



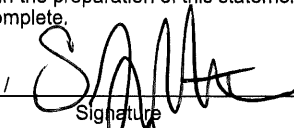

MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 01/01/2024 to 07/21/2024

<b>1. Committee I.D. Number</b> <b>128454</b>		<b>4. Candidate Last Name</b> <b>Ponstein</b> <b>First Name</b> <b>Stanley</b> <b>M.I.</b> <b>J</b>	
<b>2. Committee Name</b> <b>Citizens for Stan Ponstein</b>		<b>4a. Office Sought Including District # or Community Served (If applicable)</b> <b>County Commissioner - District 7</b> <input checked="" type="checkbox"/>	
<b>5. Committee's Mailing Address</b> <b>3967 Edgewood</b> <b>Grandville, Michigan 49418</b>  Area Code and Phone <u>(616) 460-8138</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		<b>6. Treasurer's Name &amp; Residential Address</b> <b>Stan Ponstein</b> <b>3967 Edgewood</b> <b>Grandville, Michigan 49418</b>  Area Code & Phone <u>(616) 460-8138</u>	
<b>7. Treasurer's Business Address</b> <b>N/A</b>  Area Code and Phone _____		<b>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</b> <b>N/A</b>  Area Code and Phone _____	
<b>9. TYPE OF STATEMENT</b> 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus <u>08/06/2024</u>		<b>9e. Dissolution of Candidate Committee</b> <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
<b>10. Verification:</b> I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper <b>Stanley J Ponstein</b> Type or Print Name		Signature  Date <u>7/25/2024</u>	
Candidate <b>Stanley J Ponstein</b> Type or Print Name		Signature  Date <u>7/25/2024</u>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 128454

2. Committee Name Citizens for Stan Ponstein

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

<b>RECEIPTS</b>		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>1,000.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$1,000.00</u>	(18.) \$ <u>\$1,000.00</u>
<b>4. Other Receipts</b> (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$1,000.00</u>	(20.) \$ <u>\$1,000.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions</b> (Schedule 1-IK, Column 7)	(6.) \$	<u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
<b>7. In-Kind Expenditures</b> (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$225.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$225.00</u>	(23.) \$ <u>\$225.00</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed <b>by</b> the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed <b>to</b> the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$102.45</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$1,000.00</u>	
<b>15. SUBTOTAL</b> Add lines 13 and 14	(15.) = \$	<u>\$1,002.45</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>\$225.00</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$774.45</u>	*



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 128454  
2. Committee Name Citizens for Stan Ponstein

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/01/2024</u></p> <p>Name &amp; Address: <b>Stan Ponstein</b> <b>3967 Edgewood</b> <b>Grandville, Michigan 49418</b></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retail</u>      Employer <u>Costco Wholesale</u> Business Address <u>Issaquah, Washington</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
<p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>06/10/2024</u></p> <p>Name &amp; Address: <b>Commercial Alliance of Realtors - PAC</b> <b>678 Front Street Ave</b> <b>Grand Rapids, Michigan</b></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
<p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$1,000.00**

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

**\$1,000.00**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 128454  
2. Committee Name Citizens for Stan Ponstein

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Polish Falcons</b>  Address <b>957 Fulton St Grand Rapids, Michigan</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Sponsor</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2024</u> Date	\$ <u>100.00</u>
Expenditure #2 Name <b>Rinks to Links</b>  Address <b>Grand Rapids Sled Wings Grand Rapids, Michigan</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Sponsor</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/2024</u> Date	\$ <u>100.00</u>
Expenditure #3 Name <b>Squarespace</b>  Address <b>225 Varrick St New York, NY 10014</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Domain registration</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/2024</u> Date	\$ <u>25.00</u>
Expenditure #4 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Subtotal this page			\$225.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$225.00

Enter this total  
on line 8a of  
Summary Page