



FILED

26 JUL 2024 PM 03:59

KENT COUNTY CLERK
GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
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: 01/01/2024 to 07/21/2024

1. Committee I.D. Number

2022045

2. Committee Name

COMMITTEE TO ELECT NICHOLAS VANDERVEEN

4. Candidate Last Name First Name M.I.

VANDERVEEN NICHOLAS H

4a. Office Sought Including District # or Community Served (If applicable)

COUNTY COMMISSIONER, 6TH DISTRICT, KENT COUNTY

4b. County of Residence **KENT COUNTY**

5. Committee's Mailing Address

**312 FULTON ST E
GRAND RAPIDS, MI 49503**

Area Code and Phone (616) 288-4231
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

**NICHOLAS VANDERVEEN
1435 BLYTHE DR NW
GRAND RAPIDS, MI 49504**

Area Code & Phone (616) 288-4231

7. Treasurer's Business Address

**1435 BLYTHE DR NW
GRAND RAPIDS, MI 49504**

Area Code and Phone (616) 288-4231

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone () -

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☒ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement () Coverage Year

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

Date of Election, Convention or Caucus

08/06/2024

9e. Dissolution of Candidate Committee

☐ 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.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper _____ /

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/26/2024

Candidate _____ /

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/26/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2022045

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5,069.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5,069.00</u>	(18.) \$ <u>5,369.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>5,069.00</u>	(20.) \$ <u>5,369.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>436.38</u>	(21.) \$ <u>1,128.38</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>250.00</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>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>250.00</u>	(23.) \$ <u>1,619.62</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
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>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>1,007.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>36.38</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5,069.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>5,105.38</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>250.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4,855.38</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 2022045
2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/01/2024</u> Name & Address: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504		\$ <u>500.00</u>	\$ <u>1,192.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BROWER VANDER VEEN PLC</u> Business Address <u>312 FULTON ST E, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>06/14/2024</u> Name & Address: KENT COUNTY DEMOCRATIC PARTY 301 FULLER AVE NE GRAND RAPIDS, MI 49503		\$ <u>3,000.00</u>	\$ <u>3,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/01/2024</u> Name & Address: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504		\$ <u>500.00</u>	\$ <u>1,692.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BROWER VANDER VEEN PLC</u> Business Address <u>312 FULTON ST E, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/11/2024</u> Name & Address: HUNTER JUDSON 3100 HATHAWAY DR SE GRAND RAPIDS, MI 49506		\$ <u>69.00</u>	\$ <u>69.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RECRUITER</u> Employer <u>THE JUDSON GROUP</u> Business Address <u>1059 WEALTHY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **4,069.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 2022045
2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/11/2024</u>	
Name & Address: JAI MAW 65 CHELSEA CT NE ROCKFORD, MI 49341		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CO-FOUNDER</u> Employer <u>BETTING HERO</u> Business Address <u>65 CHELSEA CT NE, ROCKFORD, MI 49341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/2024</u>	
Name & Address: BRENNEN J GORMAN 9224 WILD OAK CIRCLE SOUTH LYON, MI 48178		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PARMENTER LAW</u> Business Address <u>1078 2ND ST, MUSKEGON, MI 49440</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/2024</u>	
Name & Address: JOHN HAZEWINKEL 1666 OKEMOS RD MASON, MI 48854		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMPLIANCE OFFICER</u> Employer <u>MICHIGAN STATE UNIVERSITY</u> Business Address <u>415 WEST FEE, EAST LANSING, MI 48824</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/17/2024</u>	
Name & Address: JULIE ZUKOWSKI 6271 MELBOURNE CT HUDSONVILLE, MI 49426		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SR FINANCE DIRECTOR</u> Employer <u>HOPE NETWORK</u> Business Address <u>3075 ORCHARD VISTA DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 500.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2022045
2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/19/2024</u>	
Name & Address: PATRICK MILES 2856 REEDS LAKE BLVD SE EAST GRAND RAPIDS, MI 49506		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide:			
Occupation <u>ATTORNEY</u>		Employer <u>BARNES & THORNBERG</u>	
Business Address <u>171 MONROE AVE NW, GRAND RAPIDS, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
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			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
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			

Page Subtotal 500.00

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

5,069.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2022045

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504 If over \$100.00 cumulative, please provide: Occupation: ATTORNEY Employer Name & Business Address: BROWER VANDER VEEN PLC 312 FULTON ST E, GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>PRINTING OF CAMPAIGN MATERIALS</u> 5. Date Of Receipt: <u>07/08/2024</u> 6. Vendor Name & Address: SWIFT PRINTING 404 BRIDGE ST NW, GRAND RAPIDS, MI 49504	\$ 316.38	\$ 2,008.38
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504 If over \$100.00 cumulative, please provide: Occupation: ATTORNEY Employer Name & Address: BROWER VANDER VEEN PLC 312 FULTON ST E, GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>MAIL ACCOUNT</u> 5. Date Of Receipt: <u>07/12/2024</u> 6. Vendor Name & Address: GOOGLE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043	\$ 120.00	\$ 2,128.38
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal **436.38** **2,128.38**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **436.38**

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2022045**
2. Committee Name **COMMITTEE TO ELECT NICHOLAS VANDERVEEN**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name KENT COUNTY CLERK Address 300 MONROE AVE NW GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser	Purpose: FILING FEE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/02/2024 Date	\$ 100.00
Expenditure #2 Name MICHIGAN DEMOCRATIC PARTY Address 606 TOWNSEND ST LANSING, MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: VAN ACCESS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/13/2024 Date	\$ 150.00
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
	Click Here for Memo Itemization Type		
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	\$ _____
	Click Here for Memo Itemization Type		
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	\$ _____
	Click Here for Memo Itemization Type		

Subtotal this page	250.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	250.00

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 2022045
2. Committee Name COMMITTEE TO ELECT NICHOLAS VANDERVEEN

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504	4. Type: <u>LOAN TO CAMPAIGN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/27/2022</u> 6. <u>Original Amount of Debt:</u> <u>\$ 255.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>255.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504	4. Type: <u>LOAN TO CAMPAIGN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/01/2022</u> 6. <u>Original Amount of Debt:</u> <u>\$ 60.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>60.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: NICHOLAS H VANDER VEEN 1435 BLYTHE DR NW GRAND RAPIDS, MI 49504	4. Type: <u>LOAN TO CAMPAIGN</u> 5. <u>Date Debt Was Incurred:</u> <u>09/15/2023</u> 6. <u>Original Amount of Debt:</u> <u>\$ 692.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>692.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1,007.00

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

1,007.00

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.