00
6280 Shadeland Avenue Indianapolsis, IN 46220				\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide				Click Here for Mer	no Itemization
				Olick Field for Mei	no hemization
	nploye		-		
Business Address Type of Contribution: Direct	П	_oan from a person	Fund Raiser		
	بلسنب	of Receipt9/12/23			
Name & Address:		0/12/20			
Miles, Katherine 3726 Chamberlain Avenue Sout	hood	·+		_s 50.00	_{\$} 50.00
Grand Rapids, MI 49508	iicas			\$ 00.00	. \$
5. If over \$100.00 cumulative, please provide	e:	+		Click Here for Men	no Itemization
Occupation E		•			
Type of Contribution: Direct	П	oan from a person	Fund Raiser		
<u> </u>		of Receipt 9/12/23		_,	
Name & Address: Oliver-King, Lisa		0/12/20			
334 Burton Street Southeast				000.00	000.00
Grand Rapids, MI 49507				\$ 200.00	\$ 200.00
5. If over \$100.00 cumulative, please provide	:	Ħ		Click Here for Mei	no Itomization
Occupation Executive Director En	nployer	Our Kitchen Table		Olicit Here for Mei	no nemization
Business Address 334 Burton SE, Gra	and F	Rapids, MI 4950			
Type of Contribution: Direct		Loan from a person	Fund Raiser		
<u> </u>			Page Subtotal	400.00	
		Grand Tota	_		-
40 40			al of All Schedules 4A last page of Schedule)	38,200.00	<u> </u>
10 18 Page of				Enter this total on line 3a of	
				Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1 Committee LD Number 2023022

 Committee I.D. Nur 	mber ZUZSUZZ	
2. Committee Name	Yes for GR Kids	

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: 4. Date of Receipt 9/12/23		
Delong, Eric R. 27 Library St. NE Unit 402 Grand Rapids, MI 49503	\$ <u>150.00</u>	\$ 150.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Interim City Manager Employer City of Grand Rapids		
Business Address 300 Monroe NW, Grand Rapids, MI 49503		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 2 Name & Address: 4. Date of Receipt 9/12/23		
Davis, Kymberlie 248 Garfield Ave. SW	_{\$} 100.00	_{\$_} 100,00
Grand Rapids, MI, 49504		
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 3 Name & Address: 4. Date of Receipt 9/12/23		
Schottke, Jen	_{\$} 100.00	100.00
3235 Doriais Dr NE Grand Rapids, MI 49525	\$_100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		
Business Address —		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 4 4. Date of Receipt 9/12/23 Address:		
Thole, Nicholas		
1311 Woodshire Ave. SE	_{\$} 100.00	_{\$} 100.00
Grand Rapids, MI 49506 5. If over \$100.00 cumulative, please provide:		
	Click Here for Me	mo Itemization
Occupation Employer	•	
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtota	450.00	
Grand Total of All Schedules 4/ (Complete on last page of Schedule		
11 18	Enter this total	_
Page of	on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 20	023022
-----------------------------	--------

BALLOT QUESTION COMMI	TTEE 2. Committee N	_{ame} Yes for GR Ki	ds	<u> </u>
Please enter contributors name and address. If cont middle initial.	ribution is from an individual, enter k	ast name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Da Name & Address: McAlvey Merchant & Associates 120 W. Ottawa St. Lansing, MI 48933	te of Receipt 09/12/23		_{\$} 500.00	_{\$} 500.00
			Click Here for Me	mo Itemization
5. If over \$100.00 cumulative, please provide:				
Occupation Employe	er			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Da Name & Address: Koehler, Ron 122 Forest Hill Ave SE	te of Receipt <u>09/14/23</u>			
Grand RApids, MI 49546			_{\$} 250.00	_{\$} 250.00
. If over \$100.00 cumulative, please provide: Occupation Administrator Employe	_{er} KISD		Click Here for Men	no Itemization
		·		
Business Address 2930 Knapp NE, Grar Type of Contribution: Direct		<u> </u>		
	Loan from a person	Fund Raiser		
Name & Address: Russ, Timothy 24 Robinhood Drive SE	te of Receipt <u>09/19/23</u>		s 50.00	_s 50.00
Grand Rapids, MI 49546			*	φ
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Employe	er			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
. Contribution # 4 4. Dat Name & Address: Guyton, Deborah	e of Receipt 09/19/23			
8034 Kay Dr SE Grand Rapids, MI 49508			_{\$} 125.00	_{\$} 125.00
If over \$100.00 cumulative, please provide: Occupation CEO Employe	_r Vision Matters, LL0		Click Here for Men	no Itemization
usiness Address Vision Matters, LLC				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Ralser		
12 _{of} 18		Page Subtotal al of All Schedules 4A last page of Schedule)	\$925.00 25 av. v Enter this total on line 3a of Summary Page	



SCHEDULE 4A

1. Committee I.D. Number 2023022

BALLOT QUESTION COMMITTEE 2. Committee Name Yes for GR K	ids	E
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: McPeak, Bonnie 3547 Breton Valley DR SE Kentwood, MI 49512	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 2 Name & Address: Crabb, Elizabeth		
2464 Coit Avenue Northeast Grand Rapids, MI 449505	\$ 200.00	\$ 300.00
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Fundraiser Employer Literacy Center of West Michigan		
Business Address 1120 Monroe Avenue NW Suite 240, Grand Rapids, MI 49503		
Type of Contribution:		
3. Contribution # 3 Name & Address: Lions & Rabbits Center for the Arts 1264 Plainfield Ave NE Grand Rapids, MI 49505	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address —		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address: Traylor, LaTarro 869 Woolsey Dr SW	s 100.00	_s 100.00
Grand Rapids, MI 49503	\$ 100.00	\$_100.00
5. If over \$100.00 cumulative, please provide: Occupation Employer	Click Here for Mem	o Itemization
Business Address Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	\$850.00 Representation line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number	2023022
--------------------------	---------

BALLOT QUESTION COMMITTEE 2. Committee Name Yes for GR K	ids	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 10/9/23		
Ryan, Jenn 2715 Copper Hill Drive Northeast Grand Rapids, MI 49525	\$ <u>10.00</u>	\$ 10.00
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 10/10/23 Name & Address: Triangle & Associates		,
3769 3 Mile Road NW Grand Rapids, MI 49534	\$ 500.00	\$ 500.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 Annual Andress: Williams, Cheri		
517 Orchard Dr NE Rockford, MI 49341	\$_25.00	\$ 25.00
	Click Here for Memo	ltemization
OccupationEmployer		
Business Address Type of Contribution:		
3. Contribution # 4 4. Date of Receipt 10/14/23		
Ferrer, Angelica		
1859 Union Avenue Southeast Grand Rapids, MI 49507	\$ 25.00	\$ 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Page of	560.00 Solution 10 St.	

Page



Clear Form.

ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number 2023022

BALLOT	QUESTION COMM	ITTEE 2. Commi	ttee Name Yes for GR	Kids	
Please enter contributors middle initial.	name and address. If cor	tribution is from an individual, o		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. D	ate of Receipt 10/15/23			
Newton, Kishen 451 Briar LN NE				\$ 25.00	\$ 25.00
Grand Rapids	- Albara - 1			Click Here for Me	mo Itemization
5. If over \$100.00 cumul	ative, piease provide:				
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 2 Name & Address: Westdrop, Rob	4. C	Pate of Receipt 10/16/23			
561 Century Ave. Grand Rapids, M				\$ 1000.00	\$ 1000.00
5. If over \$100.00 cumula				Click Here for Mer	no Itemization
Occupation President		_{ver} Moss Audio Corpo	oration		
		V Grand Rapids, MI	****		
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	4. C	Pate of Receipt 10/16/23			
LMK Consulting 3260 Cheney				_{\$} 100.00	_{\$} 100.00
Grand Rapids, MI	49525	H			
5. If over \$100.00 cumul	ative, please provide:			Click Here for Men	no Itemization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. D	ate of Receipt 10/17/23			Agrama
DICKOW, Peter 2536 Indian Trail,				_{\$} 50.00	s 50.00
Grand Rapids, MI		=			
5. If over \$100,00 cumula Occupation	tive, please provide:	ver		Click Here for Mer	no Itemization
	Limpio	yui			
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
77PO OF CONTRIBUTION	Dirock	Loan nom a person		4475.00	T
15 18 Page of			Page Subtotal and Total of All Schedules 4A lete on last page of Schedule	7G 250 52	
				Summary	

Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

. Committee I.D. Number	2023022

BALLO	OF QUESTION CO	MMIT	TEE 2. Committee Name Yes for GR K	(ids	3
Please enter contributor middle initial.	rs name and address.	f contrib	oution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Gietzen, Kristin		4. Date	of Receipt 10/17/23		05.00
3471 Thistle Dhu S Rockford, MI 49341				\$ <u>25.00</u>	\$ 25.00
5. If over \$100.00 cum	ulative, please provid	9 :		Click Here for Me	mo Itemization
Occupation	E	nployer			
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address: White, Sherry		4. Date	of Receipt 10/17/23		
2011 Excalibur Dr Orlando, FL 32822				\$ <u>50.00</u>	\$ 50.00
5. If over \$100.00 cum	ulative, please provide	:		Click Here for Mer	no Itemization
Occupation	E	nployer			
Business Address					
Type of Contribution:	Direct	i	oan from a person ✓ Fund Raiser		
3. Contribution # 3 Name & Address: Goodson, Stacey 1419 Den Hertog S	treet Southwest	4. Date	e of Receipt 10/17/23	05.00	05.00
Wyoming, MI 4950				<u>\$ 25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cum	ulative, please provid	e:		Click Here for Men	no Itemization
Occupation	E	mploye	·		
Business Address					
Type of Contribution:	Direct	L	oan from a person		
3. Contribution # 4 Name & Address:		4. Date	of Receipt 10/17/23		
LaGrand, Meliss 255 College Ave					
Grand Rapids, N				_{\$} _100.00	\$ 100.00
5. If over \$100.00 cum	ılative, please provide	:		Click Here for Mer	no Itemization
Occupation	Er	nployer			
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		

Grand Total of All Schedules 4A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page

Page Subtotal | \$200.00

16 of 18

, which is the second of the



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 2023022

2. Committee Name Yes for GR Kids

Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	e, 6. Amount	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: 4. Date of Receipt 10/17/23		
Clark Whitney, Bridget Allen Ave NE Grand Rapids. MI 49503	\$ <u>50.00</u>	\$ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address		
3. Contribution # 2 A. Date of Receipt 10/17/23 Name & Address:		
Kelly, Carl 940 Monroe Ave NW	\$ 25.00	\$ 25.00
Grand Rapids, MI 49503	Olista I I and for Ma	was Manustra (Com
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 3 Name & Address: 4. Date of Receipt 10/17/23		
Lewis, Katherine 2534 Summit Rdg Dr. NE Grand Rapids, MI	_{\$} _100.00	\$ 300.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Retired Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 10/17/23 Name & Address:		
Freeman, Judy 425 Cambridge Blvd SE	_{\$} 100.00	_{\$} 100.00
Grand Rapids, MI 49506	·	
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
Page Subt	otal 275.00	
Grand Total of All Schedules (Complete on last page of Sched		
17 18 Page of	Enter this total on line 3a of Summary	





ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

Committee LD Number 2023022

1. Committee I.D. Num	ber <u>2023022</u>	
2. Committee Name Y	es for GR Kids	

Please enter contributors name and address. If contribution is from an individual, enter last name, first namiddle initial.	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Date of Receipt Name & Address:		
Melton, Sara 812 Livingston Ave NE Grand Rapids, MI 49503	\$ <u>25.00</u>	\$ 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person		
3. Contribution # 2 Name & Address: 4. Date of Receipt 9/12/23		
Lewis, Katherine 2534 Summit RDG2534 Summit RDG Crand Banida, MI 40505	\$ 500.00	\$800.00
Grand Rapids, MI 49505 5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
OccupationRetired Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: 4. Date of Receipt8/10/23	West to the second beautiful to the second of the second o	
Tommy Brann 4335 56th St. Wyoming, MI 49548	_{\$} 500.00	\$ 500.00
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Owner Employer Tommy Brann's SteakhouseGrille		no komizatori
4157 Division Ave S. Grand Rapids, MI 49548		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt		
Name & Address:		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Business Address	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Su Grand Total of All Schedul	les 4A 28 200 00	
Complete on last page of Sch	Enter this total on line 3a of Summary	



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 2023022

2. Committee Name Yes for GR Kids 3. Name and Address from whom received 4. Type of In-Kind Contribution (Check applicable box) 7. Amount or Fair 8. Cumulative 5. Date of Receipt Market Value for Election If contribution is from an individual, please enter last 6. Name & Address of Vendor from whom goods or Cycle (Through name first. services were purchased date in Item 5) Contribution #1 Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Erica Curry Van Ee 600 Broadway St. NW, #224 Goods or Services Purchased by Others \$ 250.00 \$250,00 Grand Rapids, MI 49504 Goods or Services Purchased by Others - LOAN If over \$100.00 cumulative, please provide: Description Purchase of food and bever Occupation CEO of Urban Curry 5. DATE OF RECEIPT: 10/17/23 Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: 600 Broadway St. NW #224 Grand Rapids, MI 49504 √ Fund Raiser Contribution #2 Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN If over \$100.00 cumulative, please provide: Description Occupation 5. DATE OF RECEIPT: Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: Fund Raiser Contribution #3 Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description If over \$100.00 cumulative, please provide: Occupation 5. DATE OF RECEIPT: Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: Fund Raiser 250.00 Page Subtotal

> Enter this total on line 6a of Summary Page

250.00

Grand Total of all Schedules 4-IK

(Complete on last page of Schedule)

1 1 Page _____ of ____

COMPLETING BALLOT QUESTION COMMITTEE SCHEDULE 4-IK, ITEMIZED IN-KIND CONTRIBUTIONS

ITEM 3: CONTRIBUTOR'S NAME AND ADDRESS: If the in-kind contribution is from an individual, enter last name first. CONTRIBUTOR'S OCCUPATION, EMPLOYER, AND BUSINESS ADDRESS: Complete if the cumulative value of in-kind contributions received from the contributor exceeds \$100.00 for the election and the contributor is an individual.

ITEM 4: TYPE OF IN-KIND CONTRIBUTION: Check one of the five indicated categories for each in-kind contribution. Endorsement or guarantee of bank loan: An endorsement is made when a contributor guarantees a financial institution that he or she will repay a loan from a financial institution if the committee defaults on payments. The amount endorsed is the amount to be reported as an in-kind contribution. Goods donated or loaned: Items that are given to the committee without charge, or items loaned to the committee for temporary use with an expectation that the items will be returned to the contributor. The value to be reported as an in-kind contribution is the fair market value or amount it would have cost the committee to purchase or rent similar items in the local community. Example: use of a computer, use of office furniture. Services donated: Labor or services for which the contributor or other persons would normally be compensated that is donated to the committee without charge. Example: accounting, legal or clerical services; free music for fund raising event provided by professional band, etc. The amount to be reported as an in-kind contribution is the amount usually charged to the general public for such or similar services. Goods or services purchased by others: The purchase, by a contributor, of materials, supplies or services for the committee. Example: payment of the committee's printing bill by a contributor; purchase of office supplies or postage stamps; purchase of food for a fund raiser. The amount to be reported as an in-kind contribution is the amount the contributor paid for the goods or services. Goods or services purchased by others - LOAN: The purchase, by a contributor, of materials, supplies or services for the committee, for which the contributor wishes to be reimbursed. The examples would be the same as above, except for the fact the committee is expected to repay the contributor the cost incurred. Therefore, the amount is reported both as an in-kind contribution from the contributor on Schedule 4-IK, Itemized In-Kind Contributions, and as a debt owed by the committee to the contributor on Schedule 4E, Debts and Obligations.

DESCRIPTION: Enter a brief, clear description of each in-kind contribution that describes the goods or services contributed and, if not obvious, the purpose of the goods or services. If the contribution is related to a fund raising event sponsored or co-sponsored by the committee, check the "Fund Raiser" box.

ITEM 5: DATE OF RECEIPT: Enter the date the in-kind contribution was received by the committee. The date must be within the period covered by the Campaign Statement.

ITEM 6: VENDOR NAME AND ADDRESS: If the in-kind contribution consists of goods or services purchased on behalf of the committee by a contributor, enter the name and address of the vendor or person where the goods or services were purchased.

ITEM 7: AMOUNT: Enter the fair market value of the contribution; if the contribution was purchased, enter the amount paid.

ITEM 8: CUMULATIVE FOR ELECTION: Enter the cumulative value of all in-kind contributions and itemized contributions of money made by the same contributor during the election through the date of the contribution being reported. The contributions are cumulative in date order.

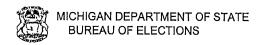




ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number_2023022

SCHEDULE 4B BALLOT QUESTION COMMITTEE 2.0	W N	:_1_			
Name and address of person to whom paid	ommittee NameYes for GR Kid 4. State purpose of expenditure. 5. Identify the ballot proposal involv Indicate whether supported or oppo	ved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose;	I		1	
Kyle Pray	Compensation/Camp.N	Mana			
701 Burns St, SW			8/04/23	_{\$} 2,000	_{\$} 2,000
Grand Rapids, MI	5. Ballot Proposal: GRPS Bond Proposal		Date of	Ψ	_ •_ ·
	- Toposai		Expenditure		
Check box if expenditure is payment of debt or obligation	County:Kent		Click fo	r Memo Itemizatior	туре
reported on previous statement	✓ Support □o	—— Oppose			
Fund Raiser	Statewide L	ocal			
Expenditure # 2 Name & Address:	4. Purpose:	!			
Darling Communications	Compensation/DLee Fi	inan			
1557 Belmar Dr SE	5. Ballot Proposal:		8/0423	_{\$} 2248.00	_e 2248.00
Grand Rapids, MI 49508	GRPS Bond Proposal		Date of	p	_
	County: Kent	İ	Expenditure		
Check box if expenditure is payment of debt or obligation			Click for	Memo Itemization	Туре
reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide \(\sqrt{L} \)	Local			
Expenditure # 3 Name & Address:	4. Purpose:				
Long Road Distillers	Fundraiser Deposit				
537 Leonard St NW	5. Ballot Proposal:		8/11/23	_{\$} 250.00	\$ 250.00
Grand Rapids, MI 49504	GRPS Bond Proposal		Date of Expenditure	Ψ	Ψ
	County: Kent		•	Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support □ 0	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 4	4. Purpose:				
Name & Address: SquareSpace Website Builder	Website Payment				
225 Varick Street; New York City, New	5. Ballot Proposal:		8/14/23	\$33.00	_{\$} 33.00
York,	GRPS Bond Proposal	1	Date of Expenditure		
	County: Kent		Click for	r Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support C	Oppose			
Fund Raiser	☐Statewide	Local			
		Subtot	al this page	4531.00	
	Grand ⁻	Total of So	chedules 4B		-
	(Complete on la	last page o	of Schedule)	20,561,90	•
				Enter this total on Line 8a of	
1 4 Page of				the Summary Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number 2023022

BALLOT	QUESTION	COMMITTEE
--------	----------	-----------

2. Committee Name Yes for GR Kids

3. Name and address of person to whom paid	State purpose of experion 5. Identify the ballot proportion indicate whether supported the supported that is a supported to the supported that is a supported to the supported that is a supported to the supported to the supported that is a supported to the supported that is a supported to the supported to the supported that is a supported to the supported t	sal involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:		<u>-</u>		
Kyle Pray	Compensation/Camp	aign Manager			
701 Burns St SW			08/31/23	_{\$} 2000	_{\$} 4,000
Grand Rapids, MI 49503	5. Ballot Proposal:		Date of	\$ <u>2000</u>	\$ 7,000
	GRPS Bond P	roposal	Expenditure		
	County:Kent		Click fo	or Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement					.,,,
Fund Raiser	Support Statewide	∐Oppose			
Expenditure # 2	4. Purpose:	✓ Local			
Name & Address:	Compensation/Darlene Lee/Final	nce Director			
Darling Communications					
1557 Belmar Dr SE Grand Rapids, MI	5. Ballot Proposal:		08/31/23	_{\$} 4311.50	\$ 6559.50
Crana Napids, Wi	GRPS Bond P	roposai	Date of	Ψ	Ψ
	County: Kent		Expenditure		
Check box if expenditure is payment of debt or obligation	County. 1011	<u> </u>	Click for	r Memo Itemization ⁻	·vne
reported on previous statement	√ Support	Oppose			, , p u
Fund Raiser	Statewide	✓ Local			
Expenditure # 3	4. Purpose:		· · · · · · · · · · · · · · · · · · ·	T	
Name & Address: Swift Printing	Printing for Ma	iler			
404 Bridge St NW	5. Ballot Proposal:	· · · · · · · · · · · · · · · · · · ·	09/08/23	² 4382.91	\$ 4382.91
Grand Rapids, MI 49504	GRPS Bond P	ronosal	Date of	\$	\$
	ON O BONG!	Toposai	Expenditure		
	County: Kent		Click fo	r Memo Itemization	Гуре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			•
Fund Raiser	Statewide	Local		i.	
Expenditure # 4	4. Purpose:	<u>V</u> Local			
Name & Address:	Kickoff Fundra	iser			
Long Road Distillers 537 Leonard NW		1001	09/12/23	,606.80	. 856.80
Grand Rapids, MI 49504	5. Ballot Proposal:		Date of	\$	\$
Grana Rapido, Mi 40004	GRPS Bond P	roposal	Expenditure		
	County: Kent		Click fo	r Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation	✓ Support				
reported on previous statement	_	Oppose			
<u>V</u> Fund Raiser	Statewide	✓ Local			
		Subto	otal this page	\$11,301.21	
•	/A- ··	Grand Total of S		0 - ::	
	(Com	plete on last page	or Schedule)	20,561.96	
2 4				Enter this total on Line 8a of	
Page of				the Summary Page	

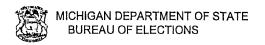


ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number 2023022

BALLOT QUESTION COMMITTEE 2. Co	ommittee Name Yes fo	or GR Kids			
3. Name and address of person to whom paid	State purpose of ex Identify the ballot pro Indicate whether support	pposal involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:		<u> </u>		
SquareSpace	Website mont	hly charge			
225 Varick Street; New York City, New		, <u> </u>	09/12/23	_{\$} 33.00	_{\$} 66.00
York, United States	5. Ballot Proposal:		Date of	\$00.00	\$00.00
	GRPS Bond P	roposai	Expenditure		
	County: KENT		Click fo	or Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement		П.			• .
Fund Raiser	Support Statewide	Oppose ✓ Local			
Expenditure # 2	4. Purpose:	[▼]rocai			
Name & Address:	Website Service	ce Charge			
SquareSpace	5. Ballot Proposal;			00.00	
225 Varick Street; New York City, New York, United States	GRPS Bond P	ronosal	09/13/23	_{\$} 30.00	\$ 96.00
Tony omed oldes	ON O DONG!	горозаг	Date of		
	County: Kent		Expenditure		•
Check box if expenditure is payment of debt or obligation			Click for	Memo Itemization	Гуре .
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	✓ Local			
Expenditure # 3 Name & Address:	4. Purpose:				
Darling Communications	Darling Communications/Darlene Lee/Finance	eDirector			
1557 Belmar Dr. SE	5. Ballot Proposal:		09/29/23	_{\$} 2540.00	\$ 9099.5
Grand Rapids, MI 49508	GRPS Bond F	Proposal	Date of	Ψ	Ψ
	· · · · · · · · · · · · · · · · · · ·	-	Expenditure		
	County: Kent		Click fo	r Memo Itemization	Гуре
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 4	4. Purpose:	<u> </u>			
Name & Address: Kyle Pray	Compensation/Cam	paign Manager			
701 Burns St. SW	5. Ballot Proposal:		10/01/23	_{\$} 2000.00	\$ 6000.00
Grand Rapids,MI 49503	GRPS Bond F	Proposal	Date of	Ψ	
•	GIVE 3 DOUG F	Toposai	Expenditure		
	County: Kent		Click fo	or Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation	Support	Oppose			
reported on previous statement					
Fund Raiser	Statewide	✓ Local			
		Subt	otal this page	\$4,603.00	
	40	Grand Total of	Schedules 4B	20 -11-	
	(0	omplete on last page	o ochedule)	Enter this total	1
2				on Line 8a of	

the Summary Page



ITEMIZED DIRECT EXPENDITURES **SCHEDULE 4B**

1. Committee I. D. Number 2023022

BALLOT	QUESTION	COMMITTEE
--------	----------	-----------

	ommittee Name 1 63	S FOI GR NIUS			
3. Name and address of person to whom paid	State purpose of 5. Identify the ballo indicate whether su	•	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:	-			
SquareSpace	QR Code	Purchase			
225 Varick Street; New York City, New	WIT COUL	T GIONAGO	10/02/23	02 75	400.75
York, United States	5. Ballot Proposal:			_{\$} 93.75	_{\$} 189.75
Tork, Ormod Glatos	GRPS Bon	d Proposal	Date of Expenditure		
			LAPSHURUIS		
Check box if expenditure is payment of debt or obligation	County:Kent		Click fo	r Memo Itemization	Туре
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 2	4. Purpose:	[V LOCAL			
Name & Address:	Website mo	nthly payment			
SquareSpace					
225 Varick Street; New York City, New	5. Ballot Proposal:		10/16/23	£33.00	° 222.75
York, United States	GRPS Bon	d Proposal	Date of	Φ	Ψ
	17 - 1-1		Expenditure		
	County: Kent		Ollak for	Money Homelmatics 7	s
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose	Click for	Memo Itemization T	уре
Fund Raiser	Statewide	Local			
Expenditure # 3	4. Purpose:	[V] Local			
Name & Address:	4. 1 diposo.				
	5. Ballot Proposal:			\$	\$
			Date of		т
		4	Expenditure		
	County:		Click for	Memo Itemization T	уре
Check box if expenditure is payment of debt or obligation	Support	Oppose		•	
reported on previous statement Fund Raiser					
Expenditure # 4	Statewide	Local			
Name & Address:	4. Purpose:				
	5. Ballot Proposal:			\$	\$
			Date of Expenditure		
			Experiditate		
	County:		Click fo	r Memo Itemization	Гуре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
	_				
Fund Raiser	Statewide	✓ Local			
		Subt	otal this page	\$126.75	
		Grand Total of	Schedules 4B	0 -	
		(Complete on last page	of Schedule)	20,561.96	
			•	Enter this total	•

· Professional State of the Sta

on Line 8a of the Summary

Page



FUND RAISE	R	1. Committee I.D. i	Number 202	23022	
SCHEDULE 4	4F		Yes for (GR Kids	
BALLOT QUESTION C	OMMITTEE	2. Committee Nam	e		
	- USE	A SEPARATE SHE	ET FOR EA	CH EVENT -	
3. Date Event Was Held		of Individuals Attending ting (whichever is	5. Type of F	Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held
09/12/23	45	<u>, </u>	Reception	on	Long Road Distillers 537 Leonard St. NW Grand Rapids, MI 4950
			<u> </u>		Private Residence
7. Total Contributions	_{\$} 17,825	.00			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·				
8. Other Receipts	\$			_	
9. Gross Receipts (Add lines 7 and 8)	\$ 17,8	25.00			
10. Total Cost of Event	\$ 856.80			*Includes In-Kind Expenditures Ma	Contributions and All de For the Event
1. Check if event was	a joint fund rais	ser and complete the	e following:		
Co-Sponsor(s)		Contribution (%)	Split	Ex	openditure 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 (4A), Itemized In-Kind Contributions Schedule (4-IK), Itemized Expenditures Schedule (4B) and the Summary Page.
- Each committee that participated in a joint fundraiser must file a Fund Raiser Schedule for the event.

Page	1	of	2
3 -		ω,	



FUND RAISER SCHEDULE 4F BALLOT QUESTION COMMITTEE

1.	Committee I.D. Number 2023022
	Yes for GR Kids
2.	Committee Name

	- USE A SE	PARATE SHE	ET FOR EA	CH EVENT -	·
3. Date Event Was Held	or Participating (whichever is greater)		5. Type of F	iund Raising Activity	6. Address and Name (If any) of the place where the activity was held Union Square 600 Broadway St NW Grand Rapids, MI 49504 Private Residence
7. Total Contributions	\$ 625.00				
8. Other Receipts	\$			_	
9. Gross Receipts (Add lines 7 and 8)	\$ 625.	Ø			
10. Total Cost of Event	\$ 250.00	·		*Includes In-Kind (Expenditures Mad	Contributions and All de For the Event
11. Check if event was	a joint fund raiser an	nd complete the	following:		
Co-Sponsor(s)		Contribution (%)	Split	Ехү	penditure 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 (4A), Itemized In-Kind Contributions Schedule (4-IK), Itemized Expenditures Schedule (4B) and the Summary Page.
- Each committee that participated in a joint fundraiser must file a Fund Raiser Schedule for the event.

Page	2	of 2	
------	---	------	--