

FILED 31 JAN 2024 PM 12:26

KENT COUNTY CLERK

CANDIDATE COMMITTEE FOR OFFICIAL USE ONLY GRAND RAPIDS, MICHIGAN **COVER PAGE** 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: 10/21/2023 to 12/31/2023 1. Committee I.D. Number 4. Candidate Last Name First Name M.I. LISA Р I YONS 129086 4a. Office Sought Including District # or Community Served (If applicable) 2. Committee Name CLERK, KENT COUNTY LISA POSTHUMUS LYONS FOR COUNTY CLERK 4b. County of Residence KENT COUNTY 5. Committee's Mailing Address 6. Treasurer's Name & Residential Address P.O. BOX 3373 ROBERT J MACOMBER GRAND RAPIDS, MI 49501 1725 BLAIR ST LANSING, MI 48910 Area Code and Phone (616) 965-6780

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may Area Code & Phone (616) 965-6780 be sent to this address by the filing official. 7. Treasurer's Business Address 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) 1725 BLAIR ST LANSING, MI 48910 Area Code and Phone (616) 965-6780 Area Code and Phone 9e. Dissolution of Candidate Committee 9. TYPE OF STATEMENT Required ONLY if candidate 9a. Pre-Election OR 9b. Post-Election By checking this item I/We certify any outstanding debt is not on the ballot for the current year: by the committee to the candidate or his or her spouse is here Pre-Election or Post-Election Statement relates to: by discharged and forgiven, and no longer collectible from July Quarterly the committee. The committee has no oustanding assets, Primary owes no lates fees or has any oustanding debt. October Quarterly General Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Convention Special $9c. | \times |$ Annual Statement (2023) Effective date of dissolution Coverage Year School Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to Caucus Note: The disposition of residual funds must be reported on indicate which Statement is being Schedule 1B and the Summary Page. amended.) Date of Election, Convention or Caucus 10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of

my\our knowledge and belief the contents are true, accurate and complete.

Submitted electronically. Current Treasurer or signature on file Designated Record keeper

Signature

Type or Print Name Signature Date

01/31/2024

Candidate _

Type or Print Name

Submitted electronically, signature on file Date

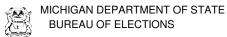
01/31/2024

1. Committee I.D. Number 129086

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name LISA POSTHUMUS LYONS FOR COUNTY CLERK

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		,,,,,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 97,954.37	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 97,954.37	(18.) \$ 128,129.37
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _0.00	(19.) \$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 97,954.37	(20.) \$ 128,129.37
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 613.16	(21.) \$ 613.16
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0.00	(22.) \$ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 3,043.47	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 6.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 3,049.47	(23.) \$ 24,054.15
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 1,043.97	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 157.06	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		7 704 04
DEBTS AND OBLIGATIONS	(11.) \$ 1,201.03	(24.) \$ 7,784.34
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT	1
13. Ending Balance of last report filed	(13.) \$_5,133.47	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 97,954.37	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$\frac{103,087.84}{}	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period		
(Add lines 9 and 11) 17. ENDING BALANCE	(16.) - \$ 4,250.50	
(Subtract line 16 from line 15)	(17.) \$ 98,837.34	

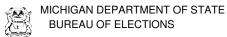


129086 1. Committee I.D. Number

CANDIDATE COMMITTEE

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 10/24/2023 Name & Address: POSTHUMUS LYONS LEADERSHIP FUND PO BOX 3373 GRAND RAPIDS, MI 49501 5. If over \$100.00 cumulative, please provide:	_{\$} 55.98	_{\$} 55.98
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/03/2023		
CHERI DEVOS 6807 FOX MEADOW LN SE ADA, MI 49301	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/03/2023 Name & Address: STEVE EHMANN 6807 FOX MEADOW LN SE ADA, MI 49301	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution:		_
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/03/2023 Name & Address DOUG DEVOS 2020 DEVONWOOD LN SE GRAND RAPIDS, MI 49546	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	25,030.98	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 1 of 30	Enter this total on line 3a of Summary Page.	



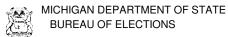
1. Committee I.D. Number _

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CANDIDATE COMMITTEE

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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 11/03/2023 Name & Address: MARIA DEVOS 2020 DEVONWOOD LN SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 8,325.00	_{\$} 8,325.00
Occupation EXECUTIVE Employer RDV CORPORATION Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/03/2023 Name & Address		_
DICK DEVOS 1170 FOX HOLLOW AVE SE ADA, MI 49301	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION 200 MONROE AVE NIM GRAND BARDS MI 49503		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Type of Contribution: Loan from a person Loan from	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/03/2023		
Name & Address DANIEL DEVOS 600 STEKETEE RD NE ADA, MI 49301	_{\$} 8,325.00	_{\$} 8,325.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer RDV CORPORATION		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser	T	_
Page Subtotal	33,300.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 2 of 30	line 3a of Summary Page.	

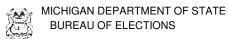


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

129086 1. Committee I.D. Number

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 11/03/2023 Name & Address: PAMELLA DEVOS 600 STEKETEE RD NE ADA, MI 49301 5. If over \$100.00 cumulative, please provide:	_{\$} 8,325.00	_{\$} 8,325.00
Occupation EXECUTIVE Employer RDV CORPORATION Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/10/2023 Name & Address		
JENNIFER PAUGH-MACOMBER 1725 BLAIR ST LANSING, MI 48910	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation CAMPUS PRESIDENT Employer MIAT COLLEGE OF TECHNOLOGY		
Business Address 2955 S HAGGERTY RD, CANTON, MI 48188		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/10/2023 Name & Address: MOLLY BRANHAM 14080 E AUSTIN RD MANCHESTER, MI 48158	_{\$} 10.00	<u>\$ 10.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/10/2023 Name & Address BENNETT J MACOMBER 1095 BOLTON FARMS LN GRAND LEDGE, MI 48837	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
Page Subtotal	8,370.00	_
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 3 of 30	line 3a of Summary Page.	



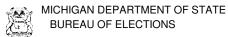
129086 1. Committee I.D. Number

CANDIDATE	COMMITTEE	2. 0

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 11/10/2023 Name & Address: CHRISTOPHER HALL 2432 BOULEVARD DR SW WYOMING, MI 49519 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 50.00
Occupation PASTOR Employer BUCK CREEK CHURCH		
Business Address 3746 BYRON CENTER AVE SW, WYOMING, MI 49519		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/15/2023 Name & Address		
SAM MOORE		
960 OAKLEIGH AVE NW	_{\$} 250.00	_{\$} 250.00
GRAND RAPIDS, MI 49504		
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer KENT CO. PARKS FOUNDATION		
Business Address P.O. BOX 230165, GRAND RAPIDS, MI 49523		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/15/2023 Name & Address: JO DEMARCO 519 W ABBEY MILL DR ADA, MI 49301	\$500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/15/2023 Name & Address BRUCE MATTHEWS 326 RIVERSIDE LOWELL, MI 49331	_{\$} 50.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation SINGER/SONGWRITER Employer SELF		
Business Address 326 RIVERSIDE, LOWELL, MI 49331		
Type of Contribution: Direct Loan from a person Fund Raiser		
	825.00	
Grand Total of All Schedules 1A	320.00	•
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	J

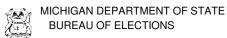
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129086 1. Committee I.D. Number

2. Committee Name

CANDIDATE COMMITTEE 2. Committee Name	POSTHUMUS LYON	IS FOR COUNTY CLERK
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 11/16/2023 Name & Address: JO DEMARCO 519 W ABBEY MILL DR ADA, MI 49301	_{\$} 500.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/16/2023 Name & Address JENNIE DEANE 6178 FLANNIGAN RD ORLEANS, MI 48865	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/17/2023 WENDELL CHRISTOFF 2801 SE 19TH AVE CAPE CORAL, FL 33904 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED	_{\$} 250.00	_{\$} 750.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/21/2023 Name & Address SAM MOORE 960 OAKLEIGH AVE NW GRAND RAPIDS, MI 49504	§ 104.10	_{\$} 354.10
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer KENT CO. PARKS FOUNDATION		
Business Address PO BOX 230165, GRAND RAPIDS, MI 49523		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	954.10	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 5 of 30	Enter this total on line 3a of Summary Page.	
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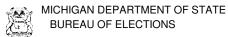
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CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/26/2023 Name & Address: GEORGEANNE CARGILL 15077 BARBER CREEK AVE KENT CITY, MI 49330 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED Business Address	_{\$} 100.00	_{\$} 200.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/30/2023 Name & Address CHRIS BECKERING 7915 LORAL PINES DR SE ADA, MI 49301	_{\$} 40.82	_{\$} 40.82
5. If over \$100.00 cumulative, please provide: Occupation BUILDER Employer PIONEER CONSTRUCTION		
Occupation BUILDER Employer PIONEER CONSTRUCTION Business Address 7915 LORAL PINES DR SE, ADA, MI 49301		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 11/30/2023 JENNIFER PAUGH-MACOMBER 1725 BLAIR ST LANSING, MI 48910 5. If over \$100.00 cumulative, please provide:	_{\$} 5.21	_{\$} 30.21
Occupation CAMPUS PRESIDENT Employer MIAT COLLEGE OF TECHNOLOGY		
Business Address 2955 S HAGGERTY RD, CANTON, MI 48188 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/30/2023 Name & Address DALE POSTHUMUS 2905 CALVERTON BLVD SILVER SPRING, MD 20904	_{\$} 10.41	_{\$} 60.41
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	156.44	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page of of	Page.	



1. Committee I.D. Number

129086

CANDIDATE COMMITTEE

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 12/01/2023 Name & Address: TGIF VICTORY FUND PO BOX 223 GRANDVILLE, MI 49468 5. If over \$100.00 cumulative, please provide:	\$ 10,000.00	_{\$} 10,000.00
Occupation Employer Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/01/2023 Name & Address DOUG KOOPMAN 1909 OBSERVATORY AVE SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 20.82	_{\$} 20.82
Occupation RETIRED Employer RETIRED		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/02/2023 Name & Address: JAKE DAVENPORT 527 LAFAYETTE ST LOWELL, MI 49331	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation DISTRICT REPRESENTATIVE Employer US HOUSE OF REPRESENTATIVES		
Business Address 8900 SOUTH RODGERS COURT SOUTHEAST, CALEDONIA, MI 49316 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/04/2023 Name & Address KATIE DEBOER 7210 RAMSDELL DR NE ROCKFORD, MI 49341	_{\$} 20.82	_{\$} 20.82
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 7 of 30	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

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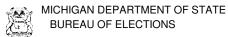
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/05/2023 Name & Address: PHIL YEITER 3140 WOODSBORO DR NE GRAND RAPIDS, MI 49525 5. If over \$100.00 cumulative, please provide:	_{\$} 104.10	_{\$} 104.10
Occupation GOVERNMENT RELATIONS Employer COREWELL HEALTH Business Address 1231 E BELTLINE AVE NE, GRAND RAPIDS, MI 49525		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/07/2023 Name & Address DAVID LEONARD		
6383 REDINGTON DR SE ADA, MI 49301	<u>\$</u> 20.82	<u>\$</u> 20.82
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 12/08/2023 Name & Address: CHRIS AFENDOULIS 240 EDGEHILL DR SE GRAND RAPIDS, MI 49546	_{\$} 104.10	_{\$} 104.10
5. If over \$100.00 cumulative, please provide:		
Occupation ACCOUNTANT Employer KENONAN INDUSTRIES		
Business Address 3044 WILSON DR NW, GRAND RAPIDS, MI 49534 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/08/2023 Name & Address DAVID BILARDELLO 2409 SANTA MONICA ST SE EAST GRAND RAPIDS, MI 49506	_{\$} 20.82	_{\$_} 20.82
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	249.84	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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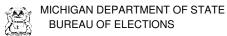
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/08/2023 Name & Address: WILLIAM BRENNAN 4120 E GABLES CT NE GRAND RAPIDS, MI 49525 5. If over \$100.00 cumulative, please provide:	_{\$} 20.82	_{\$} 20.82
Occupation ATTORNEY Business Address 4120 E GABLES CT NE, GRAND RAPIDS, MI 49525 Type of Contribution: Direct Dir		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/08/2023 Name & Address JON CHULSKI 6280 TIMPSON AVE SE ALTO, MI 49302	_{\$} 20.82	_{\$} 20.82
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer ADVANCED CAMPAIGN TECHNOLOGIES Business Address 6280 TIMPSON AVE SE, ALTO, MI 49302 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/08/2023 MARK HESSLER 2223 ESTELLE DR SE GRAND RAPIDS, MI 49506	_{\$} 20.82	_{\$} 20.82
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution: Direct		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/08/2023 Name & Address DEBBIE KUZDAL 5559 KOSTER DR SW WYOMING, MI 49418	_{\$} 10.41	_{\$_} 10.41
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 9 of 30	72.87 Enter this total on line 3a of Summary Page.	-



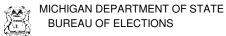
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LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/09/2023 Name & Address: JASON ELLIS 3085 CREEK DR S E KENTWOOD, MI 49512 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation SALES Employer REAL VIEW INC.		
Business Address 3196 KRAFT AVE SE, GRAND RAPIDS, MI 49512		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/09/2023		
JO DEMARCO 519 W ABBEY MILL DR ADA, MI 49301	_{\$} 20.82	_{\$} 1,020.82
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/09/2023 Name & Address: JIM WILLIAMS 3706 BUTTRICK AVE SE ADA, MI 49301	<u>\$ 104.10</u>	_{\$} 604.10
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/11/2023 Name & Address KEITH DEN HOLLANDER 3640 BUCKINGHAM LN HUDSONVILLE, MI 49426	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	244.92	_
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129086 1. Committee I.D. Number

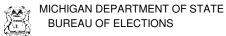
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/11/2023 Name & Address: SCOTT LANCASTER 55 IONIA AVE NW APT 1204 GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/11/2023 Name & Address MAGGIE LANCASTER 55 IONIA AVE NW APT. 1204 GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/11/2023 Name & Address: ANNIE LINK 12877 84TH ST SE ALTO, MI 49302	_{\$} 20.82	_{\$} 120.82
5. If over \$100.00 cumulative, please provide:		
Occupation PARTNER Employer SWISSLANE FARMS		
Business Address 12877 84TH ST SE, ALTO, MI 49302		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/11/2023 Name & Address DICK POSTHUMUS 10550 W HOLLAND LAKE RD GREENVILLE, MI 48838	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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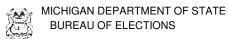
129086 1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/12/2023 Name & Address: JACKIE BILLINGSLEY 6303 EGYPT VALLEY CT NE ADA, MI 49301	_{\$} 20.82	_{\$} 20.82
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/12/2023 Name & Address DOUG DOZEMAN 1313 TRILLIUM TRAIL NE GRAND RAPIDS, MI 49525	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/12/2023 Name & Address: BRANDON ERHART 86 MONROE CENTER ST NW GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/12/2023 Name & Address MARK MURRAY 649 CAMBRIDGE BLVD SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$_} 1,100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	160.82	
Grand Total of All Schedules 1A	. 30.02	
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	.

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129086 1. Committee I.D. Number

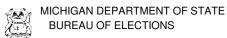
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

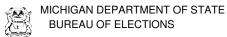
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/12/2023 Name & Address: NICHOLAS PARADISO 1755 SECRETARIAT DR SE GRAND RAPIDS, MI 49546	_{\$} 20.82	§ 20.82
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023		
Name & Address CTE JENNIFER MERCHANT FOR COUNTY COMMISSION		
13500 BECKWITH DR NE	_{\$} 100.00	_{\$} 100.00
LOWELL, MI 49331	Ψ	Ψ
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? VES 4. Date of Receipt 12/13/2023 Name & Address: ALBERT MAJORITY FUND 30 FLAT RIVER DR SE LOWELL, MI 49331	_{\$} 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 12/13/2023 Name & Address NICOLAS AYOUB 1251 MARTIN LUTHER KING GRAND RAPIDS, MI 49506	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation JUDGE Employer STATE OF MICHIGAN		
Business Address 180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	160.82	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
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129086 1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name LISA	POSTHUMUS LYON	IS FOR COUNTY CLERK
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 12/13/2023 Name & Address: CURT BENSON 411 MORRIS AVE SE GRAND RAPIDS, MI 49503	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation JUDGE Employer STATE OF MICHIGAN Business Address 180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address JASE BOLGER 201 MICHIGAN ST NW GRAND RAPIDS, MI 49503	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation CONSULTANT Employer TUSKER STRATEGIES Business Address 201 MICHIGAN ST NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: EMILY BRIEVE 7438 MISSOULA DR SE CALEDONIA, MI 49316	_{\$} 20.82	_{\$} 120.82
5. If over \$100.00 cumulative, please provide: Occupation COUNTY COMMISSIONER Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address DAN BURRILL 2879 BARCROFT DR SW WYOMING, MI 49418	_{\$} 208.20	_{\$} 308.20
5. If over \$100.00 cumulative, please provide: Occupation COUNTY COMMISSIONER Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 14 of 30	Enter this total on line 3a of Summary Page.	

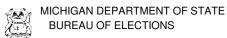


129086 1. Committee I.D. Number

CANDIDATE COMMITTEE

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 12/13/2023 Name & Address: JEFFREY DELONGCHAMP 4995 SPRING RIDGE DR NE ADA, MI 49301	_{\$} 100.00	_{\$} 600.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer MILLER CONSULTANTS		
Business Address 4615 DANVERS DR SE, KENTWOOD, MI 49512 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address		
DAVE DISHAW 2272 PALM DALE DR SW WYOMING, MI 49519	_{\$} 50.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation ENTREPRENUER Employer SELF Business Address 2272 PALM DALE DR SW, WYOMING, MI 49519		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: JENNIFER FABER 2442 FLETCHER DR NE GRAND RAPIDS, MI 49506	_{\$} 20.00	_{\$} 220.00
5. If over \$100.00 cumulative, please provide:		
Occupation JUDGE Employer 61ST DISTRICT COURT		
Business Address 180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address		
KEVIN FISK 12182 18 MILE RD NE GOWEN, MI 49326	_{\$} 20.00	_{\$} _120.00
5. If over \$100.00 cumulative, please provide:		
Occupation GOVERNMENT AFFAIRS Employer LKQ CORP.		
Business Address 12182 18 MILE RD, GOWEN, MI 49326 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	190.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enterthic to 1	J
Page 15 of 30	Enter this total on line 3a of Summary Page.	



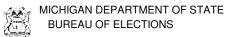
1. Committee I.D. Number

129086

CANDIDATE COMMITTEE

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 12/13/2023 Name & Address: MARC GESINK 635 HOYT ST SE	40.00	40.00
GRAND RAPIDS, MI 49507	_{\$} 40.00	_{\$} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023		
Name & Address NATE GILLESPIE		
201 MICHIGAN ST NW	_{\$} 20.00	_{\$} 20.00
APT 511	<u>\$</u> 20.00	\$ 20.00
GRAND RAPIDS, MI 49503		
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 12/13/2023 Name & Address: CHRIS GLASS 819 GIDDINGS AVE SE GRAND RAPIDS, MI 49506	\$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 12/13/2023		
Name & Address DAVID HAMM 1530 ANDOVER RD SE GRAND RAPIDS, MI 49506	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	90.00	
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1. Committee I.D. Number

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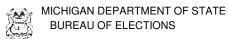
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: JAMES HAVEMAN 2656 NORWAY MAPLE CT KENTWOOD, MI 49512	_{\$} 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 #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address DAVID HILDENBRAND 2700 TIMPSON AVE SE LOWELL, MI 49331	_{\$} 20.82	_{\$} 270.82
5. If over \$100.00 cumulative, please provide: Occupation GOVERNMENT AFFAIRS Employer KELLEY CAWTHORNE Business Address 208 N CAPITOL AVE, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: HORSEPOWER PAC 1731 BLUE GRASS RD LANSING, MI 48906	\$ 100.00	_{\$} 100.00
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 12/13/2023 RICHARD HOUSKAMP 838 ALEDA CT SE GRAND RAPIDS, MI 49508	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
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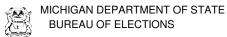
1. Committee I.D. Number

129086

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: BRIAN KOLESAR 4221 DEL MAR VILLAGE DR SW WYOMING, MI 49418 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 15.00	_{\$} 15.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address DENISE KOLESAR 4221 DEL MAR VILLAGE DR SW WYOMING, MI 49418	_{\$} 15.00	_{\$_} 15.00
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 12/13/2023 Name & Address: DAN KOORNDYK 35 BEL AIR DR NE GRAND RAPIDS, MI 49503	_{\$} 30.82	_{\$} 130.82
5. If over \$100.00 cumulative, please provide: Occupation INSURANCE AGENT Employer STATE FARM / KOORNDYK AGENCY		
Business Address 3219 EASTERN AVE SE, GRAND RAPIDS, MI 49548		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address HEATHER LOMBARDINI 106 W ALLEGAN ST #200 LANSING, MI 48933 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$} 20.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	80.82	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 18 of 30	Enter this total on line 3a of Summary	
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129086 1. Committee I.D. Number

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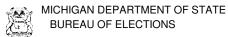
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: RUSTY MERCHANT 13500 BECKWITH DR NE LOWELL, MI 49331	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation LOBBYIST		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address KELLY MITCHELL 5915 CASTLE BROOK AVE SE KENTWOOD, MI 49508 5. If over \$100.00 cumulative, please provide:	\$20.00	_{\$} 20.00
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: JON NUNN 143 LAFAYETTE AVE NE GRAND RAPIDS, MI 49503	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address CHARLES SECCHIA 5101 SPRING RIDGE DR NE ADA, MI 49301	_{\$} 2,000.00	_{\$} 3,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer SELF		
Business Address 220 LYON ST NE, STE 510, GRAND RAPIDS, MI 49546 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,140.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	-

Page 19 of 30



1. Committee I.D. Number ___

129086

CANDIDATE COMMITTEE

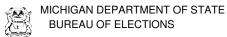
2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address: JOYCE SMITH 2563 PINE DUNES DR SW WYOMING, MI 49418	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	\$	Ð
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/13/2023 Name & Address VERHEULEN LEADERSHIP FUND 4167 IMPERIAL DR NW	_{\$} 30.00	_{\$} 230.00
GRAND RAPIDS, MI 49534 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 12/13/2023 Name & Address: JOHN WETZEL 3854 CRYSTAL ST SW GRANDVILLE, MI 49418	_{\$} 20.00	<u>\$</u> 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 12/14/2023 Name & Address TISH LOFTIS 1623 SPRINGWIND DR SW BYRON CENTER, MI 49315	_{\$} 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		
Page Subtotal	122.05	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	_

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Enter this total on line 3a of Summary Page.



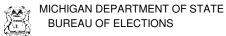
1. Committee I.D. Number

129086

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/16/2023 Name & Address: ROBERT SMITH 2845 BURTON ST SE GRAND RAPIDS, MI 49546	_{\$} 10.41	_{\$} 10.41
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/19/2023 Name & Address		
JASE BOLGER	500.00	500.00
201 MICHIGAN ST NW GRAND RAPIDS, MI 49503	\$500.00	_{\$} 520.00
5. If over \$100.00 cumulative, please provide:		
Occupation CONSULTANT Employer TUSKER STRATEGIES		
Business Address 201 MICHIGAN ST NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address:		
MIKE ELLIS 2090 STICKLEY DR SE	_{\$} 1,000.00	_{\$} 1,000.00
GRAND RAPIDS, MI 49546	Ψ	\$ 1,000100
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer ELLIS PARKING		
Business Address 40 PEARL ST NW, STE 824, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address		
MARK MURRAY		
1940 TALAMORE CT SE	_{\$} 2,000.00	。3,100.00
GRAND RAPIDS, MI 49546	Ψ	\$
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Occupation RETINED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	3,510.41	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 21 of 30	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

129086

CANDIDATE COMMITTEE

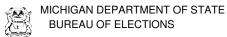
2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/20/2023 Name & Address: JOAN SECCHIA 2833 BONNELL AVE SE EAST GRAND RAPIDS, MI 49506	_{\$} 4,000.00	_{\$} 4,000.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address PATRICIA AYARS 3604 FULTON ST E APT 233 GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 20.00	_{\$_} 20.00
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/20/2023 TOM BYLENGA 1537 HAWTHORNE HILLS DR SE ADA, MI 49301	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer STAR TRUCK RENTALS		
Business Address 3940 EASTERN AVE SE, WYOMING, MI 49508		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address JOHN DARLINE 35 PORTER HILLS DR SE GRAND RAPIDS, MI 49546	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	4,240.00	
Grand Total of All Schedules 1A	.,= .0.00	-
(Complete on last page of Schedule)	Enter this total on	

Page 22 of 30

line 3a of Summary Page.



1. Committee I.D. Number

129086

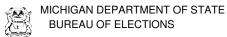
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/20/2023 Name & Address: HOLLY DEGENNARO 1121 EDISON AVE NW GRAND RAPIDS, MI 49504 5. If over \$100.00 cumulative, please provide:	_{\$} 10.00	_{\$} 10.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address JO DEMARCO 519 W ABBEY MILL DR	_{\$} 20.00	_s 1,040.82
ADA, MI 49301	Ψ	Ψ
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address: MICHAEL DEVRIES 3632 MONARCH DR NE GRAND RAPIDS, MI 49525	_{\$} 40.00	_{\$} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address KIM GARY 7635 LUCA VISTA DR ROCKFORD, MI 49341	_{\$} 20.00	_{\$_} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	90.00	-
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	-

Page 23 of 30



1. Committee I.D. Number

129086

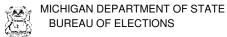
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

Enter contributor's name a middle initial. Check box t Committee (PAC) Report	o indicate if cont	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1 Name & Address: AREND LUBBERS 3761 COOK VALL GRAND RAPIDS, 5. If over \$100.00 cumula	EY BLVD S MI 49546		YES 4. Date of Receipt 12/20/2023	_{\$} 20.00	_{\$} 20.00
Occupation		_	Employer		
Business Address Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution #2 Name & Address SUSAN MCCART EDGEWOOD AVE GRAND RAPIDS,	E NE		YES 4. Date of Receipt 12/20/2023	\$ <u>40.00</u>	_{\$} 40.00
5. If over \$100.00 cumula	tive, please pro	vide	:		
Occupation		_En	ployer		
Business Address			<u></u>		
Type of Contribution:	Direct		Loan from a person 🔽 Fund Raiser		
3. Contribution # 3 Name & Address: THOMAS MOERI 6516 LEISURE C CALEDONIA, MI	REEK DR S	SE	YES 4. Date of Receipt <u>12/20/2023</u>	\$ 5.00	_{\$} 5.00
5. If over \$100.00 cumula	tive, please pro	vide	:		
Occupation		_ E	mployer		
Business Address	<u>-</u>				
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address JANE OWEN 9580 68TH ST SE ALTO, MI 49302	PAC Receipt?		YES 4. Date of Receipt <u>12/20/2023</u>	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumula	itive, please pro	vide	:		
Occupation		_	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
			Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	85.00 Enter this total on	
Page 24 of 30				line 3a of Summary Page.	

Page <u>24</u> of <u>30</u>



1. Committee I.D. Number 12908

129086

CANDIDATE COMMITTEE

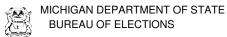
2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/20/2023 Name & Address: MICHAEL POWERS 1965 15 MILE RD NE SPARTA, MI 49345 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address GEORGE PULASKI 1946 CROSS BEND ST NE GRAND RAPIDS, MI 49505	_{\$} 3.00	§ 3.00
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 12/20/2023 Name & Address: ELAINE RONGEY 2263 EL DORADO DR SE EAST GRAND RAPIDS, MI 49506	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/20/2023 Name & Address CARL VERBEEK 2775 WHITEBUD CT SE KENTWOOD, MI 49512	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	173.00	
	Enter this total on	

 $_{\text{Page}}\underline{25}_{\text{of}}\underline{30}$

Enter this total on line 3a of Summary Page.



1. Committee I.D. Number 12908

129086

CANDIDATE COMMITTEE

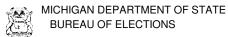
2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/20/2023 Name & Address: RANDY WILCOX 13089 68TH ST SE ALTO, MI 49302	_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/25/2023 Name & Address		
JOHN KENNEDY		
4150 E PARIS AVE SE	\$ 2,000.00	_{\$} 2,000.00
KENTWOOD, MI 49512	Ψ	Φ
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer AUTOCAM MEDICAL		
Business Address 4150 E PARIS AVE SE, KENTWOOD, MI 49512		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt 12/26/2023		
TOM BYLENGA 1537 HAWTHORNE HILLS DR SE	_{\$} 1,000.00	_s 1,200.00
ADA, MI 49301	\$ 1,000100	\$ 1,200.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer STAR TRUCK RENTALS		
Business Address 3940 EASTERN AVE SE, WYOMING, MI 49508		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address ALAN ABRAHAM	-	
7841 WHITBURN DR SE	^{200.00}	, 200.00
ADA, MI 49301	<u>\$</u> 200.00	\$ 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		1
Page Subtotal	3,205.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J

 $_{\text{Page}}\underline{26}_{\text{of}}\underline{30}$

Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

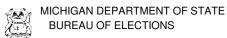
129086 1. Committee I.D. Number

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/26/2023 Name & Address: PHILIP BALKEMA 1541 PONTIAC RD SE		
GRAND RAPIDS, MI 49506	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:	¥	
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address		
WILLIAM BUCHANAN	40.00	40.00
3279 WILDRIDGE DR NE GRAND RAPIDS, MI 49525	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address: J.C. HUIZENGA 1551 BRIARCLIFF DR SE GRAND RAPIDS, MI 49546	_{\$} 200.00	_{\$} 1,200.00
5. If over \$100.00 cumulative, please provide:		
Occupation EXECUTIVE Employer SELF		
Business Address 3755 36TH STREET SE, STE 100, GRAND RAPIDS, MI 49512		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address GREGORY MADURA		
4655 WESTGATE AVE NW COMSTOCK PARK, MI 49321	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	250.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	-

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1. Committee I.D. Number

129086

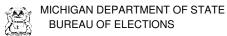
CANDIDATE COMMITTEE

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/26/2023 Name & Address: MONTE REINERT 1053 SAN JOSE DR SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 40.00	_{\$} 40.00
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address DONNA SCHMIDT 9340 LAKE GERALD DR SPARTA, MI 49345	_{\$} 40.00	_{\$} 40.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/26/2023 Name & Address: DONALD STORTEBOOM 7160 WILKINSON DR NE ROCKFORD, MI 49341	§ 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 12/27/2023 Name & Address JIM WILLIAMS 3706 BUTTRICK AVE SE ADA, MI 49301	_{\$} 2,000.00	_{\$_} 2,604.10
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution:		
Page Subtotal	2,100.00	
Grand Total of All Schedules 1A	۷, ۱۰۰۰.۰۰	-
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	J

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1. Committee I.D. Number 1290

129086

CANDIDATE COMMITTEE

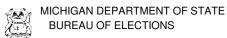
2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

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 12/28/2023 Name & Address: MARK BISSELL 2840 PIONEER CLUB RD SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 1,000.00	_{\$} 1,000.00
Occupation EXECUTIVE Employer BISSELL Business Address 2345 WALKER AVE NW, GRAND RAPIDS, MI 49544 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/29/2023 Name & Address KAREN DEBLAAY 7159 THORNAPPLE RIVER DR SE ADA, MI 49301	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer FL HANSEN CORP Business Address 7159 THORNAPPLE RIVER DR SE, ADA, MI 49301 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/29/2023 Name & Address: GERALD DEBLAAY 7159 THORNAPPLE RIVER DR SE ADA, MI 49301	§ 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE Employer FL HANSEN CORP Business Address 7159 THORNAPPLE RIVER DR SE, ADA, MI 49301 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 12/29/2023 Name & Address WILLIAM BRENNAN 4120 E GABLES CT NE GRAND RAPIDS, MI 49525	_{\$} 80.00	_{\$_} 100.82
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer BRENNAN LEGAL CONSULTING PLLC		
Business Address 4120 E GABLES CT NE, GRAND RAPIDS, MI 49525 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,480.00 Enter this total on line 3a of Summary	

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Enter this total on line 3a of Summary Page.



SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number ____129086

....

2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 12/29/2023 Name & Address: JOHN LOWERY 3188 BONNELL AVE SE EAST GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer APPLIED IMAGING Business Address 5555 GLENWOOD HILLS PKWY SE, GRAND RAPIDS, MI 49512 Type of Contribution: Direct Loan from a person V Fund Raiser 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemization Cocupation 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 5. If over \$100.00 cumulative, please provide: Cocupation Fand Raiser 5. If over \$100.00 cumulative, please provide: S. Click Here for Memo Itemization S. If over \$100.00 cumulative, please provide: Cocupation Fand Raiser
Occupation OWNER Employer APPLIED IMAGING Business Address 5555 GLENWOOD HILLS PKWY SE, GRAND RAPIDS, MI 49512 Type of Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization PAC Receipt? YES 4. Date of Receipt Susiness Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Susiness Address: Type of Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cupation Susiness Address: Susiness Address Susiness Address: Susiness Address Susiness
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 Name & Address S. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer
3. Contribution #2 Name & Address S
5. If over \$100.00 cumulative, please provide: OccupationEmployer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Same & Address: Click Here for Memo Itemization \$
Occupation Employer
Business Address Type of Contribution: Direct
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt S
Name & Address: \$\$ S S Click Here for Memo Itemization Occupation Employer
5. If over \$100.00 cumulative, please provide: Occupation Employer
5. If over \$100.00 cumulative, please provide: Occupation Employer
D : AU
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: Click Here for Memo Itemization
Occupation Employer
Business Address
Type of Contribution: Direct Loan from a person Fund Raiser
Page Subtotal 100.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)

 $_{\text{Page}}\underline{30}_{\text{ of }}\underline{30}$

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 129086

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2. Committee Name

LISA POSTHUMUS LYONS FOR COUNTY CLERK

OANDIDA I E OOMIN					
Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution	Type of In-Kind Contribution (Check applicable box) Date of Receipt		7. Amount or Fair Market Value		8. Cumulative for Election Cycle (Through
is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Name & Address of Vendor from whom goods or services we purchased	re			date in Item 5)
Contribution # 1 PAC Receipt? ✓ Yes	4. Endorsement or Guarantee of Bank Loan				
Name & Address: GRAND RAPIDS CHAMBER PAC 250 MONROE AVE NW	Goods Donated or Loaned Services Donated	<u>\$</u> 3	30.00	\$	130.00
#150	Goods or Services Purchased by Candidate or Others				
GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation:	Goods or Services Purchased by Candidate or Others- LOA Description FUNDRAISER SPACE	.N			
Employer Name & Business Address:	5. Date Of Receipt: 12/13/2023				
	6. Vendor Name & Address: GRAND RAPIDS CHAMBER 250 MONROE AVE NW,				
	#150,				
Fund Raiser Contribution	GRAND RAPIDS, MI 49503				
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan				
Name & Address CHARLES SECCHIA	Goods Donated or Loaned Services Donated	_	0.00		
5101 SPRING RIDGE DR NE	Goods or Services Purchased by Candidate or Others	\$ /	0.38	\$	3,070.38
ADA, MI 49301	Goods or Services Purchased by Candidate or Others- LO	AN			
If over \$100.00 cumulative, please provide:	Description TABLE RENTAL				
Occupation: EXECUTIVE	5. Date Of Receipt: 12/13/2023	_			
Employer Name & Address:					
SELF 220 LYON ST NE,	6. Vendor Name & Address:				
STE 510,	SPECIAL OCCASIONS 850 CESAR E. CHAVEZ AVE SW,				
GRAND RAPIDS, MI 49546	GRAND RAPIDS, MI 49503				
✓ Fund Raiser Contribution	GIV (10 F) (1 10 G), WII 40000				
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan				
Name & Address:	Goods Donated or Loaned Services Donated \$, 51	2.78	_s 3	3,583.16
CHARLES SECCHIA	Goods or Services Purchased by Candidate or Others	-		· —	
5101 SPRING RIDGE DR NE	Goods or Services Purchased by Candidate or Others-LOA	\ NI			
ADA, MI 49301					
If over \$100.00 cumulative, please provide:	Description EVENT FOOD & BEVERAGE	_			
Occupation: EXECUTIVE Employer Name & Address:	5. Date Of Receipt: 12/13/2023				
SELF	6. Vendor Name & Address:				
220 LYON ST NW,	KITCHEN 67				
SUITE 510,	1977 E BELTLINE AVE NE, GRAND RAPIDS, MI 49525				
GRAND RAPIDS, MI 49503	GITAND HAFIDS, WII 49020				
Fund Raiser Contribution				1	
	Page Sub	total	613 16	1	3 713 16

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

613.16

Enter this total on line 6 of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 129086

2. Committee Name LISA POSTHUMUS LYONS FOR COUNTY CLERK

O Name and address of a survey and a tauch and a said	4 Domestic (Description of Lafe weekling)	T = D-1-	0. 4
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name ROBERT J MACOMBER		10/23/2023	\$ 800.00
Address	Purpose: COMPLIANCE / CONSULTING	Date	<u> </u>
Address 1725 BLAIR ST	Purpose:		
LANSING, MI 48910			
, and the second	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
		10/00/0000	
Name ROBERT J MACOMBER		10/23/2023	\$ 672.54
Address	Purpose: REIMBURSEMENT	Date	
1725 BLAIR ST			
LANSING, MI 48910	Memo	Itemization Bel	ow
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	statement		
Name GODADDY		10/23/2023	\$ (672.54)
Address	Purpose: DOMAIN RENEWALS	Date	· <u>(0 · 1 ·)</u>
14455 N HAYDEN RD	. a.peee.		
SCOTTSDALE, AZ 85260	(Memo	Itemization)	
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
NATIONBUILDER		11/00/0000	
NATIONDOILDER		11/30/2023	\$ 92.49
Address	Purpose: PROCESSING FEE	Date	
520 S GRAND AVE			
LOS ANGELES, CA 90071			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name KENT COUNTY CLERK		12/12/2023	\$ 100 00
Address	Purpose: CANDIDATE FILING FEE	Date	\$ <u>100.00</u>
300 MONROE AVE NW			
GRAND RAPIDS, MI 49503	Cheek hey if this expenditure is necessary of		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	1,665.03
	Grand Total of all S	Schedules 1R	,
	(Complete on last page		

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

129086 1. Committee I. D. Number

LISA POSTHUMUS LYONS FOR COUNTY CLERK

OANDIDATE COMMITTEE 2. C	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name NATIONBUILDER		12/18/2023	000.05
INATIONDOILDEN	CURCORIETION		\$ <u>200.85</u>
Address	Purpose: SUBSCRIPTION	Date	
520 S GRAND AVE			
LOS ANGELES, CA 90071			
,	Check box if this expenditure is payment of		
□	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name ROBERT J MACOMBER		12/18/2023	
" NODER I J WACOWIDER			\$ 184.84
Address	Purpose: REIMBURSEMENT	Date	
1725 BLAIR ST	i uipose.		
	Memo	Itemization Bel	ow
LANSING, MI 48910			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Experiental 6 #0			
NATIONBUILDER		12/01/2023	(0.4.00)
			\$ <u>(64.96)</u>
Address	Purpose: SUBSCRIPTION UPGRADE	Date	
520 S GRAND AVE			
LOS ANGELES, CA 90071	(Memo	Itemization)	
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #4			
Name DROPBOX		12/18/2023	
			\$ (119.88)
Address	Purpose: SUBSCRIPTION RENEWAL	Date	
1800 OWENS ST			
SAN FRANCISCO, CA 94158	(Memo	Itemization)	
,	Charle have if their assessment in the second of		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
'			
Name RIGHT STRATEGIES		12/18/2023	. 000 00
Address	Purpose: MAIL PROCESSING AND POSTAGE	Date	\$ <u>923.00</u>
2153 WEALTHY ST SE	Fulpose.		
GRAND RAPIDS, MI 49506			
011/11/07 11/11 100, WII 40000	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	1,308.69
			.,000.00
	Grand Total of all S		
	(Complete on last page	or Scheanle)	

Enter this total on line 8a of Summary Page



SCHEDULE 1B CANDIDATE COMMITTEE

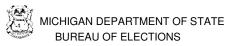
1. Committee I. D. Number

129086

2. Committee Name LISA POSTHUMUS LYONS FOR COUNTY CLERK

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name NATIONBUILDER Address 520 S GRAND AVE LOS ANGELES, CA 90071	Purpose: PROCESSING FEE Check box if this expenditure is payment of debt or obligation reported on previous	12/31/2023 Date	\$ <u>5.20</u>
Expenditure #2 Name WINRED PROCESSING	statement	12/31/2023	\$ 64.55
Address 1776 WILSON BLVD STE 530	Purpose: CREDIT CARD PROCESSING	Date	* <u>0 1.00</u>
ARLINGTON, VA 22209 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name			Φ.
Address	Purpose:	Date	\$
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo I	temization Type
Expenditure #4 Name			\$
Address	Purpose:	Date	·
□	Click H Check box if this expenditure is payment of debt or obligation reported on previous	ere for Memo I	temization Type
Expenditure #5 Name	statement		
Address	Purpose:	 Date	\$
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo I	temization Type
	Subtor	al this page	69.75
	Grand Total of all S		3,043.47

Enter this total on line 8a of Summary Page



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

129086 1. Committee I. D. Number

LISA POSTHUMUS LYONS FOR COUNTY CLERK 2. Committee Name (For use by officeholders only) 4. Description of Disbursement 3. Name and address of person to whom disbursement was made 6. Amount of 5. Date (Be specific & you may assign a Disbursement disbursement code*) Disbursement # 1 Name & Address STAFF LODGING HOTELS.COM 12/07/2023 _{\$}174.97 5400 LYNDON B JOHNSON FWY Date STE 500 DALLAS, TX 75240 Disbursement Code FO Check box if this disbursement is payment of debt or obligation Fund Raiser reported on previous statement Disbursement # 2 Purpose Name & Address: \$257.00 STAFF HOLIDAY GIFT CARDS **BIGGBY** 2501 COOLIDGE RD EAST LANSING, MI 48823 Disbursement Code FO Check box if this disbursement is payment of debt or obligation Fund Raiser reported on previous statement Purpose Disbursement #3 Name & Address: REIMBURSEMENT ROBERT J MACOMBER 1725 BLAIR ST LANSING, MI 48910 Memo Itemization Below Disbursement Code FO Check box if this disbursement is payment of debt or obligation **Fund Raiser** reported on previous statement Disbursement # 4 Purpose Name & Address: PARKING CITY OF GRAND RAPIDS Date 300 MONROE AVE NW (Memo Itemization) GRAND RAPIDS, MI 49503 Disbursement Code

Fund Raiser

Subtotal this page

1.043.97

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

on line 10a of Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

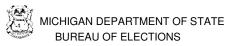
Check box if this disbursement is payment of debt or obligation

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page 1 of 2

reported on previous statement

Enter this total



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

129086 1. Committee I. D. Number

LISA POSTHUMUS LYONS FOR COUNTY CLERK

(For use by officeholders only)	Committee Name		
3. Name and address of person to whom disbursement was made	Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: UCCELLOS DOWNTOWN	Purpose STAFF HOLIDAY GIFT CARD	_	\$ <u>(600.00)</u>
122 MONROE CENTER ST NW GRAND RAPIDS, MI 49503		Date (Memo Itemization))
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>FO</u> Fund Raiser		
Disbursement # 2 Name & Address:	Purpose		\$
		Date	·
		Click for Memo Iten	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeFund Raiser		
Disbursement # 3 Name & Address:	Purpose		\$
		Date	. —
		Click for Memo Item	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code Fund Raiser		
Disbursement # 4 Name & Address:	Purpose		
		Date	_ \$
		Click for Memo Iten	ization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code Fund Raiser		
	,	Subtotal this page	0.00
	Grand Total of (Complete on last	all Schedules 1C	1,043.97

Enter this total on line 10a of Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

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FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 129086

2. Committee Name LISA POSTHUMUS LYONS FOR COUNTY CLERK

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- USE A SEPARATE SHEET FOR EACH EVENT -			
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. GRAND RAPIDS CHAMBER
12/13/2023	100	KENT COUNTYWIDE 5 JOINT FUNDRAISER	250 MONROE AVE NW GRAND RAPIDS, MI 49503 Private Residence
7. Total Contributions	27,391.99		
8. Other Receipts	0.00		
9. Gross Receipts (Add lines 7 a	and 8) 27,391.99	 	
10. Total Cost of Event (Total Cost includes In-Kind Cor	8,003.55 ntributions and All Expenditures	Made For the Event)	
11. Check if event was a join	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)
LISA POSTHUMUS LYONS FOR COUNTY CLERK	20		20
COMM TO KEEP SHERIFF MICHELLE LAJOYE-YOUNG	<u>20</u>		20
COMM TO ELECT PETER MACGREGOR	<u>20</u> 20		20
COMM TO ELECT CHRIS BECKER	20 20		20

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

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Page		of I

COMM TO ELECT KEN YONKER FOR KC DRAIN COMM