



FILED

24 JUL 2026 PM 03:21

KENT COUNTY CLERK
GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 01/01/2026 to 07/19/2026

1. Committee I.D. Number

2024155

2. Committee Name

JORDOUN EATMAN ELECTION COMMITTEE

4. Candidate Last Name

EATMAN

First Name

JORDOUN

M.I.

T

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

CITY COMMISSIONER, WARD 1, GRAND RAPIDS

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

5. Committee's Mailing Address

**PO BOX 230821
GRAND RAPIDS, MI 49523**

Area Code and Phone (616) 485-4606
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

**MERCEDES BARRAGAN
2415 ALMONT AVE SE
GRAND RAPIDS, MI 49507**

Area Code & Phone (616) 617-6778

7. Treasurer's Business Address

**2415 ALMONT AVE SE
GRAND RAPIDS, MI 49507**

Area Code and Phone (616) 617-6778

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

Area Code and Phone () -

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

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

Date of Election, Convention or Caucus

08/04/2026

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.)

9e. Dissolution of Candidate Committee

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

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

Effective date of dissolution

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

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

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/24/2026

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/24/2026



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2024155

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>8,475.55</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>8,475.55</u>	(18.) \$ <u>8,475.55</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>8,475.55</u>	(20.) \$ <u>8,475.55</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,452.91</u>	(21.) \$ <u>1,452.91</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>3,599.84</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>3,599.84</u>	(23.) \$ <u>3,599.84</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>502.62</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>1,999.12</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>8,475.55</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>10,474.67</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3,599.84</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>6,874.83</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>05/11/2026</u> Name & Address: CAITLIN HOPKINS 1019 E MAIN STREET LOWELL, MI 49331		\$ <u>55.00</u>	\$ <u>55.00</u>
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 <u>06/02/2026</u> Name & Address: STACEY WILLIS 5282 BURGIS AVE SE KENTWOOD, MI 49508		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/02/2026</u> Name & Address: JOSEPH JONES 2528 ORCHARD VIEW DR NE GRAND RAPIDS, MI 49505		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>FERRIS STATE UNIVERSITY</u> Business Address <u>1201 S STATE ST, BIG RAPIDS, MI 49307</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/02/2026</u> Name & Address: STACY STOUT 1324 CLOVER CREST NW GRAND RAPIDS, MI 49504		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 430.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>06/08/2026</u>	
Name & Address: LORENZO BRADSHAW 320 HOLLISTER AVE SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>06/08/2026</u>	
Name & Address: LINDA SQUIRES 2059 COLLEGE AVE SE GRAND RAPIDS, MI 49507		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/09/2026</u>	
Name & Address: BRANDY MCCALLUM-MARTIN 2744 PLOVER DR SE KENTWOOD, MI 49508		\$ <u>500.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>EXPERIENCE GR</u> Business Address <u>171 MONROE AVE NW, SUITE 545, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/11/2026</u>	
Name & Address: ANTHONY BAKER 638 FULTON ST W GRAND RAPIDS, MI 49504		\$ <u>55.00</u>	\$ <u>55.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 755.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>06/17/2026</u>	
Name & Address: TASHA MAC P.O. BOX 164672 FORT WORTH, TX 76117		\$ <u>55.55</u>	\$ <u>55.55</u>
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 <u>06/17/2026</u>	
Name & Address: SHANDA VAUGHN 3550 BURTON RIDGE RD SE GRAND RAPIDS, MI 49546		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/17/2026</u>	
Name & Address: SAMARHIA GIFFEL 3550 BURTON RIDGE RD SE GRAND RAPIDS, MI 49546		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>06/18/2026</u>	
Name & Address: APRIL REED 1692 BLOOMFIELD DR SE GRAND RAPIDS, MI 49508		\$ <u>90.00</u>	\$ <u>90.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 270.55

Grand Total of All Schedules 1A
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>06/18/2026</u> Name & Address: LAKESSA DAVIS 3142 PLEASANT GROVE TERRACE NE GRAND RAPIDS, MI 49525		\$ <u>200.00</u>	\$ <u>200.00</u>
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 <u>06/20/2026</u> Name & Address: TATUM HAWKINS 4684 QUAKER HILL DR SE KENTWOOD, MI 49512		\$ <u>55.00</u>	\$ <u>55.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/20/2026</u> Name & Address: RONALD DIALLO 3428 BRIXFORD LN WEST LAFAYETTE, IN 47906		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>06/21/2026</u> Name & Address: STEVEN WOLFE 6799 CASCADE LAKES CT GRAND RAPIDS, MI 49546		\$ <u>55.00</u>	\$ <u>55.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **410.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/21/2026</u>	
Name & Address: MICHELLE SINGLETON 3310 BRETON VALLEY DR SE KENTWOOD, MI 49512		\$ <u>100.00</u>	\$ <u>200.00</u>
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 <u>06/24/2026</u>	
Name & Address: STEPHANIE BROWN 3159 TURRET DR SE GRAND RAPIDS, MI 49512		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DENTIST</u> Employer <u>SMILE DENTAL PARTNERS</u> Business Address <u>1203 S BEECHTREE ST, GRAND HAVEN, MI 49417</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/24/2026</u>	
Name & Address: BRANDY MORRIS 452 N ROOSEVELT ST APT 103 CANTON, MI 48187		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>06/24/2026</u>	
Name & Address: ERIKA VANDYKE 536 LYON ST NE GRAND RAPIDS, MI 49503		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 425.00

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**ITEMIZED CONTRIBUTIONS
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2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>06/24/2026</u>	
Name & Address: ANDREW GOODE 1030 ALGER ST SE GRAND RAPIDS, MI 49507		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>06/24/2026</u>	
Name & Address: DERVIN FIGUERO 2185 EASTCASTLE DR SE GRAND RAPIDS, MI 49508		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/25/2026</u>	
Name & Address: MARLENE KOWALSKI BRAUN 7960 JONATHAN WOODS NE FOREST HILLS, MI 49301		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>06/25/2026</u>	
Name & Address: VICTORIA GRAVES 938 CREEKWOOD LN MILFORD, MI 48381		\$ <u>25.00</u>	\$ <u>25.00</u>
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
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
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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? ☐ YES	4. Date of Receipt <u>06/25/2026</u>	
Name & Address: AARIE WADE 2231 FRANCIS AVE SE GRAND RAPIDS, MI 49507		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>06/26/2026</u>	
Name & Address: ABIGAIL GROFF 2360 LAKE DR SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/26/2026</u>	
Name & Address: SUZETTTE LONG 5058 HILLWOOD CT SE GRAND RAPIDS, MI 49508		\$ <u>55.00</u>	\$ <u>55.00</u>
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 <u>06/26/2026</u>	
Name & Address: LAURAN PEOPLES 210 ROCKETTS WAY HENRICO, VA 23231		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 230.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/27/2026</u> Name & Address: STEVEN G DEPOLO 942 FAIRMOUNT ST SE GRAND RAPIDS, MI 49506		\$ <u>20.00</u>	\$ <u>20.00</u>
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 <u>06/27/2026</u> Name & Address: KELI CHRISTOPHER 1420 BERKSHIRE DR SE GRAND RAPIDS, MI 49508		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/27/2026</u> Name & Address: TASHA BLACKMON 4828 E MEADOWS CT SE GRAND RAPIDS, MI 49546		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT & CEO</u> Employer <u>CHERRY HEALTH</u> Business Address <u>100 CHERRY ST SE, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/27/2026</u> Name & Address: SENITA LENEAR 1333 ALGER ST SE SUITE 1 GRAND RAPIDS, MI 49507		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>GENESIS CONSULTING GROUP</u> Business Address <u>1333 ALGER ST SE, SUITE 1, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 795.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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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? ☐ YES	4. Date of Receipt <u>06/27/2026</u>	
Name & Address: LATRICIA TRICE 873 WATERS BLF DR SE BYRON CENTER, MI 49315		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>06/27/2026</u>	
Name & Address: BETSY ARTZ 3776 OLD ELM DR SE KENTWOOD, MI 49512		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/28/2026</u>	
Name & Address: CHARLES DUBOSE 6169 BELAIR LAKE RD STONECREST, GA 30038		\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR DIRECTOR MEDICAL AFFAIRS</u> Employer <u>CONCEPTRA BIOSCIENCES</u> Business Address <u>821 PAVILION CT, SUITE 337, MCDONOUGH, GA 30253</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/30/2026</u>	
Name & Address: DEBORAH CLANTON 3135 E GATEHOUSE DR SE GRAND RAPIDS, MI 49546		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 425.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>07/01/2026</u> Name & Address: SHAQUANDA GORDON 6437 VANTAGE DR SE CALEDONIA, MI 49316		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR VP HUMAN RESOURCES</u> Employer <u>EQI LTD</u> Business Address <u>17863 170TH AVE, SUITE 201, SPRING LAKE, MI 49456</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/01/2026</u> Name & Address: KATHRYN CARPENTER 735 INNES ST NE GRAND RAPIDS, MI 49503		\$ <u>55.00</u>	\$ <u>55.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/03/2026</u> Name & Address: LINCOLN GIBBS 8287 SILICA DR WHITE LAKE, MI 48386		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/04/2026</u> Name & Address: BIANCA FOSTER 3970 S GREENBROOKE DR SE GRAND RAPIDS, MI 49512		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 430.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>07/04/2026</u>	
Name & Address: VICKI HARRIS 5575 BENTBROOK DR SE KENTWOOD, MI 49508		\$ <u>50.00</u>	\$ <u>50.00</u>
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 <u>07/05/2026</u>	
Name & Address: FLORIA BATES 2441 HAMPTON CT SE GRAND RAPIDS, MI 49546		\$ <u>1,225.00</u>	\$ <u>1,225.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/07/2026</u>	
Name & Address: TONJA MOYER 3017 52ND ST SE KENTWOOD, MI 49512		\$ <u>55.00</u>	\$ <u>55.00</u>
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 <u>07/08/2026</u>	
Name & Address: BECKI JO GLOVER 1043 MARVELLE LN A6 GREEN BAY, WI 54304		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

1,355.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>07/08/2026</u>	
Name & Address: ADALENA OLIVER 1300 CRYSTAL DR ARLINGTON, VA 22202		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/08/2026</u>	
Name & Address: VALARINA OLIVER-DUMONT 417 DES PLAINES AVE FOREST PARK, IL 60130		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BANK EXAMINER</u> Employer <u>OFFICE OF THE COMPTROLLER OF THE CURRENCY</u> Business Address <u>425 S FINANCIAL PL, CHICAGO, IL 60605</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/10/2026</u>	
Name & Address: APRIL KIDD 1254 DICKINSON ST SE GRAND RAPIDS, MI 49507		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/10/2026</u>	
Name & Address: KATHRYN HOFFMAN 262 AURORA ST SE GRAND RAPIDS, MI 49507		\$ <u>400.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>GARFIELD PARK NEIGHBORHOOD ASSOCIATION</u> Business Address <u>334 BURTON ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 850.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>07/10/2026</u>	
Name & Address: ROSIE JONES 1231 M.L.K. JR ST SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/15/2026</u>	
Name & Address: JAMAL FISHER 2034 S CROSS CREEK DR SE GRAND RAPIDS, MI 49508		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>THERAPIST</u> Employer <u>JAMAL FISHER THERAPY PLLC</u> Business Address <u>1430 ROBINSON RD SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/17/2026</u>	
Name & Address: MERCEDES BARRAGAN 2415 ALMONT AVE SE GRAND RAPIDS, MI 49507		\$ <u>1,200.00</u>	\$ <u>1,200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HR MANAGER</u> Employer <u>DEMATIC</u> Business Address <u>507 PLYMOUTH AVE NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/17/2026</u>	
Name & Address: BRANDY MCCALLUM-MARTIN 2744 PLOVER DR SE KENTWOOD, MI 49508		\$ <u>300.00</u>	\$ <u>1,300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>EXPERIENCE GR</u> Business Address <u>171 MONROE AVE NW, SUITE 545, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **1,700.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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 <u>07/18/2026</u>	
Name & Address: TASIA FIELDS 3078 NICKLAUS LN WADSWORTH, IL 60083		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>07/18/2026</u>	
Name & Address: DISHA RODDY E PARK PL NE FLOSSMOOR, IL 60422		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASSOCIATE CONSTRUCTION MANAGER</u> Employer <u>AMAZON</u> Business Address <u>410 TERRY AVE N, SEATTLE, WA 98109</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt _____	
Name & Address: _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt _____	
Name & Address: _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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)

8,475.55

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2024155

CANDIDATE COMMITTEE

2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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? ☐ Yes Name & Address: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: VICE PRESIDENT Employer Name & Business Address: EXPERIENCE GRAND RAPIDS 171 MONROE AVE NW, GRAND RAPIDS, MI 49503 ☐ 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 <u>CAMPAIGN T-SHIRTS</u> 5. Date Of Receipt: <u>06/18/2026</u> 6. Vendor Name & Address: THEE CRAFTHER 1971 E BELTLINE AVE NE, SUITE 106, GRAND RAPIDS, MI 49525	\$ 156.00	\$ 156.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: VP OF ENGAGEMENT & INCLUSION Employer Name & Address: EXPERIENCE GRAND RAPIDS 171 MONROE AVE NW, GRAND RAPIDS, MI 49503 ☐ 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 <u>PALM CARDS</u> 5. Date Of Receipt: <u>06/19/2026</u> 6. Vendor Name & Address: LAWSON PRINTERS 685 W COLUMBIA AVE, BATTLE CREEK, MI 49015	\$ 245.92	\$ 401.92
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507 If over \$100.00 cumulative, please provide: Occupation: VP OF ENGAGEMENT & INCLUSION Employer Name & Address: EXPERIENCE GRAND RAPIDS 171 MONROE AVE NW, GRAND RAPIDS, MI 49503 ☐ 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 <u>STICKERS</u> 5. Date Of Receipt: <u>06/22/2026</u> 6. Vendor Name & Address: RJ'S PRINTING 1001 2ND ST, KALAMAZOO, MI 49001	\$ 100.70	\$ 502.62

Page Subtotal **502.62** **502.62**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2024155

CANDIDATE COMMITTEE

2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

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? ☐ Yes Name & Address: MILINDA Y YSASI 1345 COLUMBIA AVE NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: CEO Employer Name & Business Address: GROW 1333 ALGER ST SE, GRAND RAPIDS, MI 49507 ☐ 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 <u>NECKLACES FOR HOLLYHOCK PARADE</u> 5. Date Of Receipt: <u>06/27/2026</u> 6. Vendor Name & Address: AMAZON 440 TERRY AVE N, SEATTLE, WA 98109	\$ <u>105.96</u>	\$ <u>105.96</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: BROWNSTONE IMAGES 8124 S FRANCISCO AVE CHICAGO, IL 60652 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ 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 <u>LARGE VINYL BANNER AND SIGNS</u> 5. Date Of Receipt: <u>07/02/2026</u> 6. Vendor Name & Address:	\$ <u>735.00</u>	\$ <u>735.00</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: MILINDA Y YSASI 1345 COLUMBIA AVE NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: CEO Employer Name & Address: GROW 1333 ALGER ST SE, GRAND RAPIDS, MI 49507 ☐ 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 <u>CANDY AND WATER FOR HOLLYHOCK PARADE</u> 5. Date Of Receipt: <u>07/04/2026</u> 6. Vendor Name & Address: GFS 1003 MICHIGAN ST NE, GRAND RAPIDS, MI 49503	\$ <u>109.33</u>	\$ <u>215.29</u>

Page Subtotal **950.29** **950.29**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **1,452.91**

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2024155**
2. Committee Name **JORDOUN EATMAN ELECTION COMMITTEE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name LINKTREE Address 1-9 SACKVILLE ST AUSTRILA NOTE STATE COLLINGWOOD, AU 3066 ☐ Fund Raiser	Purpose: WEBHOSTING/SOCIAL MEDIA HOST ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/09/2026 Date	\$ 144.00
Expenditure #2 Name THEE CRAFTHER Address 1971 E BELTLINE AVE NE SUITE 106 BOX 402 GRAND RAPIDS, MI 49525 ☐ Fund Raiser	Purpose: T-SHIRTS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/18/2026 Date	\$ 156.00
Expenditure #3 Name ADVANCED CAMPAIGN TECHNOLOGIES Address 6280 TIMPSON AVE SE ALTO, MI 49302 ☐ Fund Raiser	Purpose: PURCHASE OF MAILERS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	\$ 2,769.84
Expenditure #4 Name ADVANCED CAMPAIGN TECHNOLOGIES Address 6280 TIMPSON AVE SE ALTO, MI 49302 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	\$ 530.00
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **3,599.84**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **3,599.84**

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 2024155
2. Committee Name JORDOUN EATMAN ELECTION COMMITTEE

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507	4. Type: <u>T-SHIRTS</u> 5. <u>Date Debt Was Incurred:</u> <u>06/18/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>156.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>156.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
Debt #2 Corp? ☐ Yes Owed to or by: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507	4. Type: <u>PALM CARDS</u> 5. <u>Date Debt Was Incurred:</u> <u>06/19/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>245.92</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>245.92</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				
Debt #3 Corp? ☐ Yes Owed to or by: JORDOUN EATMAN 2005 COLLEGE AVE SE GRAND RAPIDS, MI 49507	4. Type: <u>STICKERS</u> 5. <u>Date Debt Was Incurred:</u> <u>06/22/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>100.70</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>100.70</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ <u>0</u>				

Page Subtotal (Outstanding debt)

502.62

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

502.62

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

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