



FILED

21 OCT 2026 PM 02:38

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: 03/09/2026 to 10/18/2026

1. Committee I.D. Number

2026021

2. Committee Name

COMMITTEE TO ELECT ERIKA VANDYKE

4. Candidate Last Name

VANDYKE

First Name

ERIKA

M.I.

C

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

**PO BOX 1200
APT 3
GRAND RAPIDS, MI 49501**

Area Code and Phone (616) 648-6079
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

**LESLIE SCHOEN
4888 CEDAR RIDGE ST NE
GRAND RAPIDS, MI 49525**

Area Code & Phone (616) 485-9243

7. Treasurer's Business Address

**4888 CEDAR RIDGE ST NE
GRAND RAPIDS, MI 49525**

Area Code and Phone (616) 485-9243

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

11/03/2026

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

10/21/2026

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/21/2026



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2026021

2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>10,160.98</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>10,160.98</u>	(18.) \$ <u>10,160.98</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>383.65</u>	(19.) \$ <u>383.65</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>10,544.63</u>	(20.) \$ <u>10,544.63</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>552.75</u>	(21.) \$ <u>552.75</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>7,638.58</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>7,638.58</u>	(23.) \$ <u>7,638.58</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>10,544.63</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>10,544.63</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>7,638.58</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>2,906.05</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>04/09/2026</u>	
Name & Address: ELEANOR MORENO 612 OLYMPIA ST SW GRAND RAPIDS, MI 49503		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FOOD SYSTEMS INNOVATION DIRECTOR</u> Employer <u>HEART OF WEST MICHIGAN UNITED WAY</u> Business Address <u>118 COMMERCE AVE SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>04/09/2026</u>	
Name & Address: BRANDY ARNOLD 459 23RD ST APT 510 OAKLAND, CA 94612		\$ <u>257.78</u>	\$ <u>257.78</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ED TECH</u> Employer <u>WAYFINDER</u> Business Address <u>500 SW 116TH AVE, PORTLAND, OR 97225</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>04/09/2026</u>	
Name & Address: LESLIE SCHOEN 4888 CEDAR RIDGE DR NE GRAND RAPIDS, MI 49525		\$ <u>206.28</u>	\$ <u>206.28</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR OF OPERATIONS + COMMUNICATIONS</u> Employer <u>STEELCASE FOUNDATINO</u> Business Address <u>901 44TH ST SE, GRAND RAPIDS, MI 49508</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>04/11/2026</u>	
Name & Address: ADNORIS TORRES 932 ALPINE AVE NW GRAND RAPIDS, MI 49504		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>COREWELL HEALTH</u> Business Address <u>100 COREWELL DR NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **593.42**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>04/15/2026</u> Name & Address: <u>AUSTIN ASHLEY</u> <u>4225 11TH AVE NE</u> <u>APT 201</u> <u>SEATTLE, WA 98105</u>		\$ <u>10.61</u>	\$ <u>10.61</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NURSE</u> Employer <u>UNIVERSITY OF WASHINGTON</u> Business Address <u>1410 NE CAMPUS PKWY, SEATTLE, WA 98105</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/23/2026</u> Name & Address: <u>TRACIE COFFMAN</u> <u>4790 RAHN CT NE</u> <u>GRAND RAPIDS, MI 49525</u>		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM MANAGER</u> Employer <u>W.K. KELLOGG FOUNDATION</u> Business Address <u>1 MICHIGAN AVE E, BATTLE CREEK, MI 49017</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/25/2026</u> Name & Address: <u>MAURICIO ROSAS-ALVAREZ</u> <u>1301 N PRIEUR ST</u> <u>NEW ORLEANS, LA 70116</u>		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REGISTERED DIETITIAN</u> Employer <u>OSHSNER HEALTH</u> Business Address <u>1514 JEFFERSON HWY, JEFFERSON, LA 70121</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/25/2026</u> Name & Address: <u>KYLE METTA</u> <u>862 COLLEGE AVE</u> <u>HARRISONBURG, VA 22802</u>		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RESEARCH SCIENTIST</u> Employer <u>NOAA</u> Business Address <u>1315 EAST-WEST HWY, SILVER SPRING, MD 20910</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 217.51

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>04/25/2026</u> Name & Address: JENNIFER WELLED 639 EASTERN AVE NE GRAND RAPIDS, MI 49503		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PORTFOLIO MANAGER</u> Employer <u>GROW</u> Business Address <u>1333 ALGER ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/25/2026</u> Name & Address: SYED ALI 235 HAWTHORNE ST APT 5B BROOKLYN, NY 11225		\$ <u>10.61</u>	\$ <u>10.61</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STRATEGY DIRECTOR</u> Employer <u>TRINITY CHURCH NYC</u> Business Address <u>89 BROADWAY, NEW YORK, NY 10006</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/30/2026</u> Name & Address: DEBBIE VANDYKE 234 SHORE HAVEN DR SE GRAND RAPIDS, MI 49546		\$ <u>927.19</u>	\$ <u>927.19</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MOM</u> Employer <u>N/A</u> Business Address <u>234 SHORE HAVEN DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/05/2026</u> Name & Address: JASMINE CLEAR 4243 MEADOWLANE DR JACKSON, MS 39206		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT CONSULTANT</u> Employer <u>THE NOVA IMPACT, LLC</u> Business Address <u>135 BOUNDS ST, JACKSON, MS 39206</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

1,015.66

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/08/2026</u>	
Name & Address: KERI JAYNES 5489 W HEATHWOOD DR SE KENTWOOD, MI 49512		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRANTS MANAGER</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/12/2026</u>	
Name & Address: ROBERT HOVENKAMP 2415 RIDGELINE DR LANSING, MI 48912		\$ <u>20.91</u>	\$ <u>20.91</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ANALYST</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>PO BOX 30827, LANSING, MI 48909</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: AUDRA HARTGES-STERN 717 COLLINDALE AVE NW GRAND RAPIDS, MI 49504		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATIONS</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, 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>05/13/2026</u>	
Name & Address: JENINE TORRES 1488 GRIDLEY AVE NW GRAND RAPIDS, MI 49534		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 227.81

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: ANTHONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</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 #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: MAGGIE LAMAIN 4355 ST ANDREWS ST SE GRAND RAPIDS, MI 49546		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MOM</u> Employer <u>N/A</u> Business Address <u>4355 ST ANDREWS ST SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: SALVADOR LOPEZ 2733 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505		\$ <u>51.80</u>	\$ <u>147.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNITY LEADER</u> Employer <u>KCONNECT</u> Business Address <u>401 HALL ST SW, 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>05/13/2026</u>	
Name & Address: JESSICA MORENO 612 OLYMPIA ST SW GRAND RAPIDS, MI 49503		\$ <u>5.46</u>	\$ <u>5.46</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CLAIMS ADJUSTER</u> Employer <u>FARMERS INSURANCE</u> Business Address <u>6300 OLD 60TH ST, CALEDONIA, MI 49316</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 263.86

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: AMBER KILPATRICK 238 BRISTOL AVE NW GRAND RAPIDS, MI 49504		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>SELF-EMPLOYER</u> Business Address <u>238 BRISTOL AVE NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: ALEXIS JIMINEZ 1218 JOOSTEN ST SW WYOMING, MI 49509		\$ <u>5.46</u>	\$ <u>5.46</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT ADMINISTRATOR</u> Employer <u>HISPANIC CENTER OF WESTERN MICHIGAN</u> Business Address <u>1204 CESAR E. CHAVEZ AVE SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: JAVIER CERVANTES 3125 STRATFORD DR SW WYOMING, MI 49509		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>THE DIATRIBE INC.</u> Business Address <u>2040 DIVISION AVE S, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: SANTIAGO GAYTON 807 SPRING AVE NE GRAND RAPIDS, MI 49503		\$ <u>5.46</u>	\$ <u>5.46</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>STEEPLETOWN</u> Business Address <u>818 BUTTERWORTH ST SW, OFFICE 9, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **166.02**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/13/2026</u>	
Name & Address: JESSIE EMDIN-HILL 1439 TRAILSIDE CT NW GRAND RAPIDS, MI 49504		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNT MANAGER</u> Employer <u>BSWIFT</u> Business Address <u>3200 EAGLE PARK DR NE, SUITE 100, GRAND RAPIDS, MI 49525</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: TRUDY NGO-BROWN 7536 CASCADE RD SE GRAND RAPIDS, MI 49546		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>STEELCASE FOUNDATION</u> Business Address <u>901 44TH STREET SE, GRAND RAPIDS, MI 49508</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: CHRISTINE GILMAN 157 GUILD ST NE GRAND RAPIDS, MI 49505		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>DISPUTE RESOLUTION CENTER OF WEST MICHIGAN</u> Business Address <u>678 FRONT AVE NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: BRANDY ARNOLD 459 23RD ST APT 510 OAKLAND, CA 94612		\$ <u>257.78</u>	\$ <u>515.56</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ED TECH</u> Employer <u>WAYFINDER</u> Business Address <u>500 SW 116TH AVE, PORTLAND, OR 97225</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 619.17

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/13/2026</u>	
Name & Address: KYLE LIM 333 SUNSET AVE NW APT 1 GRAND RAPIDS, MI 49504		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>UNEMPLOYED</u> Employer <u>UNEMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: HANNAH VANDYKE 124 E 6TH ST APT 12 HOLLAND, MI 49423		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGNER</u> Employer <u>HACVB</u> Business Address <u>78 E 8TH ST, HOLLAND, MI 49423</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: AARIE J WADE 2231 FRANCIS AVE SE GRAND RAPIDS, MI 49507		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>BAXTER COMMUNITY CENTER</u> Business Address <u>935 BAXTER ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/14/2026</u>	
Name & Address: MEG DERRER 58 LUCE ST SW GRAND RAPIDS, MI 49534		\$ <u>77.55</u>	\$ <u>77.55</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>REFUGEE EDUCATION CENTER</u> Business Address <u>1534 KALAMAZOO AVE SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 310.21

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/14/2026</u> Name & Address: VERONICA QUINTINO-ARANDA 661 SILVER GLADE DR SE GRAND RAPIDS, MI 49548		\$ <u>38.41</u>	\$ <u>38.41</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>05/14/2026</u> Name & Address: STEPHANIE LIP 14500 SHERMAN CIR APT 306 LOS ANGELES, CA 91405		\$ <u>51.80</u>	\$ <u>51.80</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>05/14/2026</u> Name & Address: SAM PRZYBYLSKI 1107 ELIZABETH #3 DENVER, CO 80206		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>UNEMPLOYED</u> Employer <u>UNEMPLOYED</u> Business Address <u>1107 ELIZABETH, #3, DENVER, CO 80206</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/15/2026</u> Name & Address: ANNALISE KONTRAS 2145 COLLEGE AVE SE GRAND RAPIDS, MI 49507		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FOUNDER/PRINCIPAL CONSULTANT</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>2145 COLLEGE AVE SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 271.06

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/15/2026</u>	
Name & Address: ABIGAIL GROFF 2360 LAKE DR SE GRAND RAPIDS, MI 49506		\$ <u>76.52</u>	\$ <u>76.52</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>05/15/2026</u>	
Name & Address: JAMILA MARTIN 2643 HOLMES ST HAMTRAMCK, MI 48212		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STATE ADVISOR</u> Employer <u>MOVEMENT VOTER PROJECT</u> Business Address <u>37 BRIDGE STREET, BOX 749, NORTHHAMPTON, MA 01060</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/15/2026</u>	
Name & Address: JESSA CHALLA 7170 ARTISAN WOODS SE GRAND RAPIDS, MI 49546		\$ <u>77.55</u>	\$ <u>77.55</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATION STRATEGIST</u> Employer <u>URBAN CORE COLLECTIVE</u> Business Address <u>413 HALL ST SE, #1, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/15/2026</u>	
Name & Address: ALISA FLORES 1141 NIAGARA AVE SE GRAND RAPIDS, MI 49507		\$ <u>62.10</u>	\$ <u>62.10</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 **319.47**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/18/2026</u>	
Name & Address: SHEONA JOY NIDEFSKI 535 VALLEY AVE NW GRAND RAPIDS, MI 49504		\$ <u>51.80</u>	\$ <u>51.80</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>05/18/2026</u>	
Name & Address: CAROL PAINE MCGOVERN 2445 HALL ST SE EAST GRAND RAPIDS, MI 49506		\$ <u>103.30</u>	\$ <u>103.30</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>05/19/2026</u>	
Name & Address: JESSICA MORENO 612 OLYMPIA ST SW GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>43.87</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CLAIMS ADJUSTER</u> Employer <u>FARMERS INSURANCE</u> Business Address <u>6300 OLD 60TH ST, CALEDONIA, MI 49316</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/19/2026</u>	
Name & Address: KYM DAVIS 248 GARFIELD AVE SW GRAND RAPIDS, MI 49504		\$ <u>38.41</u>	\$ <u>38.41</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 231.92

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/19/2026</u> Name & Address: DEANNA ROLFFS-ELZINGA 431 PARIS AVE SE GRAND RAPIDS, MI 49503		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>L3 CATALYST GROUP</u> Business Address <u>431 PARIS AVE SE, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/20/2026</u> Name & Address: HANNAH VANDYKE 124 E 6TH ST APT 12 HOLLAND, MI 49423		\$ <u>38.41</u>	\$ <u>141.71</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGNER</u> Employer <u>HACVB</u> Business Address <u>77 E 8TH ST, HOLLAND, MI 49423</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/20/2026</u> Name & Address: TRACIE COFFMAN 4790 RAHN CT NE GRAND RAPIDS, MI 49525		\$ <u>38.41</u>	\$ <u>141.71</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM MANAGER</u> Employer <u>W.K. KELLOGG FOUNDATION</u> Business Address <u>1 MICHIGAN AVE, BATTLE CREEK, MI 49017</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/21/2026</u> Name & Address: DELIA FERNANDEZJONES 1148 SHELTER LN LANSING, MI 48912		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>MICHIGAN STATE UNIVERSITY</u> Business Address <u>426 AUDITORIUM RD, EAST LANSING, MI 48824</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 283.41

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/21/2026</u>	
Name & Address: JUWON HARRIS 17409 GREENLAWN ST DETROIT, MI 48221		\$ <u>114.62</u>	\$ <u>114.62</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PUBLIC HEALTH CONSULTANT</u> Employer <u>MPHI</u> Business Address <u>2436 WOODLAKE DR, #300, OKEMOS, MI 48864</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/23/2026</u>	
Name & Address: ROBERT HOVENKAMP 2415 RIDGELINE DR LANSING, MI 48912		\$ <u>31.20</u>	\$ <u>52.11</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ANALYST</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>PO BOX 30827, LANSING, MI 48909</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/23/2026</u>	
Name & Address: SHAY KRALEY 1340 COLORADO AVE SE GRAND RAPIDS, MI 49506		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OPERATIONS</u> Employer <u>KENT SCHOOL SERVICES NETWORK</u> Business Address <u>1633 E BELTLINE AVE NE, GRAND RAPIDS, MI 49525</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/23/2026</u>	
Name & Address: NICOLE NOTARIO-RISK 829 RUSSWOOD ST NE GRAND RAPIDS, MI 49505		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>GROUNDWORK COMMUNITY CONSULTING</u> Business Address <u>829 RUSSWOOD ST NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 300.92

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/23/2026</u>	
Name & Address: KATIE ADRIANSE 1076 CARRIER CREEK BLVD NE GRAND RAPIDS, MI 49503		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATIONS</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>350 OTTAWA AVE NW, 4TH FLOOR, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/24/2026</u>	
Name & Address: GLAYDS PICO GLEASON 2203 10 MILE RD NE COMSTOCK PARK, MI 49321		\$ <u>38.41</u>	\$ <u>38.41</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>05/26/2026</u>	
Name & Address: MERCEDES BARRAGAN 2415 ALMONT AVE SE GRAND RAPIDS, MI 49507		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HUMAN RESOURCES 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>05/26/2026</u>	
Name & Address: JOHN HELMHOLDT 743 COLLINDALE AVE NW GRAND RAPIDS, MI 49504		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PR</u> Employer <u>SEYFORTH PR</u> Business Address <u>40 MONROE CENTER ST NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **399.80**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/26/2026</u>	
Name & Address: BRITTANY PRICE 2664 MADISON AVE SE GRAND RAPIDS, MI 49507		\$ <u>38.41</u>	\$ <u>38.41</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>05/26/2026</u>	
Name & Address: CRIS KUTZLI 2894 FINGERS DR NE GRAND RAPIDS, MI 49525		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHILANTHROPY</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/26/2026</u>	
Name & Address: EMILY AMBS 1309 ALEXANDER ST SE GRAND RAPIDS, MI 49506		\$ <u>77.55</u>	\$ <u>77.55</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/27/2026</u>	
Name & Address: ALISSA LANE 1034 DAYTON ST SW GRAND RAPIDS, MI 49504		\$ <u>26.06</u>	\$ <u>26.06</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 296.81

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/27/2026</u>	
Name & Address: KATHRYN CLEMENTS 3455 JOSEPHINE LN MASON, MI 48854		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACADEMIA</u> Employer <u>MICHIGAN STATE UNIVERSITY</u> Business Address <u>426 AUDITORIUM RD, EAST LANSING, MI 48824</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/27/2026</u>	
Name & Address: CHRISTY CARLIN KNETSCH 1414 SIGSBEE ST SE GRAND RAPIDS, MI 49506		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHILANTHROPY</u> Employer <u>REDLUM FAMILY FOUNDATION</u> Business Address <u>201 W WASHINGTON AVE, ZEELAND, MI 49464</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/27/2026</u>	
Name & Address: ANNE HERTL 1318 ASHLAND AVE NE GRAND RAPIDS, MI 49505		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>MEJC</u> Business Address <u>1401 W FORT ST, DETROIT, MI 48233</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/27/2026</u>	
Name & Address: JOHANA RODRIGUEZ 2507 BLAINE AVE SE GRAND RAPIDS, MI 49507		\$ <u>77.55</u>	\$ <u>77.55</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 **387.44**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/27/2026</u>	
Name & Address: EVELYN ESPARZA 4496 BROOKMEADOW DR SE KENTWOOD, MI 49512		\$ <u>76.52</u>	\$ <u>76.52</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>05/28/2026</u>	
Name & Address: JENNIFER LAWLOR 3578 STAGECOACH DR OKEMOS, MI 48864		\$ <u>38.41</u>	\$ <u>38.41</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>05/28/2026</u>	
Name & Address: GIULIANA ESTRADA 701 52ND ST SE GRAND RAPIDS, MI 49548		\$ <u>115.65</u>	\$ <u>115.65</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHILANTHROPY</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, 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>05/28/2026</u>	
Name & Address: LUCINDA JOSWICK 428 ELLIOTT ST SE GRAND RAPIDS, MI 49507		\$ <u>81.67</u>	\$ <u>81.67</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 **312.25**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/28/2026</u> Name & Address: LAUREN ENOS 150 DALE ST NE GRAND RAPIDS, MI 49505		\$ <u>76.52</u>	\$ <u>76.52</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>05/28/2026</u> Name & Address: ABIGAL BRUINS 1141 BATES ST SE GRAND RAPIDS, MI 49506		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>IMPROVEMENT SPECIALIST</u> Employer <u>COREWELL HEALTH</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/2026</u> Name & Address: ZENaida JIMINEZ 315 COMMERCE AVE SW APT 102 GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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>05/28/2026</u> Name & Address: ALEXIS JIMINEZ 1218 JOOSTEN ST SW WYOMING, MI 49509		\$ <u>38.41</u>	\$ <u>43.87</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT ADMINISTRATOR</u> Employer <u>HISPANIC CENTER OF WESTERN MICHIGAN</u> Business Address <u>1204 CESAR E. CHAVEZ AVE SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **179.40**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/28/2026</u>	
Name & Address: SERGIO CIRA REYES 857 FULLER AVE SE GRAND RAPIDS, MI 49506		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>URBAN CORE COLLECTIVE</u> Business Address <u>413 HALL ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/28/2026</u>	
Name & Address: RODNEY ALLEN 145 48TH ST SE GRAND RAPIDS, MI 49548		\$ <u>38.41</u>	\$ <u>38.41</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>05/28/2026</u>	
Name & Address: RAVEN ODOM 2592 RIDGECROFT DR SE GRAND RAPIDS, MI 49546		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>URBAN CORE COLLECTIVE</u> Business Address <u>413 HALL ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/28/2026</u>	
Name & Address: ANNALISE KONTRAS 2145 COLLEGE AVE SE GRAND RAPIDS, MI 49507		\$ <u>38.41</u>	\$ <u>64.47</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FOUNDER/PRINCIPAL CONSULTANT</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>2145 COLLEGE AVE SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 231.92

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/28/2026</u> Name & Address: GEMA LOWE 669 3RD ST NW GRAND RAPIDS, MI 49504		\$ <u>38.41</u>	\$ <u>38.41</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>05/28/2026</u> Name & Address: VICTORIA ARANGURE 101 LEXINGTON AVE SW GRAND RAPIDS, MI 49504		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u> Name & Address: JESSIE EMDIN-HILL 1439 TRAILSIDE CT NW GRAND RAPIDS, MI 49504		\$ <u>76.52</u>	\$ <u>231.31</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNT MANAGER</u> Employer <u>BSWIFT</u> Business Address <u>3200 EAGLE PARK DR NE, SUITE 100, GRAND RAPIDS, MI 49525</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/2026</u> Name & Address: AMANDA VILLA 2759 20 MILE RD KENT CITY, MI 49330		\$ <u>38.41</u>	\$ <u>38.41</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 191.75

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: STEPHANIE SUERO 1959 PARIS AVE SE GRAND RAPIDS, MI 49507		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: JOE JONES 2528 ORCHARD VIEW DR NE GRAND RAPIDS, MI 49505		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PASTOR</u> Employer <u>BROWN HUTCHERSON MINISTRIES</u> Business Address <u>618 JEFFERSON AVE SE, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/29/2026</u>	
Name & Address: SANTIAGO GAYTON 807 SPRING AVE NE GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>43.87</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COO</u> Employer <u>STEEPLETOWN</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/29/2026</u>	
Name & Address: JESSE KACZMARCZYK 2142 DUIKER AVE NE GRAND RAPIDS, MI 49505		\$ <u>38.41</u>	\$ <u>38.41</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 270.02

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: BERNIZ TERPSTRA 1330 BENJAMIN AVE SE GRAND RAPIDS, MI 49506		\$ <u>77.55</u>	\$ <u>77.55</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>ICCF COMMUNITY HOMES</u> Business Address <u>415 M.L.K. JR ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/29/2026</u>	
Name & Address: GUSTAVO PEREZ 3121 RICKMAN AVE NE GRAND RAPIDS, MI 49505		\$ <u>26.06</u>	\$ <u>26.06</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>05/29/2026</u>	
Name & Address: DOUG BOOTH 407 LEONARD ST NE GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: ANISSA EDDIE 1235 PROSPECT AVE SE GRAND RAPIDS, MI 49507		\$ <u>38.41</u>	\$ <u>38.41</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT</u> Employer <u>STEELCASE FOUNDATION</u> Business Address <u>901 44TH ST SE, GRAND RAPIDS, MI 49508</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **180.43**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: JOSHUA LEFFINGWELL 1034 DAYTON ST SW GRAND RAPIDS, MI 49504		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GRAPHIC DESIGN</u> Employer <u>WELL DESIGN STUDIO</u> Business Address <u>605 LIVINGSTON AVE NE, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/29/2026</u>	
Name & Address: KATHERINE FORCE 558 LANE AVE NW GRAND RAPIDS, MI 49504		\$ <u>76.52</u>	\$ <u>76.52</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>05/29/2026</u>	
Name & Address: DANIEL RIVERA 4285 ABBY LN SW WYOMING, MI 49418		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: ISMALIS NUNEZ 1038 BENJAMIN AVE SE GRAND RAPIDS, MI 49506		\$ <u>76.52</u>	\$ <u>76.52</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 346.24

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: COLLIN HELAK 212 CESAR E. CHAVEZ AVE SW GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: ABIGAIL SIGUENZA-ZOLETA 2834 WEST AVE SW WYOMING, MI 49519		\$ <u>76.52</u>	\$ <u>76.52</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>05/29/2026</u>	
Name & Address: NANCY MORALES 1805 BERKLEY AVE SW WYOMING, MI 49509		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: JONNATHAN RESENDIZ 1429 HAZEN ST SE GRAND RAPIDS, MI 49507		\$ <u>76.52</u>	\$ <u>76.52</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 229.86

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: RACHEL MCKAY 251 WARREN AVE SE GRAND RAPIDS, MI 49506		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: JOSE JIMINEZ 1034 ABERDEEN ST NE GRAND RAPIDS, MI 49505		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: LAUREN CONRAD 650 SHERMAN ST SE GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: DANIELLE DEMUTH 1034 INNES ST NE GRAND RAPIDS, MI 49503		\$ <u>77.55</u>	\$ <u>77.55</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 192.78

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/29/2026</u>	
Name & Address: AYANA WEEKLEY 940 MAYBELLE ST NE GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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>05/29/2026</u>	
Name & Address: CAROLA CARASSA 1009 WASHTENAW DR NE GRAND RAPIDS, MI 49505		\$ <u>38.41</u>	\$ <u>38.41</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>05/30/2026</u>	
Name & Address: MEGHAN AUPPERLEE 448 GIDDINGS AVE SE GRAND RAPIDS, MI 49506		\$ <u>38.41</u>	\$ <u>38.41</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>05/30/2026</u>	
Name & Address: JANAY BROWER 1436 WILCOX PARK DR SE GRAND RAPIDS, MI 49506		\$ <u>38.41</u>	\$ <u>38.41</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 **153.64**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/30/2026</u>	
Name & Address: EMILY ALEMAN 706 UNION AVE SE GRAND RAPIDS, MI 49503		\$ <u>76.52</u>	\$ <u>76.52</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>05/30/2026</u>	
Name & Address: GERARDO AGUILAR 216 WESLEY ST SE GRAND RAPIDS, MI 49548		\$ <u>38.41</u>	\$ <u>38.41</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>05/30/2026</u>	
Name & Address: STEFFANIE ROSALEZ 2142 DUIKER AVE NE GRAND RAPIDS, MI 49505		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>GRANDVILLE AVENUE ARTS & HUMANITIES</u> Business Address <u>644 CESAR E. CHAVEZ AVE SW, 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>05/30/2026</u>	
Name & Address: ACE MARASIGAN 3659 FULLER AVE NE GRAND RAPIDS, MI 49525		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>ADOBO BOY</u> Business Address <u>3392 PLAINFIELD AVE NE, GRAND RAPIDS, MI 49525</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 373.02

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>05/30/2026</u>	
Name & Address: ERICA CURRY VANE 600 BROADWAY AVE NW #224 GRAND RAPIDS, MI 49504		\$ <u>103.20</u>	\$ <u>103.20</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>URBAN CURRY CONSULTING</u> Business Address <u>600 BROADWAY AVE NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/01/2026</u>	
Name & Address: CHASITY BAILEY-FAKHOURY 1269 HATCH RD OKEMOS, MI 48864		\$ <u>77.55</u>	\$ <u>77.55</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/02/2026</u>	
Name & Address: TESSA KWANT 1410 BYRON ST SE GRAND RAPIDS, MI 49506		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNITY GRANTS SPECIALIST</u> Employer <u>COREWELL HEALTH</u> Business Address <u>100 COREWELL DR NW, 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>06/02/2026</u>	
Name & Address: IVAN DIAZ 926 UNDERHILL AVE SW GRAND RAPIDS, MI 49503		\$ <u>38.41</u>	\$ <u>38.41</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 270.96

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>06/02/2026</u> Name & Address: LUIS PEREZ 2 FULTON ST W GRAND RAPIDS, MI 49503		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TECHNOLOGY</u> Employer <u>CODE ON WHEELS</u> Business Address <u>2 FULTON ST W, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/03/2026</u> Name & Address: KURT REPPART 1232 PARK ST SW GRAND RAPIDS, MI 49504		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>PROPONENTS LLC</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/03/2026</u> Name & Address: ERICKA LOZANO-BUHL 2424 LAKE DR SE GRAND RAPIDS, MI 49506		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>MIXTO COMMUNICATIONS</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/23/2026</u> Name & Address: CATHERINE SCHMID 1901 LAKE DR SE GRAND RAPIDS, MI 49506		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATOR</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 258.70

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
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: CARLOS SANCHEZ 1730 RIDGEMOOR DR SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR - CASA LATINA</u> Employer <u>DAVENPORT UNIVERSITY</u> Business Address <u>6191 KRAFT AVE SE, GRAND RAPIDS, MI 49512</u> 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: JUDY SWANN 9548 LEVI DR CLARKSVILLE, MI 48815		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF-EMPLOYED</u> Employer <u>SELF</u> Business Address <u>9548 LEVI DR, CLARKSVILLE, MI 48815</u> 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: CICILEY MOORE 2210 EDGEWOOD AVE SE GRAND RAPIDS, MI 49546		\$ <u>154.79</u>	\$ <u>154.79</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>W.K. KELLOGG FOUNDATION</u> Business Address <u>1 MICHIGAN AVE, BATTLE CREEK, MI 49017</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/28/2026</u>	
Name & Address: LUCINDA JOSWICK 428 ELLIOTT ST SE GRAND RAPIDS, MI 49507		\$ <u>5.46</u>	\$ <u>87.13</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>CAMP BLODGETT</u> Business Address <u>10451 LAKESHORE AVE, WEST OLIVE, MI 49460</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **363.55**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>07/03/2026</u>	
Name & Address: JAMETTA LILLY 19600 CANTERBURY RD DETROIT, MI 48221		\$ <u>103.30</u>	\$ <u>103.30</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>DETROIT PARENT NETWORK</u> Business Address <u>726 LONTHROP ST., DETROIT, DETROIT, MI 48202</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/03/2026</u>	
Name & Address: SARAH SAK-SMITH 1346 DERBY DR NW GRAND RAPIDS, MI 49504		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL WORKER</u> Employer <u>GRACE'S TABLE</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/14/2026</u>	
Name & Address: SHEONA JOY NIDEFSKI 535 VALLEY AVE NW GRAND RAPIDS, MI 49504		\$ <u>26.06</u>	\$ <u>77.86</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM ASSISTANT</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES 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>07/14/2026</u>	
Name & Address: SHEONA JOY NIDEFSKI 535 VALLEY AVE NW GRAND RAPIDS, MI 49504		\$ <u>26.06</u>	\$ <u>103.92</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM ASSISTANT</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **181.48**

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 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>07/14/2026</u> Name & Address: KELLY MOORE 1013 WEBSTER ST NW GRAND RAPIDS, MI 49504		\$ <u>36.35</u>	\$ <u>36.35</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>IT</u> Employer <u>FORTINET</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/16/2026</u> Name & Address: SALVADOR LOPEZ 2733 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505		\$ <u>118.74</u>	\$ <u>266.54</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNITY LEADER</u> Employer <u>KCONNECT</u> Business Address <u>401 HALL ST SW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/16/2026</u> Name & Address: HANNAH WERTH 2490 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNITY EDUCATOR</u> Employer <u>REFUGEE EDUCATION CENTER</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/16/2026</u> Name & Address: ADNORIS TORRES 932 ALPINE AVE NW GRAND RAPIDS, MI 49504		\$ <u>10.61</u>	\$ <u>113.91</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>COREWELL HEALTH</u> Business Address <u>100 COREWELL DR NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **191.76**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>07/20/2026</u> Name & Address: AUGUST CROWLEY 7365 22ND AVE JENISON, MI 49428		\$ <u>36.32</u>	\$ <u>36.32</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>07/21/2026</u> Name & Address: EVANGELIA ANDREWS 333 CALKINS AVE SE GRAND RAPIDS, MI 49506		\$ <u>10.61</u>	\$ <u>10.61</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>07/21/2026</u> Name & Address: ANGELA REYNA PEREZ 3628 CHAMBERLAIN AVE SE GRAND RAPIDS, MI 49508		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM OFFICER</u> Employer <u>GRAND RAPIDS COMMUNITY FOUNDATION</u> Business Address <u>185 OAKES ST SW, 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>07/23/2026</u> Name & Address: LEYLA FLORES MORALES 2739 OAKWOOD AVE NE GRAND RAPIDS, MI 49505		\$ <u>51.80</u>	\$ <u>51.80</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 **124.79**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>07/24/2026</u> Name & Address: JOHANA RODRIGUEZ 2507 BLAINE AVE SE GRAND RAPIDS, MI 49507		\$ <u>20.91</u>	\$ <u>98.46</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>07/27/2026</u> Name & Address: ENID GADDIS 7512 CRYSTAL VIEW DR SE CALEDONIA, MI 49316		\$ <u>26.06</u>	\$ <u>26.06</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>07/28/2026</u> Name & Address: LUCINDA JOSWICK 428 ELLIOTT ST SE GRAND RAPIDS, MI 49507		\$ <u>5.46</u>	\$ <u>92.59</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>CAMP BLODGETT</u> Business Address <u>10451 LAKESHORE AVE, WEST OLIVE, MI 49460</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/31/2026</u> Name & Address: MARLENE KOWALSKI-BRAUN 7960 JONATHAN WOODS NE ADA, MI 49301		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATION</u> Employer <u>GVSU</u> Business Address <u>1 CAMPUS DR, ALLENDALE, MI 49401</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 78.49

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>08/06/2026</u>	
Name & Address: BETSAIDA VALDIVIA 715 DELAWARE ST SE GRAND RAPIDS, MI 49507		\$ <u>15.76</u>	\$ <u>15.76</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>YOUTH ORGANIZER</u> Employer <u>URBAN CORE COLLECTIVE</u> Business Address <u>413 HALL ST SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/28/2026</u>	
Name & Address: LUCINDA JOSWICK 428 ELLIOTT ST SE GRAND RAPIDS, MI 49507		\$ <u>5.46</u>	\$ <u>98.05</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>CAMP BLODGETT</u> Business Address <u>10451 LAKESHORE AVE, WEST OLIVE, MI 49460</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/13/2026</u>	
Name & Address: MEGAN LORENZ 2415 RAYMOND AVE SE GRAND RAPIDS, MI 49507		\$ <u>51.80</u>	\$ <u>51.80</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>2415 RAYMOND AVE SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/24/2026</u>	
Name & Address: SHANNON CAMPBELL 1691 GLENVALE CT SW WYOMING, MI 49519		\$ <u>20.91</u>	\$ <u>20.91</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL WORKER</u> Employer <u>GRAND RAPIDS PUBLIC SCHOOLS</u> Business Address <u>1331 M.L.K. JR ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **93.93**

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

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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>09/28/2026</u> Name & Address: LUCINDA JOSWICK 428 ELLIOTT ST SE GRAND RAPIDS, MI 49507		\$ <u>5.46</u>	\$ <u>103.51</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>CAMP BLODGETT</u> Business Address <u>10451 LAKESHORE AVE, WEST OLIVE, MI 49460</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/01/2026</u> Name & Address: AMY SCHICKEL 1240 FULLER AVE SE GRAND RAPIDS, MI 49506		\$ <u>26.06</u>	\$ <u>26.06</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TEACHER</u> Employer <u>GRAND RAPIDS PUBLIC SCHOOLS</u> Business Address <u>1331 M.L.K. JR ST 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 _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
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		Click Here for Memo Itemization	

Page Subtotal **31.52**

Grand Total of All Schedules 1A
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10,160.98

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line 3a of Summary
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**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1**

CANDIDATE COMMITTEE

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: SQUARE 1955 BROADWAY SUITE 600 OAKLAND, CA 94612	Date of Receipt <u>06/03/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☒ Other (Specify) <u>REVENUE FROM FUNDRAISE</u>	\$ <u>85.99</u>
Receipt #2 Name & Address: SQUARE 1955 BROADWAY SUITE 600 OAKLAND, CA 94612	Date of Receipt <u>06/03/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☒ Other (Specify) <u>REVENUE FROM FUNDRAISE</u>	\$ <u>145.94</u>
Receipt #3 Name & Address: LMCU PO BOX 2848 GRAND RAPIDS, MI 49501	Date of Receipt <u>06/30/2026</u>	☐ Loan from a Lending Institution ☒ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ <u>0.35</u>
Receipt #4 Name & Address: MISTATE OF MI LIQUOR LICENSE 7109 W SAGINAW HWY LANSING, MI 48917	Date of Receipt <u>07/02/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>50.00</u>
Receipt #5 Name & Address: AMAZON.COM 325 9TH AVE N SEATTLE, WA 98109	Date of Receipt <u>07/02/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>22.25</u>
Receipt #6 Name & Address: AMAZON.COM 325 9TH AVE N SEATTLE, WA 98109	Date of Receipt <u>07/02/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>9.53</u>
Receipt #7 Name & Address: AMAZON.COM 325 9TH AVE N SEATTLE, WA 98109	Date of Receipt <u>07/02/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>15.83</u>

Page Subtotal **329.89**

Grand Total of All Schedules 1A -1
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**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1**

CANDIDATE COMMITTEE

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: AMAZON.COM 325 9TH AVE N SEATTLE, WA 98109	Date of Receipt <u>08/05/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>13.77</u>
☒ Fund Raiser			
Receipt #2 Name & Address: AMAZON.COM 325 9TH AVE N SEATTLE, WA 98109	Date of Receipt <u>08/05/2026</u>	☐ Loan from a Lending Institution ☐ Interest ☒ Refund \Rebate ☐ Other (Specify) _____	\$ <u>39.54</u>
☒ Fund Raiser			
Receipt #3 Name & Address: LMCU PO BOX 2848 GRAND RAPIDS, MI 49501	Date of Receipt <u>09/30/2026</u>	☐ Loan from a Lending Institution ☒ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ <u>0.45</u>
☒ Fund Raiser			
Receipt #4 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
☐ Fund Raiser			
Receipt #5 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
☐ Fund Raiser			
Receipt #6 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
☐ Fund Raiser			
Receipt #7 Name & Address:	Date of Receipt _____	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	\$ _____ Click for Memo Itemization Type
☐ Fund Raiser			
Page Subtotal			53.76
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			383.65

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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2026021

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Business Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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>PO BOX - 3 MONTHS</u> 5. Date Of Receipt: <u>03/09/2026</u> 6. Vendor Name & Address: USPS 1451 LAKE DR SE, GRAND RAPIDS, MI 49506	\$ <u>63.00</u>	\$ <u>63.00</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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 TRAINING</u> 5. Date Of Receipt: <u>03/09/2026</u> 6. Vendor Name & Address: GREAT LAKES POLITICAL ACADEMY TRAINING 7444 DEXTER ANN ARBOR RD, DEXTER, MI 48130	\$ <u>25.00</u>	\$ <u>88.00</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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>INITIAL DEPOSIT - BANK ACCOUNT</u> 5. Date Of Receipt: <u>03/20/2026</u> 6. Vendor Name & Address: LMCU 342 MICHIGAN ST NE, GRAND RAPIDS, MI 49503	\$ <u>5.00</u>	\$ <u>93.00</u>

Page Subtotal

93.00

0.00

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2026021

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: SALVADOR LOPEZ 2733 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: COMMUNITY LEADER Employer Name & Business Address: KCONNECT 401 HALL ST SW, 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 WEBSITE</u> 5. Date Of Receipt: <u>03/29/2026</u> 6. Vendor Name & Address: WORDPRESS 60 29TH ST, #343, SF, CA 94110	\$ 96.00	\$ 96.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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 MARKETING MATERIALS</u> 5. Date Of Receipt: <u>03/31/2026</u> 6. Vendor Name & Address: FEDEX 233 FULTON ST E, GRAND RAPIDS, MI 49503	\$ 41.11	\$ 134.11
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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 MATERIALS - STICKERS</u> 5. Date Of Receipt: <u>04/06/2026</u> 6. Vendor Name & Address: FEDEX 233 FULTON ST E, GRAND RAPIDS, MI 49503	\$ 32.43	\$ 166.54

Page Subtotal **169.54** **96.00**

Grand Total of all Schedules 1-IK
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2026021

CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 If over \$100.00 cumulative, please provide: Occupation: NONPROFIT Employer Name & Business Address: STEELCASE FOUNDATION 901 44TH ST SE, GRAND RAPIDS, MI 49508 ☐ 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 MATERIALS - SAVE THE DATE</u> 5. Date Of Receipt: <u>04/07/2026</u> 6. Vendor Name & Address: FEDEX 233 FULTON ST E, GRAND RAPIDS, MI 49503	\$ <u>21.51</u>	\$ <u>188.05</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: DEBBIE VANDYKE 234 SHORE HAVEN DR SE GRAND RAPIDS, MI 49546 If over \$100.00 cumulative, please provide: Occupation: MOM Employer Name & Address: MOM 234 SHORE HAVEN DR SE, GRAND RAPIDS, MI 49546 ☒ 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>GAMESHOW SUPPLIES</u> 5. Date Of Receipt: <u>07/07/2026</u> 6. Vendor Name & Address: COSTCO 5100 28TH ST SE, GRAND RAPIDS, MI 49512	\$ <u>268.70</u>	\$ <u>1,195.89</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: 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 _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal **290.21** **1,383.94**

Grand Total of all Schedules 1-IK
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/08/2026</u> Date	\$ <u>1.06</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/09/2026</u> Date	\$ <u>7.78</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/09/2026</u> Date	\$ <u>6.28</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/2026</u> Date	\$ <u>3.30</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/15/2026</u> Date	\$ <u>0.61</u>

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19.03

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/22/2026</u> Date	\$ <u>3.30</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/24/2026</u> Date	\$ <u>1.80</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/24/2026</u> Date	\$ <u>1.80</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/25/2026</u> Date	\$ <u>1.80</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/25/2026</u> Date	\$ <u>0.61</u>

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9.31

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/29/2026</u> Date	\$ <u>27.19</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/04/2026</u> Date	\$ <u>1.06</u>
Expenditure #3 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☒ Fund Raiser	Purpose: <u>LAUNCH MATERIALS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/06/2026</u> Date	\$ <u>59.34</u>
Expenditure #4 Name FAMILY DOLLAR Address 55 LEONARD ST NW GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>TABLING SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/08/2026</u> Date	\$ <u>8.48</u>
Expenditure #5 Name DOLLAR TREE Address 1621 LEONARD ST NE GRAND RAPIDS, MI 49505 ☐ Fund Raiser	Purpose: <u>TABLING SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/08/2026</u> Date	\$ <u>48.76</u>

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144.83

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MI LATINO NEWS Address 6301 MICHIGAN AVE DETROIT, MI 48210 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/08/2026 Date	\$ 325.00
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/08/2026 Date	\$ 1.80
Expenditure #3 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: LAUNCH PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/09/2026 Date	\$ 298.56
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/12/2026 Date	\$ 0.91
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/13/2026 Date	\$ 3.30

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629.57

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>1.80</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>0.46</u>

Subtotal this page

10.66

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>0.46</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>0.46</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>4.79</u>

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10.81

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>7.78</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>3.30</u>

Subtotal this page

20.98

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/2026</u> Date	\$ <u>1.06</u>
Expenditure #2 Name CITY BUILT BREWING Address 820 MONROE AVE NW GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>CAMPAIGN LAUNCH FOOD</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>620.58</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>2.55</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>1.80</u>

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627.40

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>4.79</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/2026</u> Date	\$ <u>1.06</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/15/2026</u> Date	\$ <u>2.52</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/15/2026</u> Date	\$ <u>3.30</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/15/2026</u> Date	\$ <u>2.55</u>

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14.22

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/15/2026</u> Date	\$ <u>2.10</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/18/2026</u> Date	\$ <u>1.80</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/18/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/18/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2026</u> Date	\$ <u>1.41</u>

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10.02

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2026</u> Date	\$ <u>4.79</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>4.77</u>
Expenditure #4 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>4.95</u>
Expenditure #5 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>1.35</u>

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17.27

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>9.96</u>
Expenditure #2 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>2.11</u>
Expenditure #3 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>GAME SHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>29.67</u>
Expenditure #4 Name MISTATE OF MI LIQUOR LICENSE Address 7109 W SAGINAW HWY LANSING, MI 48917 ☒ Fund Raiser	Purpose: <u>GAMESHOW FUNDRAISER</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>50.00</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>1.41</u>

Subtotal this page **93.15**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name USPS Address 1451 LAKE DR SE GRAND RAPIDS, MI 49506 ☒ Fund Raiser	Purpose: <u>EXPEDITED SHIPPING FOR LIQUOR LICENSE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/20/2026</u> Date	\$ <u>35.90</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/21/2026</u> Date	\$ <u>3.62</u>
Expenditure #4 Name MISTATE OF MI LIQUOR LICENSE Address 7109 W SAGINAW HWY LANSING, MI 48917 ☒ Fund Raiser	Purpose: <u>GAMESHOW FUNDRAISER</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/21/2026</u> Date	\$ <u>50.00</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/2026</u> Date	\$ <u>1.20</u>

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92.52

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/2026</u> Date	\$ <u>3.30</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/23/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2026</u> Date	\$ <u>31.43</u>
Expenditure #5 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2026</u> Date	\$ <u>33.90</u>

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73.73

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name NOTHING BUNDT CAKES Address 5121 28TH ST SE GRAND RAPIDS, MI 49512 ☒ Fund Raiser	Purpose: <u>PRIZE FOR GAMESHOW</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/24/2026</u> Date	\$ <u>34.48</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>4.79</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>1.41</u>

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45.39

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>4.79</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>2.55</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>1.06</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>4.79</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>1.80</u>

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14.99

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>3.30</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/26/2026</u> Date	\$ <u>2.55</u>
Expenditure #3 Name MARKEL PERSONAL LINES Address PO BOX 906 PEWAUKEE, WI 53072 ☒ Fund Raiser	Purpose: <u>GAMESHOW LIABILITY INSURANCE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/2026</u> Date	\$ <u>263.00</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/2026</u> Date	\$ <u>2.52</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/2026</u> Date	\$ <u>1.41</u>

Subtotal this page **272.78**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/2026</u> Date	\$ <u>3.65</u>
Expenditure #2 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAMESHOW PRINTING + SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>116.17</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>2.67</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>2.52</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.06</u>

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126.07

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>3.30</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.80</u>

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9.33

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/28/2026</u> Date	\$ <u>1.41</u>
Expenditure #4 Name MEIJER Address 1997 E BELTLINE AVE NE GRAND RAPIDS, MI 49525 ☒ Fund Raiser	Purpose: <u>GAMESHOW FOOD + DRINKS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>308.47</u>
Expenditure #5 Name FAMILY DOLLAR Address 55 LEONARD ST NW GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>11.87</u>

Subtotal this page

324.57

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>4.79</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>

Subtotal this page

11.54

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.55</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.06</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Subtotal this page			7.84
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>4.79</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>

Subtotal this page

12.65

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>

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9.27

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.55</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>

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8.19

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>2.52</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>1.41</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>3.30</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/29/2026</u> Date	\$ <u>4.79</u>

Subtotal this page

13.43

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FOREST HILLS FOODS Address 4668 CASCADE RD SE GRAND RAPIDS, MI 49546 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/30/2026</u> Date	\$ <u>32.94</u>
Expenditure #2 Name CIRCLE K Address 514 MICHIGAN ST NE GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/30/2026</u> Date	\$ <u>12.58</u>
Expenditure #3 Name BRIDGE STREET MARKET Address 405 SEWARD AVE NW GRAND RAPIDS, MI 49504 ☒ Fund Raiser	Purpose: <u>GAMESHOW SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/30/2026</u> Date	\$ <u>22.23</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/30/2026</u> Date	\$ <u>3.20</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2026</u> Date	\$ <u>2.55</u>

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Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/02/2026</u> Date	\$ <u>1.41</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/02/2026</u> Date	\$ <u>1.80</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/03/2026</u> Date	\$ <u>1.80</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/03/2026</u> Date	\$ <u>1.80</u>

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8.61

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☐ Fund Raiser	Purpose: <u>TABLING SUPPLIES - PRIDE, BUTTON MAKER, BALLOONS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/05/2026</u> Date	\$ <u>197.96</u>
Expenditure #2 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☐ Fund Raiser	Purpose: <u>TABLING SUPPLIES</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/11/2026</u> Date	\$ <u>27.53</u>
Expenditure #3 Name STEELCASE FOUNDATION Address 901 44TH ST SE GRAND RAPIDS, MI 49508 ☐ Fund Raiser	Purpose: <u>USED WRONG CC, REIMBURSEMENT</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/12/2026</u> Date	\$ <u>36.56</u>
Expenditure #4 Name CITY OF GRAND RAPIDS CLERK'S OFFICE Address 300 MONROE AVE NW GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>FILING FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/16/2026</u> Date	\$ <u>100.00</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/2026</u> Date	\$ <u>3.30</u>

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365.35

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name DENISEDOMIN Address 1728 WILLIS AVE NW GRAND RAPIDS, MI 49504 ☐ Fund Raiser	Purpose: TSHIRTS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/24/2026 Date	\$ 333.90
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/27/2026 Date	\$ 3.30
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/27/2026 Date	\$ 4.79
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/28/2026 Date	\$ 0.46
Expenditure #5 Name MI LATINO NEWS Address 6301 MICHIGAN AVE DETROIT, MI 48210 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/01/2026 Date	\$ 650.00

Subtotal this page **992.45**

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name AMAZON.COM Address 325 9TH AVE N SEATTLE, WA 98109 ☐ Fund Raiser	Purpose: TABLING SUPPLIES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2026 Date	\$ 32.84
Expenditure #2 Name GORDON FOOD SERVICE Address 1003 MICHIGAN ST NE GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: PARADE CANDY ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2026 Date	\$ 28.04
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2026 Date	\$ 3.30
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2026 Date	\$ 1.06
Expenditure #5 Name DEBBIE VANDYKE Address 234 SHORE HAVEN DR SE GRAND RAPIDS, MI 49546 ☒ Fund Raiser	Purpose: REIMBURSEMENT FOR IN-KIND CONTRIBUTION ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/07/2026 Date	\$ 268.70

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333.94

Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/14/2026 Date	\$ 118.71
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/14/2026 Date	\$ 1.06
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/14/2026 Date	\$ 1.06
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/14/2026 Date	\$ 1.35
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/15/2026 Date	\$ 3.74

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Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	\$ 1.06
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	\$ 0.61
Expenditure #3 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/20/2026 Date	\$ 76.30
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/20/2026 Date	\$ 1.32
Expenditure #5 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/21/2026 Date	\$ 92.85

Subtotal this page

172.14

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 **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/2026</u> Date	\$ <u>0.61</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/2026</u> Date	\$ <u>1.06</u>
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/23/2026</u> Date	\$ <u>1.80</u>
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/2026</u> Date	\$ <u>0.91</u>
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/2026</u> Date	\$ <u>1.06</u>

Subtotal this page

5.44

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 **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CITY BUILT BREWING Address 820 MONROE AVE NW GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: DOMINOS TAB ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/27/2026 Date	\$ 76.68
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/28/2026 Date	\$ 0.46
Expenditure #3 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/31/2026 Date	\$ 1.06
Expenditure #4 Name ESTUDIOIVY Address 1034 ABERDEEN ST NE GRAND RAPIDS, MI 49505 ☐ Fund Raiser	Purpose: HEADSHOTS AND EVENT PHOTOGRAPHY ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/04/2026 Date	\$ 1,000.00
Expenditure #5 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/06/2026 Date	\$ 0.76

Subtotal this page

1,078.96

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

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ODETTE LOPEZ Address 13011 BLUEBERRY LN HOLLAND, MI 49424 ☐ Fund Raiser	Purpose: BRANDING AND WEBSITE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/17/2026 Date	\$ 1,000.00
Expenditure #2 Name USPS Address 1451 LAKE DR SE GRAND RAPIDS, MI 49506 ☐ Fund Raiser	Purpose: MAILBOX ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/18/2026 Date	\$ 65.00
Expenditure #3 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: KENT DEMS VAN DATABASE ACCESS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/21/2026 Date	\$ 75.00
Expenditure #4 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: ONLINE DONATION FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/26/2026 Date	\$ 0.46
Expenditure #5 Name MEXO Address 118 FULTON ST E GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: STAFF THANK YOU DINNER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/2026 Date	\$ 166.86

Subtotal this page **1,307.32**

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

Enter this total
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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/2026</u> Date	\$ <u>1.80</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/2026</u> Date	\$ <u>0.91</u>
Expenditure #3 Name FEDEX Address 233 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>LIT POSTCARDS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/2026</u> Date	\$ <u>116.17</u>
Expenditure #4 Name BAGEL BEANERY Address 455 MICHIGAN ST NE GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>BAGELS AND COFFEE FOR DOOR KNOCKING</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/2026</u> Date	\$ <u>83.71</u>
Expenditure #5 Name FAMILY FARE Address 1415 FULTON ST E GRAND RAPIDS, MI 49503 ☒ Fund Raiser	Purpose: <u>DRINKS FOR TRIVIA FUNDRAISER</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/27/2026</u> Date	\$ <u>57.24</u>

Subtotal this page **259.83**

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 **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☒ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/28/2026</u> Date	\$ <u>0.46</u>
Expenditure #2 Name GIVEBUTTER Address 2810 N CHURCH ST #53748 WILMINGTON, DE 19802 ☐ Fund Raiser	Purpose: <u>ONLINE DONATION FEE</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2026</u> Date	\$ <u>1.06</u>
Expenditure #3 Name ERIKA VANDYKE Address 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: <u>REIMBURSEMENT FOR IN-KIND CONTRIBUTIONS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/2026</u> Date	\$ <u>188.05</u>
Expenditure #4 Name SALVADOR LOPEZ Address 2733 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505 ☐ Fund Raiser	Purpose: <u>REIMBURSEMENT FOR IN-KIND CONTRIBUTION</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/2026</u> Date	\$ <u>96.00</u>
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u> </u> Date	\$ <u> </u>

Subtotal this page **285.57**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **7,638.58**

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on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: <u>PO BOX</u> 5. <u>Date Debt Was Incurred:</u> <u>03/09/2026</u> 6. <u>Original Amount of Debt:</u> <u>\$ 63.00</u>	10/14/26 \$ <u>63.00</u> \$ \$ \$ \$	\$ <u>63.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: <u>CAMPAIGN TRAINING</u> 5. <u>Date Debt Was Incurred:</u> <u>03/09/2026</u> 6. <u>Original Amount of Debt:</u> <u>\$ 25.00</u>	10/14/26 \$ <u>25.00</u> \$ \$ \$ \$	\$ <u>25.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: SALVADOR LOPEZ 2733 LAFAYETTE AVE NE GRAND RAPIDS, MI 49505	4. Type: <u>WEBSITE CREATION</u> 5. <u>Date Debt Was Incurred:</u> <u>03/09/2026</u> 6. <u>Original Amount of Debt:</u> <u>\$ 96.00</u>	10/12/26 \$ <u>96.00</u> \$ \$ \$ \$	\$ <u>96.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

0.00

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

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.

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



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: CAMPAIGN ACCOUNT INITIAL DEP 5. <u>Date Debt Was Incurred:</u> <u>03/20/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>5.00</u>	10/14/26 \$ <u>5.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>5.00</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: CAMPAIGN MARKETING MATERIAL 5. <u>Date Debt Was Incurred:</u> <u>03/31/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>41.11</u>	10/14/26 \$ <u>41.11</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>41.11</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: CAMPAIGN MATERIALS - STICKER 5. <u>Date Debt Was Incurred:</u> <u>04/06/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>32.43</u>	10/14/26 \$ <u>32.43</u> _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>32.43</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

0.00

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

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.

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



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 2026021
2. Committee Name COMMITTEE TO ELECT ERIKA VANDYKE

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: ERIKA VANDYKE 536 LYON ST NE APT 3 GRAND RAPIDS, MI 49503	4. Type: <u>CAMPAIGN MATERIALS - SAVE THI</u> 5. <u>Date Debt Was Incurred:</u> <u>04/07/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>21.51</u>	10/14/26 \$ <u>21.51</u> \$ \$ \$ \$	\$ <u>21.51</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: DEBBIE VANDYKE 234 SHORE HAVEN DR SE GRAND RAPIDS, MI 49546	4. Type: <u>GAMESHOW SUPPLIES</u> 5. <u>Date Debt Was Incurred:</u> <u>05/29/2026</u> 6. <u>Original Amount of Debt:</u> \$ <u>268.70</u>	07/07/26 \$ <u>268.70</u> \$ \$ \$ \$	\$ <u>268.70</u>	\$ <u>0.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

0.00

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

0.00

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

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



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 05/13/2026	4. Number of Individuals Attending or Participating (whichever is greater) 56	5. Type of Fund Raising Activity CAMPAIGN LAUNCH	6. Address and Name (If any) of the place where the activity was held. CITY BUILT BREWING 820 MONROE AVE NW GRAND RAPIDS, MI 49503 ☐ Private Residence
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7. Total Contributions **1,536.81**
8. Other Receipts **0.00**
9. Gross Receipts (Add lines 7 and 8) **1,536.81**
10. Total Cost of Event **1,025.29**
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 05/29/2026	4. Number of Individuals Attending or Participating (whichever is greater) 106	5. Type of Fund Raising Activity GAME SHOW FUNDRAISER	6. Address and Name (If any) of the place where the activity was held. THE EMORY ARTS & CULTURE HUB 2040 DIVISION AVE S GRAND RAPIDS, MI 49507 ☐ Private Residence
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7. Total Contributions **4,215.97**
8. Other Receipts **281.93**
9. Gross Receipts (Add lines 7 and 8) **4,497.90**
10. Total Cost of Event **1,417.65**
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **2026021**
2. Committee Name **COMMITTEE TO ELECT ERIKA VANDYKE**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 07/26/2026	4. Number of Individuals Attending or Participating (whichever is greater) 10	5. Type of Fund Raising Activity DOMINO TOURNAMENT	6. Address and Name (If any) of the place where the activity was held. CITY BUILT BREWING 820 MONROE AVE NW STE 155 GRAND RAPIDS, MI 49503 ☐ Private Residence
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7. Total Contributions **207.11**
8. Other Receipts **100.92**
9. Gross Receipts (Add lines 7 and 8) **308.03**
10. Total Cost of Event **142.35**
(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.