

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

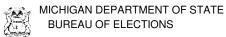
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	04/15/2024 _{to} 10/20/2024	
1. Committee I.D. Number		Candidate Last Name	First Name M.I.	
2024049		WILLIAMSON	RICHARD D	
		4a. Office Sought Including Dis	trict # or Community Served (If applicable)	
2. Committee Name		SCHOOL BOARD MEM	BER, GRAND RAPIDS PUBLIC SCHOOLS SD	
RICHARD WILLIAMSON FOR	GRPS	4b. County of Residence KENT COUNTY		
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address		
1551 KALAMAZOO AVE. SE GRAND RAPIDS, MI 49507		MAX AULBACH 1814 CRESCENT DR. NE GRAND RAPIDS, MI 49503		
Area Code and Phone (616) 499-1814				
If the address in this box is different from the commmailing address on the Statement of Organization, rbe sent to this address by the filing official.	ittee nail may	Area Code & Phone (616) 8	390-3669	
7. Treasurer's Business Address		8. Designated Record keeper' Designated Record keeper)	s Name and Mailing Address (If the committee has a	
1814 CRESCENT DR. NE GRAND RAPIDS, MI 49503				
(010) 000 0000				
Area Code and Phone (616) 890-3669		Area Code and Phone () -		
9. TYPE OF STATEMENT	Required ON	ILY if candidate	9e. Dissolution of Candidate Committee	
9a. X Pre-Election OR 9b. Post-Election	is not on the current year:	ballot for the	By checking this item I/We certify any outstanding debt	
Pre-Election or Post-Election Statement relates to:	Current year.		by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from	
Primary	July Quart		the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.	
⊠ General	October C	uarterly	Further, if the dissolution cannot be granted, that this be	
Convention			considered a request for the Reporting Waiver.	
Special	9c. Annua	al Statement ()		
School		Coverage Year	Effective date of dissolution	
Caucus	(Comp	dment to Campaign Statement lete Item 9a, 9b , 9c or 9e to e which Statement is being ed.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
Date of Election, Convention or Caucus				
11/05/2024				
10. Verification: I\We certify that all reasonable diligenty\u00edour knowledge and belief the contents are true, a	ence was used accurate and co	in the preparation of this statem omplete.	ent and attached schedules (if any) and to the best of	
Current Treasurer or			Submitted electronically, signature on file	
Designated Record keeper Type or Print Name		/ Signature	Date	
Type of Fillit Name		Gigirature	O heatherd all and a standard	
Candidate		/	Submitted electronically, signature on file	
Type or Print Name		Signature	Date	

1. Committee I.D. Number 2024049

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulative time election syste
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 15,765.29	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 15,765.29	(18.) \$ 15,765.29
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.) \$ _15,765.29	(20.) \$ 15,765.29
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 1,338.42	(21.) \$ 1,338.42
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.) \$ 11,735.26	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 11,735.26	(23.) \$ 11,735.26
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligationsa. Owed by the Committee (Schedule 1E)	(12a.) \$ 0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 15,765.29	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_15,765.29	
16. Amount expended during reporting period		
(Add lines 9 and 11) 17. ENDING BALANCE	(16.) - \$ 11,735.26	
(Subtract line 16 from line 15)	(17.) \$ 4,030.03	

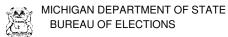


1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE 2. Committee Name

Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regard	on is from a Political Comm		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: JACKIE LEFKO 265 SPRING LAKE DRIVE CHESNEE, SC 29323 5. If over \$100.00 cumulative, please provide:	: DETIDED	04/15/2024	_{\$} 30.00	_{\$} 30.00
Business Address	mployer_NETINED			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Y Name & Address KATIE BAKER PO BOX 6661 GLEN ALLEN, VA 23058	'ES 4. Date of Rece	ipt <u>04/15/2024</u>	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:				
Occupation CONSULTANT Emp	ployer_SELF			
Business Address				
Type of Contribution: Direct	oan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505	YES 4. Date of Reco	eipt 04/15/2024	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	1			
Occupation DEPUTY FINANCE DIRECTOR Er	mployer MICHIGAN DI	EMOCRATIC PARTY		
Business Address 606 TOWNSEND ST				
		Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address MAX AULBACH 340 HOLLISTER AVE SE GRAND RAPIDS, MI 49506	YES 4. Date of Rec	eeipt <u>04/15/2024</u>	_{\$} 50.00	_{\$_} 50.00
5. If over \$100.00 cumulative, please provide:	:			
Occupation LEGISLATIVE DIRECTOR	Employer MICHIGA	AN STATE HOUSE		
Business Address 124 N CAPITOL	AVE, LANSING	, MI 48933		
	Loan from a person	Fund Raiser		
		Page Subtotal	180.00	
Page 1 of 48	-	rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on line 3a of Summary	
Page of 40			Page.	



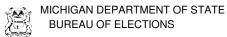
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

		, ,	
Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Comm 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 PAC Receipt? YES 4. Date of Receipt PAC Receipt?	oipt 04/15/2024		
313 CEDAR ST			400.00
LANSING, MI 48933		\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:			
Occupation CHIEF OF STAFF Employer MICHIGAN	I STATE SENATE		
Business Address 201 TOWNSEND ST, LANSING, N	/II 48933		
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt YES Address	ipt 04/15/2024		
SYDNEY HART			
313 N CAPITOL AVENUE		_{\$} 100.00	_s 100.00
LANSING, MI 48933		\$ 100100	\$ 100.00
5. If over \$100.00 cumulative, please provide:			
Occupation LIAISON Employer STATE OF I	MICHIGAN		
Business Address 525 W ALLEGAN ST, LANSING, N	11 48933		
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt WILLIAM HOUSE 5621 8TH AVE	eipt 04/15/2024	°250 00	_s 250.00
GRANDVILLE, MI 49418		\$ <u></u>	\$ 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		
	eipt 04/16/2024		
Name & Address CAITLIN STADLER			
313 N CAPITOL AVE		5 00	
LANSING, MI 48933		_{\$} 5.00	¸ 5.00
5. If over \$100.00 cumulative, please provide:			Ψ
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		1
	Page Subtotal	455.00	
	rand Total of All Schedules 1A		
·	plete on last page of Schedule)	Enter this total on	_1
Page 2 of 48		line 3a of Summary Page.	



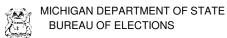
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

2024049

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 Name & Address: KIM GATES 7135 MCCORDS AVE SE ALTO, MI 49302	_{\$} 25.00	_{\$} 25.00
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 04/16/2024 Name & Address		
CHRISTOPHER HERWEYER 2560 WOODLAKE RD SW WYOMING, MI 49519	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation REGIONAL COORDINATOR Employer MICHIGAN LCV		
Business Address 340 BEAKES ST, ANN ARBOR, MI 48104		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address: MARTA JOHNSON 1343 LOGAN ST SE GRAND RAPIDS, MI 49506	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation LEGISLATIVE LEAD Employer CLIMATE CABINET Business Address 1343 LOGAN ST SE, GRAND RAPIDS, MI 49506		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address MICHAEL WADSWORTH 275 LANCELOT LN BRANDON TWP, MI 48462	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation ADMINISTRATOR Employer OAKLAND UNIVERSITY		
Business Address 312 MEADOW BROOK RD, ROCHESTER, MI 48309 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 3 of 48	Page.	

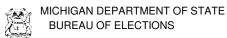


2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address: TIANA-MARIE PEAVEY 752 PARIS AVE SE GRAND RAPIDS, MI 49503	_{\$} 25.00	، 25.00
5. If over \$100.00 cumulative, please provide:	\$	Φ
Occupation CAMPAIGN MANAGER Employer LAGRAND FOR GRAND RAPIDS		
Business Address 1551 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/16/2024		
Name & Address		
GRETCHEN HERTZ 7025 WIDE VALLEY DR	_{\$} 50.00	_s 50.00
BRIGHTON, MI 48116	\$ <u>00.00</u>	\$ 30.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer LAW OFFICES OF KIMBERLY J. BOWLIN PLLC		
Business Address 5058 OLD US 23, BRIGHTON, MI 48116		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address: MARISSA MILLER 820 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation SCHEDULER Employer MICHIGAN STATE SENATE		
Business Address 201 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/16/2024		_
JEFF WINSTON 1525 FORREST AVE NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation POLITICAL ORGANIZER Employer MICHIGAN DEMOCRATIC PARTY		
Business Address 606 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	175.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	-
Page 4 of 48	line 3a of Summary Page.	



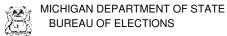
1. Committee I.D. Number __

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address: JOSHUA KOSS		
3079 TALON CIR	_{\$} 25.00	° 25.00
ORION TWP, MI 48360	<u>\$ 20.00</u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation ASSISTANT PROFESSOR Employer EASTERN MICHIGAN UNIVERSITY		
Business Address 900 OAKWOOD ST, YPSILANTI, MI 48197		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address		
ARIELLE LEIPHAM ELLIS		
52 AUBURN AVE NE	_{\$} 50.00	_s 50.00
GRAND RAPIDS, MI 49503	*	Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation SELF Employer LEIPHAM ELLIS & PARTNERS		
Business Address 52 AUBURN AVE NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address:		
STEPHEN ESSENBURG	40000	
542 WALNUT ST NE	_{\$} 100.00	_{\$} 100.00
GRAND RAPIDS, MI 49503		Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation REGISTERED NURSE Employer COREWELL HEALTH		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address		
CARA KNAPP		
7308 HARMON LN	_s 100.00	100.00
GEORGETOWN TWP, MI 49428	\$ 100.00	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation REGISTERED NURSE Employer COREWELL HEALTH		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
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	_l
Page 5 of 48	line 3a of Summary Page.	



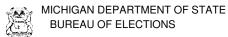
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2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/16/2024 Name & Address: RYAN MAMUT 567 MELROSE WY PANAMA CITY BEACH, FL 32413 5. If over \$100.00 cumulative, please provide: Occupation SOLUTIONS ARCHITECT Employer QUICKBASE Business Address 255 STATE ST, BOSTON, MA 02109	_{\$} 260.29	_{\$} 260.29
Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/17/2024		
Name & Address CHRISTOPHER NICHOLS 547 CHERRY ST SE GRAND RAPIDS, MI 49503	_{\$} 5.00	<u>\$ 5.00</u>
5. If over \$100.00 cumulative, please provide: SYSTEMS ADMINISTRATOR - SFI F		
Occupation SYSTEMS ADMINISTRATOR Employer SELF Business Address 547 CHERRY ST SE, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address: LORRAINE GOMEZ 1N160 TAMARACK DR WINFIELD, IL 60190	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Securation RETIRED Employer RETIRED		
Occupation RETIRED Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address KAREN AMBS 3198 ROSEWOOD ST HUDSONVILLE, MI 49426	_{\$} 25.00	_{\$} 25.00
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 Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 6 of 48	310.29 Enter this total on line 3a of Summary	-



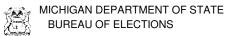
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2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address: ABRAM BROSSEIT 1543 SHERMAN ST SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation TEACHER Employer JENISON PUBLIC SCHOOLS		
Business Address 8375 20TH AVE, JENISON, MI 49428		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address		
BILL GORSKI 10021 ALICE CT	_{\$} 50.00	_{\$} 50.00
OAK LAWN, IL 60453		·
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address: DERRELL SLAUGHTER 1629 VICTOR AVE LANSING, MI 48910	§ 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation ADVOCATE Employer NATURAL RESOURCES DEFENSE COUNCIL		
Business Address 20 N WACKER DR, CHICAGO, IL 60606		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address RENEE WATSON 3620 GLENBROOK DR LANSING, MI 48911	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation LEGISLATIVE DIRECTOR Employer MICHIGAN SENATE		
Business Address 201 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 7 of 48	Enter this total on line 3a of Summary Page.	



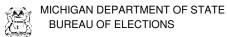
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

2024049 1. Committee I.D. Number

RICHARD WILLIAMSON FOR GRPS

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 04/17/2024 Name & Address: CALEY RAFFERTY 2020 E 14TH AVE DENVER, CO 80206	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation CLAIMS TECHNICAL EXPERT Employer US GOVERNMENT Business Address 1430 N HUMBOLDT ST, DENVER, CO 80218		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address RYAN DEMPSEY 3837 WILLIAMS ST DEARBORN, MI 48124	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation ANALYST Employer USG Business Address 1860 N SCOTT ST, ARLINGTON, VA 22209 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 04/17/2024 Name & Address: LINDA DEKOCK 1673 WALKER AVE NW GRAND RAPIDS, MI 49504	\$ 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address JUDY JONES 2500 OAKWOOD AVE NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED Business Address		
Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	225 00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00	
8 48	Enter this total on line 3a of Summary	

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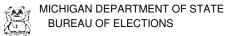
2024049

CANDIDATE COMMITTEE

2. Committee Name

1. Committee I.D. Number

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 04/18/2024 Name & Address: GARY STARK 2637 HAMPSHIRE BLVD SE EAST GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address STEPHEN BEZOLD 313 N CEDAR ST LANSING, MI 48912	\$ 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 Name & Address: MIKAYLA BENTON 3322 COOLIDGE HWY ROYAL OAK, MI 48073	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation RESEARCH ANALYST Employer OAKLAND UNIVERSITY		
Business Address 318 MEADOW BROOK RD, ROCHESTER, MI 48309		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address ANGELA SCHMITT 9430 CARR ST WESTMINSTER, CO 80021	_{\$} 10.00	_{\$} _10.00
5. If over \$100.00 cumulative, please provide:		
Occupation Business operations coordinator Employer UNIVERSITY OF COLORADO		
Business Address 1201 LARIMER ST, DENVER, CO 80204		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 9 of 48	Page.	



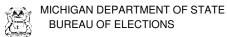
1. Committee I.D. Number

2024049

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 04/18/2024 Name & Address: PHIL CARTER		
812 ST CLAIR AVE	00.00	20.00
GROSSE POINTE, MI 48230	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER PHIL CARTER FILMS		
Business Address 812 ST CLAIR AVE, GROSSE POINTE, MI 48230		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/2024		
Name & Address JARED KAMRASS		
9583 HEATHER CT	_{\$} 25.00	_{\$} 25.00
CINCINNATI, OH 45242	\$ 2 3 . 0 0	\$ 23.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRINCIPAL Employer TECHNICOLOR POLITICAL		
Business Address 9583 HEATHER CT, CINCINNATI, OH 45242		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/18/2024		_
Name & Address:		
CLARISSA MATA	_{\$} 25.00	25.00
752 PARIS AVE SE	\$ 23.00	_{\$} 25.00
GRAND RAPIDS, MI 49503		
5. If over \$100.00 cumulative, please provide:		
Occupation LEGISLATIVE AIDE Employer MICHIGAN HOUSE OF REPRESENTATIVES		
Business Address 124 N CAPITOL AVE, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address		
SHANE SIEVERS		
811 ROSALIE AVE NW	§50.00	, 50.00
GRAND RAPIDS, MI 49504	\$ 30.00	\$ 30.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
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	.l
Page 10 of 48	line 3a of Summary Page.	



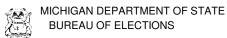
1. Committee I.D. Number _

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address: JUDY JONES 2500 OAKWOOD AVE NE	05.00	75.00
GRAND RAPIDS, MI 49505	_{\$} 25.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address		
SUSAN QUINN		
48226 REVERE DR	_{\$} 100.00	_{\$} 100.00
MACOMB, MI 48044		1
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/18/2024 Name & Address: CLAY WEST	100.00	
1600 GLEN FOREST DR SE ADA, MI 49301	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation JUDGE Employer KENT COUNTY		
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 04/18/2024 Name & Address		
JEFFREY CRANSON		
2618 COLLEGE AVE NE	_s 100.00	100.00
GRAND RAPIDS, MI 49505	Ψ	\$ _
5. If over \$100.00 cumulative, please provide:		
Occupation MEDIA RELATIONS Employer STATE OF MICHIGAN		
Business Address 425 W OTTAWA ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
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(Complete on last page of Schedule)	Enter this total on	
Page 11 of 48	line 3a of Summary Page.	



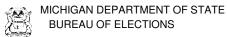
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

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 04/18/2024 Name & Address: CHRIS GUIS 3038 WATERFORD AVE NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide: Occupation RECRUITER Employer CONSTRUCTION STAFFING SOLUTIONS INC	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: State		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/23/2024 Name & Address JUSTIN KNAPP 1039 VETO ST NW GRAND RAPIDS, MI 49504	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation ENGINEER Employer GE AEROSPACE		
Business Address 3290 PATTERSON AVE SE, GRAND RAPIDS, MI 49512 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 04/26/2024 Name & Address: WILLIAM HARRIS 1538 HALL ST SE GRAND RAPIDS, MI 49506	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation WRITER Employer SELF Business Address 1538 HALL ST SE, GRAND RAPIDS, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/29/2024 Name & Address TIMOTHY RUSS 24 ROBINHOOD DR SE GRAND RAPIDS, MI 49546	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation UNISERV DIRECTOR Employer MICHIGAN EDUCATION ASSOCIATION		
Business Address 1216 KENDALE BLVD, EAST LANSING, MI 48823 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 12 of 48	Enter this total on line 3a of Summary Page.	-



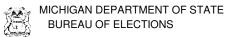
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/29/2024 Name & Address: DAYNA FOR MICHIGAN 9769 STARK RD LIVONIA, MI 48150 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 04/30/2024 Name & Address		
KEVIN PETERSON 1233 HERRICK AVE NE GRAND RAPIDS, MI 49505	<u>\$</u> 25.00	<u>\$ 25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation FUNDRAISER Employer FAMILY PROMISE OF WEST MICHIGAN		
Business Address 516 CHERRY ST SE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: ELLEN BEAL 234 5TH AVE FRUITPORT, MI 49415	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Rusiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address PHYLLIS ANDES 2203 VALLEY CIR	25.00	25.00
ALEXANDRIA, VA 22302	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation LAWYER Employer FN AMERICA		
Business Address 7950 JONES BRANCH DR, TYSONS, VA 22102		
Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	175.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 13 of 48	line 3a of Summary Page.	



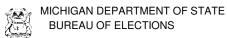
1. Committee I.D. Number _

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address: HALPIN BURKE 509 BRIAR HILL RD	_{\$} 25.00	، 25.00
LOUISVILLE, KY 40206	<u>\$ 23.00</u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide: CTAFF ACCICTANT US HOUSE OF REPRESENTATIVE		
Occupation STAFF ASSISTANT Employer US HOUSE OF REPRESENTATIVE		
Business Address 15 INDEPENDENCE AVE SE, WASHINGTON, DC 20515		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address		
KELLY PURDUE		
1257 SUNCREST DR NE	_{\$} 25.00	_{\$} 25.00
GRAND RAPIDS, MI 49525	\$	\$
5. If over \$100.00 cumulative, please provide:		
Occupation SOCIAL WORKER Employer COREWELL HEALTH HOSPICE AND PALLIATIVE CARE		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address:		
PAUL KUBICEK	E0 00	F0 00
105 AQUA CT	§ 50.00	_{\$} 50.00
ROYAL OAK, MI 48073		
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR Employer OAKLAND UNIVERSITY		
Business Address 318 MEADOW BROOK RD, ROCHESTER, MI 48309		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address PEI-LAN TSOU		
2077 KORBEN WOODS CT NE	F0 00	FO 00
BELMONT, MI 49306	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation FACULTY Employer GRAND VALLEY STATE UNIVERSITY		
Business Address 1 CAMPUS DR, ALLENDALE, MI 49401		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Page 14 of 48	line 3a of Summary	



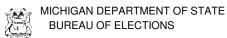
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CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address: GRACE VACHON 825 N OTTILLIA ST SE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation GRAPHIC DESIGNER Employer SELF		
Business Address 825 N OTTILLIA ST SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address		
CODY ELDREDGE 3337 PARKWAYS BLVD AUBURN HILLS, MI 48326	§ 50.00	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR Employer OAKLAND UNIVERSITY		
Business Address 318 MEADOW BROOK RD, ROCHESTER, MI 48309		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/01/2024 SARAH BARNABY 5 WILDE AVE DREXEL HILL, PA 19026	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation EVENT PLANNER Employer 12TH STREET CATERING		
Business Address Type of Contribution: Direct Direct Direct Doministry Doministr		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address FRANK LYNN 3446 DEVON DR NE GRAND RAPIDS, MI 49546	_{\$} 25.00	_{\$_} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 15 of 48	Enter this total on line 3a of Summary Page.	



SCHEDULE 1A

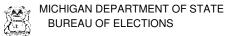
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address: STEPHEN DRAFT-PEPPIN 2320 MONROE AVE NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation APPLICATION SYSTEMS ANALYST Employer SPARROW HEALTH		
Business Address Type of Contribution: 1215 E MICHIGAN AVE, LANSING, MI 48912		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address		
CAMERON JONES 221 TROWBRIDGE ST NE GRAND RAPIDS, MI 49503	§ 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation CIVIL RIGHTS SPECIALIST Employer GRAND VALLEY STATE UNIVERSITY		
Business Address 1 CAMPUS DR, ALLENDALE, MI 49401		
Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4 Date of Receipt 05 (01/2004)		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address: CHRISTOPHER BLAKER 640 JOHN CARLYLE ST ALEXANDRIA, VA 22314	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation UNIVERSITY PRESS PUBLISHER Employer U.S. NAVY DEPARTMENT		
Business Address 2044 BROADWAY ST, QUANTICO, VA 22134 Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address AMY SCHMIDT 6305 SCARBOROUGH DR SE ADA, MI 49301	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:		
Occupation MANAGER Employer GREENVILLE PARTNERS		
Business Address 6305 SCARBOROUGH DR SE, ADA, MI 49301		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Page 16 of 48	Enter this total on line 3a of Summary Page.	



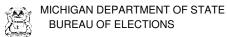
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2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address: CARL JAUTAKIS 6430 E LAKE LN SAWYER, MI 49125 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 100.00
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/01/2024 Name & Address		
JOHN STEENO		
10887 CONSTANT DR	_{\$} 100.00	_{\$} 100.00
ALLENDALE, MI 49401		
5. If over \$100.00 cumulative, please provide:		
Occupation HRIS ANALYST Employer GRAND VALLEY STATE UNIVERSITY		
Business Address 1 CAMPUS DR, ALLENDALE, MI 49401		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/02/2024 REBECCA CURRAN 1133 WOODSPOINTE DR SW BYRON CENTER, MI 49315	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation DEPUTY COURT CLERK Employer CITY OF WYOMING		
Business Address 2650 DE HOOP AVE, WYOMING, MI 49509		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address		
SYDNEY HART 313 N CAPITOL AVENUE LANSING, MI 48933	_{\$} 100.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation LIAISON Employer STATE OF MICHIGAN		
Business Address 525 W ALLEGAN ST, LANSING, MI 48933		
Type of Contribution: Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A		•
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Page 17 of 48	line 3a of Summary Page.	



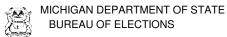
1. Committee I.D. Number _

2024049

CANDIDATE COMMITTEE

RICHARD WILLIAMSON FOR GRPS 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 05/03/2024 Name & Address: DANIEL CENTERS 2600 MAPLEWOOD AVE LANSING, MI 48910	_{\$} 35.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide: Occupation ASSISTANT STATE ADMINISTRATOR Employer STATE OF MICHIGAN Business Address 525 W ALLEGAN ST, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address RICHARD THRUSH 214 BALL PARK BLVD NW GRAND RAPIDS, MI 49504	\$ 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/03/2024 WILLIAM DEMMINK 6960 OLDE PINE DR JENISON, MI 49428	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation FINANCE ASSISTANT Employer LAGRAND FOR GRAND RAPIDS Business Address 1551 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address ZAC OZORMOOR 731 BURCHAM DR EAST LANSING, MI 48823	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide: Occupation SCHEDULER Employer MICHIGAN HOUSE OF REPRESENTATIVES		
Business Address 124 N CAPITOL AVE, LANSING, MI 48933 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 18 of 48	Enter this total on line 3a of Summary Page.	-



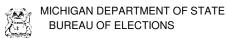
1. Committee I.D. Number 202

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address: CHARISSA HUANG 1317 NORTHLAWN ST NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation ATTORNEY Employer SMITH HAUGHEY RICE & ROEGGE		
Business Address 100 MONROE CENTER ST NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/03/2024		_
Name & Address ALEX TOREN 13 ELMWOOD ST NE CRAND BARIDS MI 40505	_{\$} 20.00	_{\$} 20.00
GRAND RAPIDS, MI 49505		
5. If over \$100.00 cumulative, please provide: Occupation CANVASSER Employer SCHOLTEN FOR CONGRESS		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/03/2024 Name & Address: JOSHUA USADEL 1925 FRANCIS AVE SE GRAND RAPIDS, MI 49507	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation GARDEN TECH Employer HOPE GARDENS		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/03/2024		
Name & Address WELSEY WILSON 935 JACKSON ST NW GRAND RAPIDS, MI 49504	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Entouthin total are	J
Page 19 of 48	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

2024049

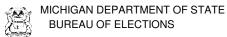
CANDIDATE COMMITTEE

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 05/03/2024 Name & Address: MAX AULBACH 340 HOLLISTER AVE SE	25.00	75.00
GRAND RAPIDS, MI 49506	_{\$} 25.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation LEGISLATIVE DIRECTOR Employer MICHIGAN STATE HOUSE		
Business Address 124 N CAPITOL AVE, LANSING, MI 48933		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/04/2024 Name & Address		
JOSHUA HELLER		
1815 FORLAND CT NE	_{\$} 50.00	_{\$} 50.00
GRAND RAPIDS, MI 49505		
5. If over \$100.00 cumulative, please provide:		
Occupation SITE RELIABILITY ENGINEER Employer EVIDEON INC.		
Business Address 1059 WEALTHY ST SE, GRAND RAPIDS, MI 49506		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/04/2024 Name & Address:		
ROGER DURHAM	05.00	
107 IVANHOE AVE NE	_{\$} 35.00	_{\$} 35.00
GRAND RAPIDS, MI 49546		
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR Employer AQUINAS COLLEGE		
Business Address 1700 FULTON ST E, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address		
STEPHEN DRAFT-PEPPIN		
2320 MONROE AVE NE GRAND RAPIDS, MI 49505	_{\$} 25.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		Y
Occupation APPLICATION SYSTEMS ANALYST Employer SPARROW HEALTH		
Business Address 1215 E MICHIGAN AVE, LANSING, MI 48912		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	135.00	<u> </u>
Grand Total of All Schedules 1A	133.00	
(Complete on last page of Schedule)	Enter this total on	J
00 40	line 3a of Summary	

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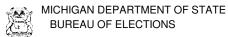
1. Committee I.D. Number ____

2024049

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 05/07/2024 Name & Address: HANNAH BOETTCHER 1111 E PINE ST SEATTLE, WA 98122	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation TRANSPORTATION PLANNER Employer CITY OF BAINBRIDGE ISLAND Business Address 1111 E PINE ST, SEATTLE, WA 98122		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/07/2024		
Name & Address KELLY OTTERNESS 1534 HIDDEN CREEK CIR DR NE GRAND RAPIDS, MI 49505	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation COMMUNICATIONS Employer WEST MICHIGAN ENVIRONMENTAL ACTION COUNCIL		
Business Address 1007 LAKE DR SE, GRAND RAPIDS, MI 49506		
Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/07/2024		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/07/2024 JOHN CONSIDINE 4286 GREENBRIER CT SE GRAND RAPIDS, MI 49546	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address		
ELIZABETH HELM 124 LAFAYETTE AVE NE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation REGISTERED NURSE Employer COREWELL HEALTH		
Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503		
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)	Findam Mills And A	J
Page 21 of 48	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

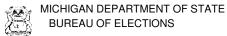
2024049

CANDIDATE COMMITTEE 2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 05/07/2024 Name & Address: JOHN KLEMANSKI 3511 RIVERSIDE DR AUBURN HILLS, MI 48326	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED		
Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/07/2024		
Name & Address JEFF PIETROWSKI		
329 AUBURN AVE SE	_{\$} 25.00	_{\$} 25.00
GRAND RAPIDS, MI 49506	φ	\$ <u></u>
5. If over \$100.00 cumulative, please provide:		
Occupation TEACHER Employer GRANDVILLE PUBLIC SCHOOLS		
Business Address 3839 PRAIRIE ST SW, GRANDVILLE, MI 49418		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address: DONNA PENNINGTON 1418 LAKESHORE DR MUSKEGON, MI 49441	_{\$} 50.00	_{\$} 50.00
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 05/07/2024 Name & Address AUDREY AUGUR 422 HOPSON ST NE GRAND RAPIDS, MI 49503	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR HR GENERALIST Employer AEG HOLDING COMPANY INC		
Business Address 72 MONROE CENTER ST NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	150.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) 1	Enter this total on line 3a of Summary	.l

Page ____ of ____



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

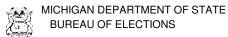
2024049

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 05/07/2024 Name & Address: CHASE LINDENTHAL		
1201 E 11 MILE RD ROYAL OAK, MI 48067	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation RESEARCHER Employer FAROUGH & ASSOCIATES		
Business Address 108 E GRAND RIVER AVE, BRIGHTON, MI 48116		
Type of Contribution: Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address		
RICHARD HRICIK		
941 HOUSTON NORTHCUTT BLVD MT PLEASANT, SC 29464	\$ 100.00	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer SELF		
Business Address 941 HOUSTON NORTHCUTT BLVD, MT PLEASANT, SC 29464		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/07/2024		
BRYCE RAAYMAKERS	0= 00	
184 WILDWOOD LN	_{\$} 25.00	_{\$} 25.00
DURANGO, CO 81301		*
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address		
JACQUES HARVIEUX		
1882 ARLINGTON AVE E	§50.00	£ 50.00
ST PAUL, MN 55119	Ψ	\$
5. If over \$100.00 cumulative, please provide:		
Occupation ENERGY PLANNER Employer MN PUC		
Business Address 121 7TH PL E, ST PAUL, MN 55101		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	225.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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1. Committee I.D. Number

2024049

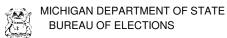
CANDIDATE COMMITTEE

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 05/07/2024 Name & Address: RICH VANDERKLOK 2057 PINEWOOD ST JENISON, MI 49428 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	_{\$} 25.00
Occupation TEACHER		
Business Address 2140 BAUER RD, JENISON, MI 49428 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/07/2024		
Mame & Address GERARD AKKERHUIS 315 EASTERN AVE SE GRAND RAPIDS, MI 49503	\$ 100.00	§ 100.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/07/2024 Name & Address: NATHANIEL DIEDRICH 300 SCOTT AVE NW GRAND RAPIDS, MI 49504	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation SCHEDULING COORDINATOR Employer ALLEN EDWIN		
Business Address 300 SCOTT AVE NW, GRAND RAPIDS, MI 49504 Type of Contribution: Direct Loan from a person Fund Raiser		
		_
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/22/2024 Name & Address WEST MICHIGAN PLUMBERS, FITTERS, AND SERVICE TRADES LOCAL UNION NO. 174 PAC 1008 O'MALLEY DR COOPERSVILLE, MI 49404 5. If over \$100.00 cumulative, please provide:	_{\$} 250.00	_{\$} 250.00
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	-

Page **46** of **46**



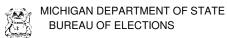
1. Committee I.D. Number __

2024049

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 05/30/2024 Name & Address: JOHN CONSIDINE 4286 GREENBRIER CT SE GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 10.00	_{\$} 35.00
Occupation NOT EMPLOYED Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/30/2024 Name & Address JOHN CONSIDINE 4286 GREENBRIER CT SE GRAND RAPIDS, MI 49546	_{\$} 90.00	_{\$} 125.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer NOT EMPLOYED		
Business Address Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/30/2024 Name & Address: KRIS SPAULDING 55 MAYFAIR DR NE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Business Address 925 CHERRY ST SE, GRAND RAPIDS, MI 49506 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/30/2024 Name & Address MICHELLE BURNS 212 BAKER ST ROYAL OAK, MI 48067	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer FAKHOURY GLOBAL IMMIGRATION		
Business Address 5250 CORPORATE DR, TROY, MI 48098		
Type of Contribution: Loan from a person Fund Raiser	050.00	-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	250.00	-
Page 25 of 48	Enter this total on line 3a of Summary Page.	



SCHEDULE 1A

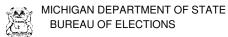
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: NANCY MROCZKOWSKI 1800 LOTUS AVE SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPL Business Address	1	_{\$} 10.00	_{\$} 10.00
Type of Contribution: Direct Loan from a person 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	Fund Raiser ot 05/30/2024		
RANDY BUIST 3275 BAUER RD JENSION, MI 49428		\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPLO	YED		
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Rece Name & Address: ABIGAIL CLARK 218 S 8TH ST LANSING, MI 48912	05/30/2024	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:			
Occupation MIDWEST CAMPAIGN MANAGER Employer NATURAL RESOU	RCE DEFENSE COUNCIL		
Business Address 20 N WACKER DR, CHICAGO, IL 6060	6		
	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt YES 4. Date	pipt <u>05/30/2024 </u>	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:			
Occupation GOVERNMENT RELATIONS Employer MASB			
Business Address 1001 CENTENNIAL WAY, LANSI	NG. MI 48917		
Type of Contribution: Direct Loan from a person	Fund Raiser		
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	and Total of All Schedules 1A lete on last page of Schedule)	Enter this total on	
Page 26 of 48		line 3a of Summary Page.	



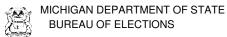
1. Committee I.D. Number

2024049

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 05/30/2024 Name & Address: ANTHONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation PROFESSOR Employer FERRIS STATE UNIVERSITY Business Address 1201 S STATE ST, BIG RAPIDS, MI 49307 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/17/2024 Name & Address NOAH SMITH 14570 HARDTKE DR LANSING, MI 48906 5. If over \$100.00 cumulative, please provide:	\$ 100.00	_{\$} 100.00
Occupation LOBBYIST Employer CAPITOL SERVICES, INC Business Address 110 W MICHIGAN AVE, LANSING, MI 48933 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/21/2024 TERESA BARCY 1117 PINE ST GRAND LEDGE, MI 48837	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer PROFESSIONAL PARTY PLANNERS Business Address 1117 PINE ST, GRAND LEDGE, MI 48837 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/03/2024 Name & Address MARILYNN SPRINGMAN 266 BONA VISTA DR NW GRAND RAPIDS, MI 49504	_{\$} 50.00	_{\$} 50.00
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 Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 27 of 48	Enter this total on line 3a of Summary Page.	-



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

2024049

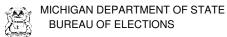
2. Committee Name

1. Committee I.D. Number

RICHARD WILLIAMSON FOR GRPS

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 07/03/2024 Name & Address: MCALVEY MERCHANT PAC 120 W OTTAWA ST LANSING, MI 48933	_{\$} 500.00	
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 07/04/2024 Name & Address JAMES GROELSMA 7497 SUNVIEW DR SE GRAND RAPIDS, MI 49548	\$ 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation SALESPERSON Employer MARKETLAB Business Address 6850 SOUTHBELT DR, CALEDONIA, MI 49316 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/06/2024 SYDNEY HARRINGTON 2193 MOUNTAINVIEW DR FREDERICK, MD 21702	_{\$} 5.00	_{\$} 5.00
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 07/17/2024 Name & Address KATHERINE DUCKWORTH 1918 ADAMS ST SE GRAND RAPIDS, MI 49506	_{\$} 5.00	_{\$} 5.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer TALEN ENERGY		
Business Address 1725 HUGHES LANDING BLVD, THE WOODLANDS, TX 77380		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	760.00	
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1. Committee I.D. Number

2024049

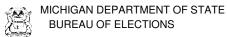
CANDIDATE COMMITTEE 2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 07/19/2024 Name & Address: SARAH LONGWORTH 2390 EXPLORADOR DR MERCED, CA 95340 5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPLOYED Business Address	_{\$} 25.00	_{\$} 25.00
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/19/2024 Name & Address RON DRAAYER 2931 WILDFLOWER LN SE KENTWOOD, MI 49512	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/19/2024 Name & Address: CHARLES LOWE 56 FULLER AVE SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
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 07/19/2024 Name & Address STEPHEN WOODEN 161 GILPIN ST NE GRAND RAPIDS, MI 49505	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide: Occupation COUNTY COMMISSIONER Employer KENT COUNTY		
Business Address Type of Contribution: Direct Direct		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00 Enter this total on	-

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Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

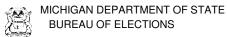
2024049 1. Committee I.D. Number

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 07/19/2024 Name & Address: MIRANDA SHERMAN 3411 POMEROY RD DOWNERS GROVE, IL 60515	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide: Occupation RESTAURANT OWNER Employer MINERVA LLC		
Business Address Type of Contribution: Direct Direc		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/19/2024 Name & Address TRINA COLES 946 MISTI DR BEREA, KY 40403	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation ACCOUNT MANAGER _{Employer} EMPLOYBRIDGE Business Address 182 N BROADWAY, LEXINGTON, KY 40507 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/19/2024 Name & Address: CALEY RAFFERTY 2020 E 14TH AVE DENVER, CO 80206	_{\$} 50.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation CLAIMS TECHNICAL EXPERT Employer US GOVERNMENT Business Address 1430 N HUMBOLDT ST, DENVER, CO 80218 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/19/2024 Name & Address CAITLIN MAGRUDER 1414 BURRY ST JOLIET, IL 60435	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation MAIL CARRIER USPS		
Business Address 506 W MARION ST, JOLIET, IL 60436 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	235.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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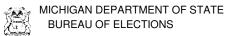
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

RICHARD WILLIAMSON FOR GRPS 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 07/20/2024 Name & Address: DALE ROBERTSON 3370 BROOKPOINT DR SE GRAND RAPIDS, MI 49546	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT GRAND RAPIDS PUBLIC MUSEUM Business Address 272 PEARL ST NW, GRAND RAPIDS, MI 49504 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/23/2024 Name & Address MARK BRYSON 71 LAMOREAUX DR NE COMSTOCK PARK, MI 49321	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide: Occupation WATER PLANT OPERATOR II Employer CITY OF GRAND RAPIDS Business Address 17350 LAKE MICHIGAN DR, WEST OLIVE, MI 49460 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/24/2024 Name & Address: NICOLE ZAMORA-WILSON 1120 E CENTER ST SPRINGVILLE, UT 84663	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide: Occupation INTERN Employer AMERICAN CONSERVATION EXPERIENCE Business Address 2900 N FORT VALLEY RD, FLAGSTAFF, AZ 86001 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/25/2024 Name & Address JANE PROVOST 713 E BALDWIN AVE SPOKANE, WA 99207	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address Type of Contribution:	55 OO	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 31 of 48	Enter this total on line 3a of Summary Page.	-



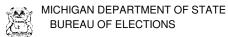
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/25/2024 Name & Address: HALLIE BROWN 10604 MARBLE PL NE	07.00	05.00
ALBUQUERQUE, NM 87112	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation FEDERAL GRANTS COORDINATOR Employer NM DEPARTMENT OF FINANCE AND ADMINSTRATION		
Business Address 407 GALISTEO ST, SANTA FE, NM 87501		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/25/2024 Name & Address		
ZACH COLLINS	05.00	05.00
8850 LAVELLE RD	_{\$} 25.00	_{\$} 25.00
ATHENS, OH 45701		
5. If over \$100.00 cumulative, please provide: Occupation COMEDIAN Employer SELF		
Occupation COMEDIAN Employer SELF Business Address 8850 LAVELLE RD, ATHENS, OH 45701		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/25/2024 Name & Address:		
CAREESE THOMPSON	_{\$} 50.00	50.00
1430 N HUMBOLDT ST DENVER, CO 80218	§ 30.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation CLINICAL RESEARCH Employer CHILDRENS HOSPITAL COLORADO		
Business Address 13123 E 16TH AVE, AURORA, CO 80045		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/25/2024		_
Name & Address ———————————————————————————————————		
1911 W HILLSDALE ST	^{250.00}	250.00
LANSING, MI 48915	<u>\$ 200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation DIRECTOR OF COMMUNITY ENGAGEMENT Employer STATE OF MICHIGAN		
Business Address 525 W ALLEGAN ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	350.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 32 of 48	Page.	



1. Committee I.D. Number

2024049

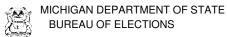
CANDIDATE COMMITTEE

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/29/2024 Name & Address: LINDA DEKOCK 1673 WALKER AVE NW GRAND RAPIDS, MI 49504 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED	_{\$} 100.00	_{\$} 150.00
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/31/2024 Name & Address BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation PARTNER Employer THE WINMATT GROUP Business Address 40 PEARL 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 08/08/2024 Name & Address: JACOB KNAPP 1007 CROSS RD EAGAN, MN 55123	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation IT SENIOR ENGINEER Employer CIGNA Business Address 1007 CROSS RD, EAGAN, MN 55123 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/12/2024 Name & Address MATTHEW BOAK 9210 W PRATT RD ST JOHNS, MI 48879	_{\$} 10.00	_{\$} _10.00
5. If over \$100.00 cumulative, please provide: Occupation POLICY ADVISOR Employer MICHIGAN SENATE Business Address 201 TOWNSEND ST, LANSING, MI 48933 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	235.00 Enter this total on line 3a of Summary	

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1. Committee I.D. Number

2024049

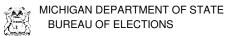
CANDIDATE COMMITTEE

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 08/14/2024 Name & Address: STEVE PESTKA 2517 ASHWOOD CT SE ADA, MI 49301 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED	_{\$} 300.00	_{\$} 300.00
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/15/2024 Name & Address DANIEL CENTERS 2600 MAPLEWOOD AVE LANSING, MI 48910	_{\$} 40.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation ASSISTANT STATE ADMINISTRATOR Employer STATE OF MICHIGAN Business Address 525 W ALLEGAN ST, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/17/2024 Name & Address: MICAH PERKINS 2133 RICHMOND ST NW GRAND RAPIDS, MI 49504	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation PLUMBER Employer MICHIGAN BUILDING TRADES Business Address 1008 O'MALLEY DR, COOPERSVILLE, MI 49404 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/17/2024 Name & Address MICHAEL KERNEN 412 TIMBERLEA DR ROCHESTER HILLS, MI 48309	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation ELECTIONS SPECIALIST Employer OAKLAND COUNTY CLERK Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	415.00 Enter this total on line 3a of Summary	

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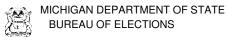
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/18/2024 Name & Address: KIM NAGY 2407 BASSWOOD ST		
JENISON, MI 49428	_{\$} 10.00	_s 10.00
5. If over \$100.00 cumulative, please provide:	Ψ	<u> </u>
Occupation TEACHER Employer NORTHVIEW PUBLIC SCHOOLS		
Business Address 4365 HUNSBERGER AVE NE, GRAND RAPIDS, MI 49525		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/19/2024		
Name & Address		
TIANA-MARIE PEAVEY 752 PARIS AVE SE	_{\$} 25.00	_s 50.00
GRAND RAPIDS, MI 49503	<u>\$</u> 20.00	\$ 30.00
5. If over \$100.00 cumulative, please provide:		
Occupation CAMPAIGN MANAGER Employer LAGRAND FOR GRAND RAPIDS		
Business Address 1551 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/19/2024		
Name & Address: MIRA JOURDAN		
2626 BROOKLYN AVE SE	_{\$} 100.00	_{\$} 100.00
GRAND RAPIDS, MI 49507	Ψ	<u>\$ 100100</u>
5. If over \$100.00 cumulative, please provide:		
Occupation PSYCHOLOGIST Employer MIRA KRISHNAN LLC		
Business Address 2626 BROOKLYN AVE SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/19/2024 Name & Address		
CHRIS GUIS		
3038 WATERFORD AVE NE	_s 100.00	200.00
GRAND RAPIDS, MI 49505	\$ 100100	\$
5. If over \$100.00 cumulative, please provide:		
Occupation RECRUITER Employer CONSTRUCTION STAFFING SOLUTIONS INC		
Business Address 3737 LAKE EASTBROOK BLVD SE, GRAND RAPIDS, MI 49546		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	235.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	_1
Page 35 of 48	line 3a of Summary Page.	



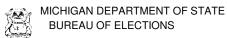
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2024049

CANDIDATE COMMITTEE

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/22/2024 Name & Address: SEAN MCCANN 4041 E HILLANDALE DR KALAMAZOO, MI 49008	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation STATE SENATOR Employer MICHIGAN SENATE		
Business Address 201 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/28/2024		
Name & Address HAL OSTROW 144 BAYNTON AVE NE GRAND RAPIDS, MI 49503	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer RHOADES MCKEE Business Address 55 CAMPAU AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/28/2024		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/28/2024 Name & Address: RICHARD LIVINGSTON 927 LEONARD ST NE GRAND RAPIDS, MI 49505	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/03/2024		
Name & Address DAVID HAST 742 BEAUMONT DR NW GRAND RAPIDS, MI 49504	_{\$} 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		
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 36 of 48	line 3a of Summary Page.	



1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

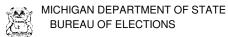
2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/03/2024 Name & Address: CHARLES BURPEE 22 CAMPAU CIR NW GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation PATENT ATTORNEY Employer WARNER NORCROSS + JUDD LLP		
Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/04/2024 Name & Address SHAN ABBAS 2202 NEW TOWN DR GRAND RAPIDS, MI 49525	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation MEDICAL DOCTOR _{Employer} SPECTRUM HEALTH MEDICAL GROUP Business Address 100 MICHIGAN ST NE, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/04/2024 Name & Address: JUSTIN SHELDON 2202 NEW TOWN DR GRAND RAPIDS, MI 49525	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation COMMUNITY ORGANIZER Employer SELF Business Address 2202 NEW TOWN DR, GRAND RAPIDS, MI 49525 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/07/2024 Name & Address TERESA BARCY 1117 PINE ST GRAND LEDGE, MI 48837	_{\$} 500.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer PROFESSIONAL PARTY PLANNERS Business Address 1117 PINE ST, GRAND LEDGE, MI 48837 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	800.00 Enter this total on line 3a of Summary	-

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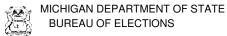
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

2024049

2. Committee Name

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/10/2024 Name & Address: BRANDON DILLON 201 NORWOOD AVE SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	_{\$} 100.00	_{\$} 200.00
Occupation PARTNER Employer THE WINMATT GROUP Business Address 40 PEARL ST NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/11/2024		
Name & Address SARAH WOOLSEY 1330 ROSEWOOD AVE SE GRAND RAPIDS, MI 49506	§ 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation ORGANIZER Employer MICHIGAN DEMOCRATIC PARTY		
Business Address TOWNSEND AVE NE, GRAND RAPIDS, MI 49525		
Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/2024		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/11/2024 Name & Address: JEFFREY CRANSON 2618 COLLEGE AVE NE GRAND RAPIDS, MI 49505	§ 50.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:		
Occupation MEDIA RELATIONS Employer STATE OF MICHIGAN		
Business Address 425 W OTTAWA ST, LANSING, MI 48933 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/13/2024 Name & Address ALEXANDRIA STEBING 1851 N WYNDHAM HILL DR NE GRAND RAPIDS, MI 49505	_{\$} 10.00	_{\$_} 10.00
5. If over \$100.00 cumulative, please provide:		
Occupation LEASING COORDINATOR Employer ICCF COMMUNITY HOMES		
Business Address 415 M.L.K. JR ST SE, GRAND RAPIDS, MI 49507 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	210.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Futouthin total a	J
Page 38 of 48	Enter this total on line 3a of Summary Page.	



1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

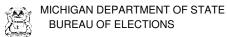
2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/2024 Name & Address: LINDA DEKOCK 1673 WALKER AVE NW GRAND RAPIDS, MI 49504	_{\$} 150.00	_{\$} 300.00
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 09/17/2024 Name & Address MICAH PERKINS 2133 RICHMOND ST NW GRAND RAPIDS, MI 49504	_{\$} 25.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation PLUMBER Employer MICHIGAN BUILDING TRADES Business Address 1008 O'MALLEY DR, COOPERSVILLE, MI 49404 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/17/2024 Name & Address: JOSHUA FERGUSON 811 EMERALD AVE NE GRAND RAPIDS, MI 49503	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation ORGANIZER Employer 270 STRATEGIES Business Address 207 E OHIO ST, CHICAGO, IL 60611 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/18/2024 Name & Address STEVE FABER 1845 MEADOWFIELD DR NE GRAND RAPIDS, MI 49505	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: MARKETING/COMMUNICATIONS FOR KENT COUNTY		
Occupation MARKETING/COMMUNICATIONS Employer KENT COUNTY Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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Page.



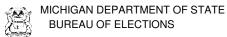
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2024049

CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/23/2024 Name & Address: GARY STARK 2637 HAMPSHIRE BLVD SE EAST GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED Business Address Type of Contribution: Direct Loan from a person Fund Raiser	_{\$} 100.00	_{\$} 200.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/25/2024		
JOSHUA KOSS 3079 TALON CIR ORION TWP, MI 48360	_{\$} 50.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide: Occupation ASSISTANT PROFESSOR Employer EASTERN MICHIGAN UNIVERSITY		
Occupation Address 900 OAKWOOD ST, YPSILANTI, MI 48197		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/25/2024 Name & Address: ARIELLE LEIPHAM ELLIS 52 AUBURN AVE NE GRAND RAPIDS, MI 49503	_{\$} 50.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide: Occupation SELF Employer LEIPHAM ELLIS & PARTNERS		
Business Address 52 AUBURN AVE NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/25/2024 Name & Address GRACE VACHON 825 N OTTILLIA ST SE GRAND RAPIDS, MI 49507	_{\$} 50.00	_{\$} _100.00
5. If over \$100.00 cumulative, please provide:		
Occupation GRAPHIC DESIGNER Employer SELF		
Business Address 825 N OTTILLIA ST SE, GRAND RAPIDS, MI 49507 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 40 of 48	Enter this total on line 3a of Summary Page.	J

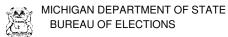


ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 2024049

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 09/26/2024 Name & Address: DEL CHENAULT 1026 NORTHLAWN AVE EAST LANSING, MI 48823 5. If over \$100.00 cumulative, please provide: Occupation PRINCIPAL Employer CLARK HILL Business Address 1026 NORTHLAWN AVE, EAST LANSING, MI 48823	\$ 100.00	_{\$} 100.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/26/2024 Name & Address RICHARD HRICIK 941 HOUSTON NORTHCUTT BLVD MT PLEASANT, SC 29464	\$ 100.00	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer SELF		
Business Address 941 HOUSTON NORTHCUTT BLVD, MT PLEASANT, SC 29464		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/26/2024 Name & Address: TERESA BARCY 1117 PINE ST GRAND LEDGE, MI 48837	\$ 200.00	_{\$_} 1,200.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer PROFESSIONAL PARTY PLANNERS		
Business Address 1117 PINE ST, GRAND LEDGE, MI 48837		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/2024 Name & Address SARAH LONGWORTH 2390 EXPLORADOR DR MERCED, CA 95340	_{\$} 15.00	_{\$} _40.00
5. If over \$100.00 cumulative, please provide:		
Occupation NOT EMPLOYED Employer NOT EMPLOYED		
Business Address Type of Contribution:		
Page Subtotal	415.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 41 of 48	Enter this total on line 3a of Summary Page.	



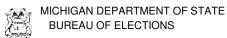
1. Committee I.D. Number _

2024049

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 09/28/2024 Name & Address: EM LEFKO 313 CEDAR ST APT 301 LANSING, MI 48933 5. If over \$100.00 cumulative, please provide: Occupation CHIEF OF STAFF Employer MICHIGAN STATE SENATE	_{\$} 150.00	_{\$} 250.00
Business Address Type of Contribution: 201 TOWNSEND ST, LANSING, MI 48933		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/29/2024 Name & Address DESMOND MILLER HAMILTON AVE NW GRAND RAPIDS, MI 49504	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation LEGISLATIVE DIRECTOR Employer MICHIGAN SENATE		
Business Address 201 TOWNSEND ST, LANSING, MI 48933 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/01/2024 Name & Address: ROBERT FRANKEL 1231 99TH ST BAY HARBOR ISLANDS, FL 33154	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation LAND ANALYIST Employer LENNAR		
Business Address 5505 WATERFORD DISTRICT DR, MIAMI, FL 33126		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/02/2024 Name & Address LINDA DEKOCK 1673 WALKER AVE NW GRAND RAPIDS, MI 49504	_{\$} 200.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	ı	
Page Subtotal	500.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 42 of 48	line 3a of Summary Page.	



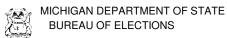
1. Committee I.D. Number

2024049

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 10/02/2024 Name & Address: MI EDUCATION DEFENSE FUND 1525 FORREST AVE NE GRAND RAPIDS, MI 49505	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/2024 Name & Address		
SARAH WOOLSEY 1330 ROSEWOOD AVE SE GRAND RAPIDS, MI 49506	_{\$} 10.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide: Occupation ORGANIZER Employer MICHIGAN DEMOCRATIC PARTY		
Business Address TOWNSEND AVE NE, GRAND RAPIDS, MI 49525		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/03/2024 Name & Address: ROBERT VANSTRIGHT 58 SUNNYBROOK AVE SE GRAND RAPIDS, MI 49506	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Address Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/03/2024		
RON DRAAYER 2931 WILDFLOWER LN SE KENTWOOD, MI 49512	_{\$} 25.00	_{\$} 75.00
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	385.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 43 of 48	line 3a of Summary Page.	



1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

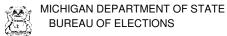
2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 10/04/2024 Name & Address: WENDY FALB 350 CHERRY ST SE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation EXECUTIVE DIRECTOR Employer LITERACY CENTER OF WEST MICHIGAN		
Business Address 1120 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/04/2024 Name & Address ARICK DAVIS 814 PRINCE ST SE GRAND RAPIDS, MI 49507	_{\$} 10.00	_{\$} 10.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer LAST MILE CAFE Business Address 814 PRINCE ST SE, GRAND RAPIDS, MI 49507 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/04/2024 Name & Address: MICHIGAN LABORERS'S POLITICAL LEAGUE PAC 1118 CENTENNIAL WAY STE 100 LANSING, MI 48917 5. If over \$100.00 cumulative, please provide:	_{\$} 1,000.00	_{\$} 1,000.00
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/07/2024 Name & Address ARON DUBY 3175 BARRY ST HUDSONVILLE, MI 49426	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation WEB APPLICATION DEVELOPMENT Employer BINARY EVOLUTION		
Business Address 3175 BARRY ST, HUDSONVILLE, MI 49426 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	1,210.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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Page.



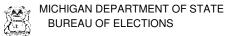
1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

Enter contributor's name and address. If contribution is from an inc middle initial. Check box to indicate if contribution is from a Politica 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 Name & Address: KENT COUNTY DEMOCRATIC PARTY 301 FULLER AVE NE	of Receipt 10/07/2024		
GRAND RAPIDS, MI 49503		_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		Ψ	<u> </u>
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	of Receipt 10/09/2024		
Name & Address			
STEPHEN WOODEN 161 GILPIN ST NE		_{\$} 25.00	_{\$} 75.00
GRAND RAPIDS, MI 49505		\$ 25.00	§ 73.00
5. If over \$100.00 cumulative, please provide:			
Occupation COUNTY COMMISSIONER Employer KENT C	COUNTY		
Business Address 300 MONROE AVE NW, GRAN			
Type of Contribution:			
Name & Address:	of Receipt 10/12/2024		
NATHANIEL ENGLE 1911 W HILLSDALE ST		\$25.00	_s 275.00
LANSING, MI 48915		<u>\$ 20.00</u>	<u>\$ 273.00</u>
5. If over \$100.00 cumulative, please provide:			
DIRECTOR OF COMMUNITY ENGAGEMENT STATE	E OF MICHIGAN		
Business Address 525 W ALLEGAN ST, LANSING, I			
Type of Contribution: Direct Loan from a person			
3. Contribution # 4 PAC Receipt? YES 4. Date	e of Receipt 10/12/2024		
Name & Address CLARK HILL PAC	<u></u> _		
500 WOODWARD AVE		100.00	100.00
DETROIT, MI 48226		§ 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		
	Page Subtotal	175.00	
	Grand Total of All Schedules 1A		
45 40	(Complete on last page of Schedule)	Enter this total on	.1
Page 45 of 48		line 3a of Summary Page.	



1. Committee I.D. Number

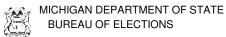
2024049

CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

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 10/13/2024 Name & Address: CHAD PATTON 3351 FULLER AVE SE	F0.00	E0 00
GRAND RAPIDS, MI 49508	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation PROGRAM DIRECTOR Employer WEST MICHIGAN WORKS!		
Business Address 121 M.L.K. JR ST SE, GRAND RAPIDS, MI 49507		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/13/2024 Name & Address		
CLAY WEST	50.00	450.00
1600 GLEN FOREST DR SE ADA, MI 49301	\$50.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:		
Occupation JUDGE Employer KENT COUNTY		
Business Address 180 OTTAWA 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 10/13/2024		
Name & Address: MICHAEL KERNEN		
412 TIMBERLEA DR	_{\$} 50.00	_s 100.00
ROCHESTER HILLS, MI 48309		
5. If over \$100.00 cumulative, please provide:		
Occupation ELECTIONS SPECIALIST Employer OAKLAND COUNTY CLERK		
Business Address 1200 N TELEGRAPH, PONTIAC, MI 48341		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/15/2024 Name & Address		
SAM WOLFE		
1122 SIBLEY ST NW	^{25.00}	, 25.00
GRAND RAPIDS, MI 49504	<u> </u>	\$
5. If over \$100.00 cumulative, please provide:		
Occupation POLITICAL ORGANIZER Employer MICHIGAN DEMOCRATIC PARTY		
Business Address 606 TOWNSEND ST, LANSING, MI 48933		
Type of Contribution: Direct Loan from a person Fund Raiser	ı	
Page Subtotal	175.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		J
40. 40	Enter this total on	

Page 46 of 48



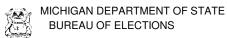
1. Committee I.D. Number

2024049

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 10/15/2024 Name & Address: MAX AULBACH 340 HOLLISTER AVE SE		
GRAND RAPIDS, MI 49506	_{\$} 25.00	£ 100.00
5. If over \$100.00 cumulative, please provide:	φ	Ψ
Occupation LEGISLATIVE DIRECTOR Employer MICHIGAN STATE HOUSE		
Business Address 124 N CAPITOL AVE, LANSING, MI 48933		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/2024		
Name & Address		
ANTHONY BAKER 455 MADISON AVE SE	100.00	_{\$} 150.00
GRAND RAPIDS, MI 49503	\$ 100.00	\$ 130.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR Employer FERRIS STATE UNIVERSITY		
Business Address 1201 S STATE ST, BIG RAPIDS, MI 49307		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/15/2024 Rame & Address: ERIC KRUEZER 6626 AVALON DR SE	_{\$} 15.00	_s 15.00
CALEDONIA, MI 49316	Ψ	\$ 10100
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 10/15/2024 Name & Address		
MELISSA LAGRAND		
255 COLLEGE AVE SE	^{250.00}	250.00
GRAND RAPIDS, MI 49503	\$	\$
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	390.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) Page 47 of 48	Enter this total on line 3a of Summary Page.	-



1. Committee I.D. Number

2024049

CANDIDATE COMMITTEE

2. Committee Name

RICHARD WILLIAMSON FOR GRPS

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 10/15/2024 Name & Address: JUDY FREEMAN 425 CAMBRIDGE BLVD SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
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 10/16/2024 Name & Address SCOTT STENSAAS 2158 ACADEMY DR NE GRAND RAPIDS, MI 49503	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer SELF Business Address 2158 ACADEMY DR NE, GRAND RAPIDS, MI 49503		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/18/2024 Name & Address: GRAND RAPIDS CHAMBER PAC 250 MONROE AVE NW STE 250	_{\$} 1,000.00	_{\$} 1,000.00
GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide:		
5. If over \$100.00 cumulative, please provide:		
5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 150.00	_{\$_} 150.00
5. If over \$100.00 cumulative, please provide: Occupation Employer	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution:	§ 150.00	\$ 150.00
Occupation Employer		\$ 150.00
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? VES	\$\frac{150.00}{1,300.00} 15,765.29	\$ 150.00

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line 3a of Summary

Page.



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

CANDIDA I E COMM	IIIIEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEPUTY FINANCE DIRECTOR Employer Name & Business Address: MICHIGAN DEMOCRATIC PARTY 606 TOWNSEND ST, LANSING, MI 48933 Fund Raiser Contribution	4.	263.75	\$ 313.75
Contribution # 2 PAC Receipt? Yes Name & Address RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEPUTY FINANCE DIRECTOR Employer Name & Address: MICHIGAN DEMOCRATIC PARTY 606 TOWNSEND ST, LANSING, MI 48933 Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☑ Goods or Services Purchased by Candidate or Others- LOAN Description POSTAGE 5. Date Of Receipt: 04/15/2024 6. Vendor Name & Address: US POST OFFICE 1765 3 MILE RD NE, GRAND RAPIDS, MI 49505	204.00	<u>517.75</u>
Contribution #3 PAC Receipt? Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEPUTY FINANCE DIRECTOR Employer Name & Address: MICHIGAN DEMOCRATIC PARTY 606 TOWNSEND ST, LANSING, MI 48933 Fund Raiser Contribution	4.	04.00 \$	721.75
	Page Subtotal	671.75	0.00
	Grand Total of all Schedules 1-II (Complete on last page of Schedule		



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

CANDIDATE COMM	IIIIEE 2. Committee Name		
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEPUTY FINANCE DIRECTOR Employer Name & Business Address: MICHIGAN DEMOCRATIC PARTY 606 TOWNSEND ST, LANSING, MI 48933 Fund Raiser Contribution	4.	507.27	\$ 1,229.02
Contribution # 2 Name & Address JUDY JONES 2500 OAKWOOD AVE NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: RETIRED Employer Name & Address: RETIRED	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description POSTAGE Description 10/09/2024 6. Vendor Name & Address: US POST OFFICE 1765 3 MILE RD NE, GRAND RAPIDS, MI 49505		<u>234.40</u>
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$	3
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Description 5. Date Of Receipt: 6. Vendor Name & Address:	Click Here for Memo I	Itemization
	Page Subto	tal 666.67	1,463.42
			1

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



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

		1	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name MAGGIE SCHMIDT DESIGN		04/27/2024	\$ 171.00
	Purpose: GRAPHIC DESIGN	Date	Ψ <u>171.00</u>
Address 6583 MITCHELL RD	Purpose: ATT THE BESTAR		
PALMYRA, MI 49268			
1 / (EWITTO), WII 10200	Check box if this expenditure is payment of		
Drug Drive	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name COSTCO		05/01/2024	\$ 135.35
	EVENT EOOD/DRINK	Date	₹ 100.00
Address	Purpose: EVENT FOOD/DRINK		
5100 28TH ST SE			
GRAND RAPIDS, MI 49512			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name A OTDI LIE LI O			
Name ACTBLUE, LLC		05/01/2024	\$ 47.45
Address	Purpose: FEES	Date	17110
PO BOX 441146	1 uipose		
SOMERVILLE, MA 02144			
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
NI .			
Name MEIJER		05/03/2024	* 11 GO
Address	Purpose: EVENT FOOD/DRINK	Date	\$ <u>11.62</u>
Address 1997 E BELTLINE AVE NE	Purpose: LVLIVI I OOD/DITIIVIT		
GRAND RAPIDS, MI 49525			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE			
WIGHIGAN DEMOCRATIO STATE CENTRAL COMMITTEE		05/28/2024	\$ 75.00
Address	Purpose: CONTRIBUTION	Date	* <u>/ J.00</u>
606 TOWNSEND ST	_		
LANSING, MI 48933			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	440.42
			TTU.TL
	Grand Total of all ((Complete on last page)		
	(Complete on last page	oi Scriedule)	



1. Committee I. D. Number 2024049

2 Committee Name RICHARD WILLIAMSON FOR GRPS

	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		0.5 (0.0 (0.0 0.4	
Name MAGGIE SCHMIDT DESIGN		05/28/2024	\$ 90.00
Address	Purpose: GRAPHIC DESIGN	Date	
6583 MITCHELL RD PALMYRA, MI 49268			
1 /\(\text{CW11 \text{ VI, WII 40200}}\)	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name THE ORIGINAL UNION PRINT SHOP		05/31/2024	\$ 530.00
Address	Purpose: PRINTING	Date	\$ <u>330.00</u>
Address 270 S TELEGRAPH RD	Purpose.		
PONTIAC, MI 48341			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name ACTBLUE, LLC		06/01/2024	\$ 30.06
Address	Purpose: FEES	Date	\$ <u>00.00</u>
PO BOX 441146	· -		
SOMERVILLE, MA 02144	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name THE ORIGINAL UNION PRINT SHOP		06/12/2024	
	DDINTING	Date	\$ <u>477.00</u>
Address 270 S TELEGRAPH RD	Purpose: PRINTING		
PONTIAC, MI 48341			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name MAGGIE SCHMIDT DESIGN		06/14/2024	_
Address	Purpose: GRAPHIC DESIGN	Date	\$ <u>72.00</u>
6583 MITCHELL RD			
PALMYRA, MI 49268	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
		tal this page	1,199.06
	Grand Total of all S	-	1,100.00
	(Complete on last page		



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name THE ROCKET SCIENCE GROUP		06/16/2024	* 12 OO
THE HOOKET COLLINGE GROOT	Purpose: SOFTWARE	Date	\$ <u>13.00</u>
Address 405 N ANGIER AVE NE	Purpose: 301 1 VVAI 1L	24.0	
ATLANTA, GA 30308			
7(1 L) ((17), a) (00000	Check box if this expenditure is payment of		
Cond Daises	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name US POST OFFICE		06/21/2024	\$ 106.00
	Purpose: POSTAGE	Date	Ψ <u>100.00</u>
Address	Purpose: 1 3 17 (3 L		
1765 3 MILE RD NE			
GRAND RAPIDS, MI 49505			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name THE ORIGINAL UNION PRINT SHOP		06/26/2024	
	DDINTING		\$ <u>1,523.75</u>
Address 270 S TELEGRAPH RD	Purpose: PRINTING	Date	
PONTIAC, MI 48341			
FONTIAC, IVII 40341			
□	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name ACTBLUE, LLC		07/01/2024	0.05
	FFFC	Date	\$ <u>2.25 </u>
Address DO DOV 441146	Purpose: FEES		
PO BOX 441146			
SOMERVILLE, MA 02144			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name THE ROCKET SCIENCE GROUP		07/10/0004	
THE ROOKET COILINGE GROOT	COETMADE	07/16/2024	\$ 13.00
Address	Purpose: SOFTWARE	Date	10100
405 N ANGIER AVE NE			
ATLANTA, GA 30308	Check box if this expenditure is payment of		
Fund Baiser	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	1,658.00
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		1	
Name META INC.		07/31/2024	\$ 1.12
	Purpose: ADVERTISING	Date	Ψ 1.12
Address 1 HACKER WY	Purpose: 712 1 21111 1311 131		
MENLO PARK, CA 94025			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name ACTBLUE, LLC		08/01/2024	. 10.01
,	EEEQ	Date	\$ <u>19.91</u>
Address	Purpose: FEES		
PO BOX 441146			
SOMERVILLE, MA 02144			
□- ·-·	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name FEDEX		08/10/2024	\$ 10.71
Address	Purpose: PRINTING	Date	Φ <u>10.7 1</u>
233 FULTON ST W	ruipose.		
GRAND RAPIDS, MI 49503			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name THE ORIGINAL UNION PRINT SHOP		08/16/2024	
		Date	\$ <u>1,523.75</u>
Address	Purpose: PRINTING	24.0	
270 S TELEGRAPH RD PONTIAC, MI 48341			
FONTIAC, IVII 4034 I			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name THE ROCKET SCIENCE GROUP		08/16/2024	
Address	Purpose: SOFTWARE	Date	\$ <u>13.00</u>
405 N ANGIER AVE NE	i uipose.		
ATLANTA, GA 30308			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	1,568.49
	Grand Total of all S	Schedules 1B	•
	(Complete on last page		



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
3. Name and address of person of vendor to whom paid	4. Fulpose (nequired information)	J. Dale	o. Amount
Expenditure #1			
Name ACTBLUE, LLC		09/01/2024	\$ 10.29
Address	Purpose: FEES	Date	+ 10.20
PO BOX 441146	ruipose		
SOMERVILLE, MA 02144			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Catomoni		
Name OFFICE DEPOT		09/08/2024	–
OFFICE DELICIT	011001150		\$ <u>3.17</u>
Address	Purpose: SUPPLIES	Date	
675 CENTER DR			
WALKER, MI 49544			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name TARGET			
TANGET		09/08/2024	\$ 59.36
Address	Purpose: SUPPLIES	Date	
3248 ALPINE AVE NW			
WALKER, MI 49544			
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name US POST OFFICE		09/09/2024	
	DOCTACE	Date	\$ <u>414.40</u>
Address	Purpose: POSTAGE	- 5.1.5	
1765 3 MILE RD NE			
GRAND RAPIDS, MI 49505			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name FAMILY FARE		00/11/0004	
	DADADE CANDV	09/11/2024	\$ 32.69
Address 1415 FULTON ST E	Purpose: PARADE CANDY	Date	
GRAND RAPIDS, MI 49503			
S. D. W. 10 C., WIL 10000	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
<u> </u>		tal this page	F10.01
	Subio	tal this page	519.91
	Grand Total of all		
	(Complete on last page	e of Schedule)	



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MAGGIE SCHMIDT DESIGN Address 6583 MITCHELL RD PALMYRA, MI 49268	Purpose: GRAPHIC DESIGN	09/13/2024 Date	\$ 36.00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name THE ORIGINAL UNION PRINT SHOP Address 270 S TELEGRAPH RD	Purpose: PRINTING	09/13/2024 Date	\$ <u>1,272.00</u>
PONTIAC, MI 48341 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name US POST OFFICE Address 1765 3 MILE RD NE	Purpose: POSTAGE	09/13/2024 Date	\$ <u>560.00</u>
GRAND RAPIDS, MI 49505 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name US POST OFFICE		09/16/2024 Date	\$ 67.20
Address 1765 3 MILE RD NE GRAND RAPIDS, MI 49505	Purpose: POSTAGE	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name THE ROCKET SCIENCE GROUP Address 405 N ANGIER AVE NE	Purpose: SOFTWARE	09/16/2024 Date	\$ <u>13.00</u>
ATLANTA, GA 30308 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	1,948.20
	Grand Total of all ((Complete on last page		



1. Committee I. D. Number 2024049

2 Committee Name RICHARD WILLIAMSON FOR GRPS

	oninitiee name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name US POST OFFICE		09/18/2024	\$ 438.00
	Purpose: POSTAGE	Date	Ψ <u>+00.00</u>
Address 1765 3 MILE RD NE	Purpose:		
GRAND RAPIDS, MI 49505			
, , , , , , , , , , , , , , , , , , , ,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
		00/00/0004	
Name THE ORIGINAL UNION PRINT SHOP		09/22/2024	\$ 954.00
Address	Purpose: PRINTING	Date	
270 S TELEGRAPH RD			
PONTIAC, MI 48341			
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name CAMPAIGN VERIFY		09/23/2024	\$ 95.00
Address	Purpose: SOFTWARE	Date	· <u>00100</u>
1215 31ST ST NW			
WASHINGTON, DC 20007			
_	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name META INC.		09/30/2024	
	A D. / E D.T.IO.IN.IO	Date	\$ <u>20.00</u>
Address	Purpose: ADVERTISING	Baio	
1 HACKER WY			
MENLO PARK, CA 94025			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name ACTBLUE, LLC		10/01/2024	
•	FEES		\$ 23.64
Address PO BOX 441146	Purpose: FEES	Date	
SOMERVILLE, MA 02144			
, -	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	1,530.64
			1,000.04
	Grand Total of all 9 (Complete on last page)		



1. Committee I. D. Number 2024049

RICHARD WILLIAMSON FOR GRPS

2. 0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name SCALE TO WIN		10/03/2024	\$ <u>451.61</u>
Address 13742 HARPER ST	Purpose: SOFTWARE	Date	
SANTA ANA, CA 92703			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name US POST OFFICE		10/05/2024	\$ 224.00
Address	Purpose: POSTAGE	Date	
1765 3 MILE RD NE			
GRAND RAPIDS, MI 49505			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name US POST OFFICE		10/11/2024	\$ 336.00
Address 1765 3 MILE RD NE	Purpose: POSTAGE	Date	
GRAND RAPIDS, MI 49505			
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #4			
Name GORDON FOOD SERVICE		10/13/2024	\$ 16.24
Address	Purpose: EVENT FOOD/DRINK	Date	
1003 MICHIGAN ST NE GRAND RAPIDS, MI 49503			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name MEIJER		10/15/2024	
Address	Purpose: EVENT FOOD/DRINK	 Date	\$ <u>37.68</u>
1997 E BELTLINE AVE NE	ι αιρόδε	-	
GRAND RAPIDS, MI 49525			
,	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	1,065.53
	Grand Total of all S	Schedules 1B	
	(Complete on last page		



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

2.0			
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GORDON FOOD SERVICE Address 1003 MICHIGAN ST NE GRAND RAPIDS, MI 49503	Purpose: EVENT FOOD/DRINK	10/15/2024 Date	\$ <u>10.59</u>
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name WALGREENS Address	Purpose: EVENT ICE	10/15/2024 Date	\$ 3.98
1964 FULLER AVE NE GRAND RAPIDS, MI 49505			
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name ALDI Address	Purpose: EVENT FOOD/DRINK	10/16/2024 Date	\$ <u>21.20</u>
3101 KNAPP ST NE GRAND RAPIDS, MI 49525	Purpose:		
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name THE ROCKET SCIENCE GROUP	OOFTWARE	10/16/2024 Date	\$ 13.00
Address 405 N ANGIER AVE NE ATLANTA, GA 30308	Purpose: SOFTWARE	Daio	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name US POST OFFICE		10/16/2024	\$ 224.00
Address 1765 3 MILE RD NE	Purpose: POSTAGE	Date	Ψ <u>ΖΖ4.00</u>
GRAND RAPIDS, MI 49505 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	272.77
	Grand Total of all (Complete on last page		
	` ' '	΄ L	



1. Committee I. D. Number 2024049

2. Committee Name RICHARD WILLIAMSON FOR GRPS

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MEIJER Address 1997 E BELTLINE AVE NE	Purpose: EVENT FOOD/DRINK	10/16/2024 Date	\$ <u>17.79</u>
GRAND RAPIDS, MI 49525 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name ALDI Address 3101 KNAPP ST NE	Purpose: EVENT FOOD/DRINK	10/16/2024 Date	\$ <u>41.48</u>
GRAND RAPIDS, MI 49525 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name META INC. Address 1 HACKER WY	Purpose: ADVERTISING	10/17/2024 Date	\$ 3.00
MENLO PARK, CA 94025 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name META INC. Address 1 HACKER WY	Purpose: ADVERTISING	10/19/2024 Date	\$ 3.00
MENLO PARK, CA 94025 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name ACTBLUE, LLC Address PO BOX 441146	Purpose: FEES	10/20/2024 Date	\$ <u>19.07</u>
SOMERVILLE, MA 02144 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	84.34
	Grand Total of all (Complete on last page		



2. Committee Name RICHARD WILLIAMSON FOR GRPS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		10/00/555	
Name THE ORIGINAL UNION PRINT SHOP		10/20/2024	\$ <u>1,447.9</u> 0
Address 270 S TELEGRAPH RD	Purpose: PRINTING	Date	
PONTIAC, MI 48341			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2 Name			
ivalle		 Date	\$
Address	Purpose:	Date	
	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name			\$
Address	Purpose:	Date	·
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			\$
Address	Purpose:	Date	Ψ
		ara far Mama	Itemization Type
	Check box if this expenditure is payment of	ere for Memo	nternization Type
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5	Statement		
Name			
Address	Purpose:	Date	\$
	,	lere for Memo	Itemization Type
	Check box if this expenditure is payment of	O.O. IOI MICITIO	nomization Typo
Fund Raiser	debt or obligation reported on previous statement		
	Subtot	al this page	1,447.90
	Grand Total of all S	Schedules 1B	11 725 26

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number $_2024049$

2. Committee Name RICHARD WILLIAMSON FOR GRPS

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the composition (Check	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or urpose checked.)	forgiven <u>by</u> the con	nmittee.
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 endorsers or	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)
guarantors, if any. Debt #1 Corp? Yes	4. Type: PRINTING	04/23/24 _{\$} 263.75		
Owed to or by: RICHARD WILLIAMSON	4. Type: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	04/23/24\$ 203.73		
1213 CALGARY ST NE	5. <u>Date Debt Was Incurred</u> :	\$		
GRAND RAPIDS, MI 49505	04/15/2024	\$	000.75	\$ 0.00
*	6. Original Amount of Debt	\$	\$ <u>263.75</u>	\$_0.00
	_{\$} _263.75	Ψ		FORGIVEN
If heads become a feed and a second and a second and	·	\$		
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: POSTAGE	04/23/24\$ 204.00		
RICHARD WILLIAMSON	5. <u>Date Debt Was Incurred</u> :	Ф.		
1213 CALGARY ST NE	04/15/2024	Ψ		
GRAND RAPIDS, MI 49505	6. Original Amount of Debt:	\$	\$ 204.00	\$_0.00
	{\$} 204.00	\$		FORGIVEN
		\$		FONGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: WEBSITE	04/23/24 \$ 204.00		
RICHARD WILLIAMSON	5. Date Debt Was Incurred:	\$		
1213 CALGARY ST NE	04/15/2024	· · · · · · · · · · · · · · · · · · ·		
GRAND RAPIDS, MI 49505	6. Original Amount of Debt:	\$	\$ 204.00	\$_0.00
	_{\$} 204.00	\$	·	FORGIVEN
	¥	\$		T ONGIVER
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	0.00
		Grand Total	of all Schedules 1F	
(Ce	omplete on last page of Schedule	showing amounts owed by o	or to the committee)	Enter this total
				on line 12a "owed

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.

by"" or line 12b "owed to" of the Summary Page

Page 1 of 2



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number $_2024049$

CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	or forgiven <u>by</u> the con	nmittee.
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 endorsers 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? Yes Owed to or by: RICHARD WILLIAMSON	4. Type: OFFICE SUPPLIES	04/28/24 _{\$} 507.27		
1213 CALGARY ST NE	5. <u>Date Debt Was Incurred</u> :	\$		
GRAND RAPIDS, MI 49505	04/28/2024	\$	507.07	\$ 0.00
,	6. Original Amount of Debt:	\$	\$ 507.27	\$_0.00
	\$ <u>507.27</u>	\$		LIFORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	 \$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtota	al (Outstanding debt)	0.00
(C	complete on last page of Schedule s	Grand Tota showing amounts owed by	I of all Schedules 1E or to the committee)	0.00
,		,	′.	Enter this total

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.

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

Page 2 of 2



Summary Page.

Page 1 of 3

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name RICHARD WILLIAMSON FOR GRPS

	- USE A SEPARATE SH	EET 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. 1551 KALAMAZOO AVE
05/01/2024	24	CAMPAIGN KICKOFF	GRAND RAPIDS, MI 4950 Private Residence
. Total Contributions	1,320.00		- The state of the
. Other Receipts	0.00		
. Gross Receipts (Add lines 7	and 8) 1,320.00		
0. Total Cost of Event	146.97 Intributions and All Expenditures	s Made For the Event)	
1. Check if event was a jo	int fund raiser and complete the	e following:	
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
-			
	<u> </u>		

Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024049 1. Committee I.D. Number

2. Committee Name RICHARD WILLIAMSON FOR GRPS

	- USE A	SEPARATE SH	EET FOR EACH	EVENT -	
3. Date Event Was Held		of Individuals Attending ating (whichever is	5. Type of Fund Raising	Activity	6. Address and Name (If any) of t place where the activity was held 1213 CALGARY ST N
07/25/2024	,	12	RPCV VIRTUAL FUI	NDRAISER	GRAND RAPIDS, MI 49505 Private Residence
7. Total Contributions		620.00			
8. Other Receipts		0.00			
9. Gross Receipts (Add lines 7	and 8)	620.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	and All Expenditures	Made For the Event	-)	
11. Check if event was a jo	int fund ra	iser and complete the	following:		
Co-Sponsor(s)		Contribution S (%)	plit		Expenditure Split (%)
	-				
	_				
	-				
	_				
	-				
The committee is require	rad ta fila r	o congreto Fund Deig	or Schodula for asah	fund raising	a avant hald during the

- 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.

Dago	2	of 3
Page	_	or O



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2024049 1. Committee I.D. Number

2. Committee Name RICHARD WILLIAMSON FOR GRPS

	- USE A SEPARATE SH	EET 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. GR FIREFIGHTERS HALL
10/15/2024	17	LABOR UNION RECEPTION	1930 FULLER AVE NE GRAND RAPIDS, MI 4950 Private Residence
. Total Contributions	1,535.00		
Other Receipts	0.00		
Gross Receipts (Add lines 7 a	1,535.00		
0. Total Cost of Event Fotal Cost includes In-Kind Con	148.96 artibutions and All Expenditures	s Made For the Event)	
1. Check if event was a join	nt fund raiser and complete the	e following:	
Co-Sponsor(s)	Contribution 5 (%)	Split	Expenditure Split (%)
			
The committee is require	ed to file a separate Fund Rais	on Cohodula for apple for all relation	

- 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.

Page	3	of	3