



FILED

25 OCT 2024 PM 04:22

KENT COUNTY CLERK
GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 07/23/2024 to 10/20/2024

1. Committee I.D. Number

2024179

4. Candidate Last Name

DAVIS

First Name

ARICK

M.I.

L

2. Committee Name

ARICK DAVIS FOR GRPS SCHOOL BOARD

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

SCHOOL BOARD MEMBER, GRAND RAPIDS PUBLIC SCHOOLS SD

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

5. Committee's Mailing Address

**814 PRINCE ST SE
GRAND RAPIDS, MI 49507**

6. Treasurer's Name & Residential Address

**ARICK DAVIS
814 PRINCE ST SE
GRAND RAPIDS, MI 49507**

Area Code and Phone (618) 634-8589

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

Area Code & Phone (618) 634-8589

7. Treasurer's Business Address

**814 PRINCE ST SE
GRAND RAPIDS, MI 49507**

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

**ARICK L DAVIS
814 PRINCE ST SE
GRAND RAPIDS, MI 49507**

Area Code and Phone (618) 634-8589

Area Code and Phone (618) 634-8589

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

☐ Primary

☒ General

☐ Convention

☐ Special

☐ School

☐ Caucus

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

☐ July Quarterly

☐ October Quarterly

9c. ☐ Annual Statement ()
Coverage Year

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

Date of Election, Convention or Caucus

11/05/2024

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/25/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/25/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2024179

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>9,816.71</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>9,816.71</u>	(18.) \$ <u>9,816.71</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>9,816.71</u>	(20.) \$ <u>9,816.71</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,852.36</u>	(21.) \$ <u>1,852.36</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>6,226.91</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>6,226.91</u>	(23.) \$ <u>6,226.91</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>9,816.71</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>9,816.71</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>6,226.91</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3,589.80</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

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)
<div>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/01/2024</u></div> <div>Name & Address: MARY WILLIAMS</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>100.00</u></div><div>\$ <u>100.00</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/02/2024</u></div> <div>Name & Address: KAREN BOYKIN-TOWNS</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>208.54</u></div><div>\$ <u>208.54</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/02/2024</u></div> <div>Name & Address: RUTH KELLY</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>26.34</u></div><div>\$ <u>26.34</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/02/2024</u></div> <div>Name & Address: MARK LAMAN 364 SILVERIDGE DR HOLLAND, MI 49424</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>104.42</u></div><div>\$ <u>104.42</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>DEVELOPMENTAL ENHANCEMENT BEHAVIORAL HEALTH</u> Business Address <u>3809 LAKE EASTBROOK BLVD SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		

Page Subtotal **439.30**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/05/2024</u>	
Name & Address: LIAM BAILEY 110 FULLER AVE SE GRAND RAPIDS, MI 49506		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR DEI TRAINING SPECIALIST</u> Employer <u>UNIVERSITY OF MICHIGAN</u> Business Address <u>500 S STATE ST, ANN ARBOR, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/06/2024</u>	
Name & Address: KELLY HOLLINGSWORTH 655 INNES ST NE GRAND RAPIDS, MI 49503		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>WARNER NORCROSS & JUDD</u> Business Address <u>150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/06/2024</u>	
Name & Address: CEDRIC KENNEDY 11787 CAVELL ST LIVONIA, MI 48150		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR ACCOUNT MANAGER</u> Employer <u>RIVET WORK</u> Business Address <u>1420 WASHINGTON BLVD, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/07/2024</u>	
Name & Address: KARLO ZADRO 5509 WATERBURY PL SE KENTWOOD, MI 49508		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **365.63**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/07/2024</u>	
Name & Address: FILIP ZADRO		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/09/2024</u>	
Name & Address: CHRIS ROMERO		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/13/2024</u>	
Name & Address: SCOT KELLOGG		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/14/2024</u>	
Name & Address: JESS SCHMIDT		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **157.42**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/14/2024</u> Name & Address: STACIE BEHLER 1128 KENEBERRY WAY SE GRAND RAPIDS, MI 49506		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/15/2024</u> Name & Address: JENNIFER GRONZIK 8106 20TH AVE JENISON, MI 49428		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>GRAND VALLEY STATE UNIVERSITY</u> Business Address <u>1 CAMPUS DR, ALLENDALE, MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/16/2024</u> Name & Address: ANDY JOHNSTON		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/19/2024</u> Name & Address: KARA VAN DAM		\$ <u>208.54</u>	\$ <u>208.54</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>GRAND VALLEY STATE UNIVERSITY</u> Business Address <u>1 CAMPUS DR, ALLENDALE, MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **417.70**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/19/2024</u>	
Name & Address: KRISTIN GIETZEN		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/19/2024</u>	
Name & Address: JOSHUA LUNGER		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/20/2024</u>	
Name & Address: LINDA GOULET		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/20/2024</u>	
Name & Address: SONNY HOOGENDOORN		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **352.37**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: BEVERLY RYSKAMP		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>NETWORK 180</u> Business Address <u>790 FULLER AVE NE, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: CARL ERIKSON 334 BRIARWOOD AVE SE EAST GRAND RAPIDS, MI 49506		\$ <u>1,041.44</u>	\$ <u>1,041.44</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>ATOMIC OBJECT</u> Business Address <u>1034 WEALTHY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: AARON JONKER 1115 GIDDINGS AVE SE GRAND RAPIDS, MI 49506		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FOUNDER</u> Employer <u>TELOSA CONSULTING</u> Business Address <u>927 GIDDINGS AVE SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: CHRIS KAMINSKY		\$ <u>31.55</u>	\$ <u>31.55</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **1,677.41**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

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)
<div>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/2024</u></div> <div>Name & Address: SERGIO CIRA REYES</div> <div style="text-align: right; padding-top: 20px;">\$ <u>52.37</u> \$ <u>52.37</u></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/2024</u></div> <div>Name & Address: PAM SYLVESTER</div> <div style="text-align: right; padding-top: 20px;">\$ <u>104.42</u> \$ <u>104.42</u></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/2024</u></div> <div>Name & Address: RACHEL TURNER</div> <div style="text-align: right; padding-top: 20px;">\$ <u>26.34</u> \$ <u>26.34</u></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/21/2024</u></div> <div>Name & Address: ANDREA HAINES</div> <div style="text-align: right; padding-top: 20px;">\$ <u>104.42</u> \$ <u>104.42</u></div> <div>5. If over \$100.00 cumulative, please provide: Occupation <u>APPLICATIONS MANAGER</u> Employer <u>LACKS ENTERPRISES</u> Business Address <u>1648 MONROE AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</div>		

Page Subtotal 287.55

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: WINSOME KIRTON 639 KELLOGG ST SE GRAND RAPIDS, MI 49503		\$ <u>156.48</u>	\$ <u>156.48</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>HEARD.IO</u> Business Address <u>GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: ANDY ALLEN		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>AYA YOUTH COLLECTIVE</u> Business Address <u>320 STATE ST SE, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: KELLY JAMES CLARK		\$ <u>260.59</u>	\$ <u>260.59</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>CALVIN UNIVERSITY</u> Business Address <u>3201 BURTON ST SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: JERMALE EDDIE 1235 PROSPECT AVE SE GRAND RAPIDS, MI 49507		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **547.83**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: AMANDA BERNES		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: KYLE SZUCS 1623 ROSSMAN AVE SE GRAND RAPIDS, MI 49507		\$ <u>78.40</u>	\$ <u>78.40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: MORGAN HANKS 840 S OTTILLIA ST SE GRAND RAPIDS, MI 49507		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>KENT DISTRICT LIBRARY</u> Business Address <u>814 W RIVER CENTER DR NE, COMSTOCK PARK, MI 49321</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: STEPHANIE NAITO		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>MEIJER</u> Business Address <u>2929 WALKER AVE NW, GRAND RAPIDS, MI 49544</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal **339.61**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: CARL ERIKSON 334 BRIARWOOD AVE SE EAST GRAND RAPIDS, MI 49506		\$ <u>1,041.44</u>	\$ <u>2,082.88</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>ATOMIC OBJECT</u> Business Address <u>1034 WEALTHY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/21/2024</u>	
Name & Address: CAROLYN FRANK		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/22/2024</u>	
Name & Address: MARK LAMAN 364 SILVERIDGE DR HOLLAND, MI 49424		\$ <u>156.48</u>	\$ <u>260.90</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>DEVELOPMENTAL ENHANCEMENT BEHAVIORAL HEALTH</u> Business Address <u>3809 LAKE EASTBROOK BLVD SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/22/2024</u>	
Name & Address: LEWIS SMALLIGAN 838 BOSTON ST SE GRAND RAPIDS, MI 49507		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>TALL TREE REALTY</u> Business Address <u>980 HALL ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **1,354.71**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/22/2024</u>	
Name & Address: <u>LIBBY WAHLSTROM</u>		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>BEACON HILL FOUNDATION</u> Business Address <u>1919 BOSTON ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/22/2024</u>	
Name & Address: <u>AMBER GINOP</u>		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/03/2024</u>	
Name & Address: <u>MONICA SPARKS</u>		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/04/2024</u>	
Name & Address: <u>JOE JONES</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>THE HEKIMA GROUP</u> Business Address <u>2528 ORCHARD VIEW DR NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 333.13

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/08/2024</u> Name & Address: RUTH KELLY	\$ 15.00	\$ 41.34
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/2024</u> Name & Address: TAMAR SHRIKIAN	\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/2024</u> Name & Address: FRIEDA FOSTER	\$ 104.42	\$ 104.42
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/10/2024</u> Name & Address: KRIS SPAULDING	\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>BREWERY VIVANT</u> Business Address <u>925 CHERRY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal **269.42**

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/2024</u>	
Name & Address: KIM MOORE			
		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide:			
Occupation <u>COMMUNICATIONS DIRECTOR</u>		Employer <u>KIDS FOOD BASKET</u>	
Business Address <u>1300 PLYMOUTH AVE NE, GRAND RAPIDS, MI 49505</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/14/2024</u>	
Name & Address: BRIGITTE PFEIFFELMANN 123 DWIGHT AVE SE GRAND RAPIDS, MI 49506			
		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide:			
Occupation <u>PUBLIC RELATIONS</u>		Employer <u>SPECTACLE CREATIVE MEDIA</u>	
Business Address <u>547 FULTON ST E, GRAND RAPIDS, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2024</u>	
Name & Address: RUSSELL DUNLAP			
		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide:			
Occupation _____		Employer _____	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/2024</u>	
Name & Address: STEVE FABER			
		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide:			
Occupation _____		Employer _____	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **338.26**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

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)
<div>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/21/2024</u></div> <div>Name & Address: ALLISON LECHNER</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>15.93</u></div><div>\$ <u>15.93</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2024</u></div> <div>Name & Address: TONY BAKER 1128 KENEBERRY WAY SE GRAND RAPIDS, MI 49506</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>520.87</u></div><div>\$ <u>520.87</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation <u>KENT COUNTY COMMISSIONER</u> Employer <u>KENT COUNTY</u> Business Address <u>300 MONROE AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2024</u></div> <div>Name & Address: TERRY GATES</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>50.00</u></div><div>\$ <u>50.00</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		
<div>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/2024</u></div> <div>Name & Address: JOEL VAN KUIKEN 618 WINDSOR TERRACE SE GRAND RAPIDS, MI 49503</div> <div style="text-align: right; padding-top: 20px;"><div>\$ <u>104.42</u></div><div>\$ <u>104.42</u></div></div> <div>5. If over \$100.00 cumulative, please provide: Occupation <u>CO-FOUNDER</u> Employer <u>DELTA PROJECT</u> Business Address <u>1514 WEALTHY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</div>		

Page Subtotal **691.22**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/24/2024</u>	
Name & Address: KELI CHRISTOPHER		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/24/2024</u>	
Name & Address: BRIDGET CLARK WHITNEY		\$ <u>78.40</u>	\$ <u>78.40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/25/2024</u>	
Name & Address: SARAH CHARTIER		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/25/2024</u>	
Name & Address: MATTHEW GREEN		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **309.16**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/27/2024</u>	
Name & Address: CHARISSA HUANG		\$ <u>52.37</u>	\$ <u>52.37</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/2024</u>	
Name & Address: JEANETTE WEBB		\$ <u>15.93</u>	\$ <u>15.93</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/30/2024</u>	
Name & Address: MEGAN ERSKINE		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/04/2024</u>	
Name & Address: OMAR CUEVAS		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **268.30**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/04/2024</u>	
Name & Address: JAMIE DIONNE		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/07/2024</u>	
Name & Address: PAMELA BROWN		\$ <u>104.42</u>	\$ <u>104.42</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>10/07/2024</u>	
Name & Address: GRAND RAPIDS CHAMBER OF COMMERCE 250 MONROE AVE NW GRAND RAPIDS, MI 49503		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/08/2024</u>	
Name & Address: MARINA PAVLETIC		\$ <u>26.34</u>	\$ <u>26.34</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **1,380.76**

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

Enter this total on
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024179
2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

<small>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.</small>		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/19/2024</u> Name & Address: LAURIE RUKKER		\$ 26.34	\$ 26.34
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/19/2024</u> Name & Address: DAVE GILLEN		\$ 260.59	\$ 260.59
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **286.93**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **9,816.71**

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2024179

CANDIDATE COMMITTEE

2. Committee Name ARICK DAVIS FOR GRPS SCHOOL BOARD

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: LAST MILE CAFE 1006 HALL ST SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>CAMPAIGN SIGNS</u> 5. Date Of Receipt: <u>08/14/2024</u> 6. Vendor Name & Address: RIVER CITY REPRODUCTIONS 4039 40TH ST SE, GRAND RAPIDS, MI 49512	\$ <u>742.00</u>	\$ <u>742.00</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: ARICK DAVIS 814 PRINCE ST SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: OWNER Employer Name & Address: LAST MILE CAFE 1006 HALL ST SE, GRAND RAPIDS, MI 49507	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>CAMPAIGN SIGNS</u> 5. Date Of Receipt: <u>08/23/2024</u> 6. Vendor Name & Address: RIVER CITY REPRODUCTIONS 4039 40TH ST SE, GRAND RAPIDS, MI 49512	\$ <u>1,110.36</u>	\$ <u>1,110.36</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			

[Click Here for Memo Itemization](#)

Page Subtotal

1,852.36

1,852.36

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

1,852.36

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2024179**
2. Committee Name **ARICK DAVIS FOR GRPS SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MEIJER Address 5531 28TH ST SE GRAND RAPIDS, MI 49512 <input type="checkbox"/> Fund Raiser	Purpose: FOOD & BEVERAGE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/24/2024 Date	\$ 300.01
Expenditure #2 Name ELISSA SLOTKIN Address P.O. BOX 4145 EAST LANSING, MI 48826 <input type="checkbox"/> Fund Raiser	Purpose: DONATION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/24/2024 Date	\$ 500.00
Expenditure #3 Name MICHIGAN DEMOCRATIC PARTY Address 301 FULLER AVE NE GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser	Purpose: DONATION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/25/2024 Date	\$ 75.00
Expenditure #4 Name AQUME FOUNDATION Address P.O. BOX 9193 WYOMING, MI 49509 <input type="checkbox"/> Fund Raiser	Purpose: EVENT TICKETS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/27/2024 Date	\$ 108.55
Expenditure #5 Name YOUNG PROFESSIONALS OF COLOR Address <input type="checkbox"/> Fund Raiser	Purpose: EVENT TICKET <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/04/2024 Date	\$ 75.00

Subtotal this page **1,058.56**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2024179**
2. Committee Name **ARICK DAVIS FOR GRPS SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name RICHARD WILLIAMSON Address 1551 KALAMAZOO AVE SE GRAND RAPIDS, MI 49507 <input type="checkbox"/> Fund Raiser	Purpose: DONATION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/04/2024 Date	\$ 10.00
Expenditure #2 Name SAMIYAH MAILK Address 277 HUNNICUTT ST NW ATLANTA, GA 30313 <input type="checkbox"/> Fund Raiser	Purpose: MARKETING <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/2024 Date	\$ 1,000.00
Expenditure #3 Name GRAND RAPIDS PUBLIC SCHOOLS FOUNDATION Address 125 OTTAWA AVE NW GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser	Purpose: DONATION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/2024 Date	\$ 312.27
Expenditure #4 Name ORIGINAL UNION PRINTER Address 270 S TELEGRAPH RD PONTIAC, MI 48341 <input type="checkbox"/> Fund Raiser	Purpose: PRINT MATERIALS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/14/2024 Date	\$ 3,330.84
Expenditure #5 Name FRIENDSHIP MILES Address 122 OAKES ST SW GRAND RAPIDS, MI 49503 <input type="checkbox"/> Fund Raiser	Purpose: DONATION <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/17/2024 Date	\$ 515.24

Subtotal this page **5,168.35**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **6,226.91**

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **2024179**
2. Committee Name **ARICK DAVIS FOR GRPS SCHOOL BOARD**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 08/21/2024	4. Number of Individuals Attending or Participating (whichever is greater) 40	5. Type of Fund Raising Activity KICKOFF FUNDRAISER	6. Address and Name (If any) of the place where the activity was held. LAST MILE CAFE 1006 HALL ST SE GRAND RAPIDS, MI 49507 <input type="checkbox"/> Private Residence
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7. Total Contributions **3,946.21**
8. Other Receipts **0.00**
9. Gross Receipts (Add lines 7 and 8) **3,946.21**
10. Total Cost of Event **0.00**
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (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.