MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
27 JUL 2026 PM 03:22
KENT COUNTY CLERK
GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE COVER PAGE

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

3. This Statement covers From: 01/01/2026 to 07/20/2026

1. Committee I.D. Number
2023021

2. Committee Name
LAGRAND FOR GRAND RAPIDS

4. Candidate Last Name: LAGRAND First Name: DAVID M.I.: M

4a. Office Sought Including District # or Community Served (If applicable)
MAYOR, GRAND RAPIDS

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

5. Committee's Mailing Address
PO BOX 150293
GRAND RAPIDS, MI 49515

Area Code and Phone (616) 540-0994
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
RICHARD WILLIAMSON
1213 CALGARY ST NE
GRAND RAPIDS, MI 49505

Area Code & Phone (616) 499-1814

7. Treasurer's Business Address
1213 CALGARY ST NE
GRAND RAPIDS, MI 49505

Area Code and Phone (616) 499-1814

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
WILLIAM DEMMINK
6960 OLDE PINE DR
JENISON, MI 49428

Area Code and Phone (616) 350-8988

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
_____

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

- ☒ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (2026) 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 oustanding assets, owes no lates fees or has any oustanding 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 _____ / _____ Submitted electronically, signature on file Date 07/27/2026
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date 07/27/2026
Type or Print Name Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2023021

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name LAGRAND FOR GRAND RAPIDS

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) $ 5,616.64	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $ 5,616.64	(18.) $ 26,098.52
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $ 0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $ 5,616.64	(20.) $ 26,098.52
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $ 0.00	(21.) $ 0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $ 0.00	(22.) $ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) $ 2,332.71	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $ 0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $ 2,332.71	(23.) $ 12,345.19
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $ 0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $ 0.00	(24.) $ 0.00
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed **by** the Committee (Schedule 1E)	(12a.) $ 0.00	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $ 0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $ 12,702.52
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $ 5,616.64
15. SUBTOTAL Add lines 13 and 14	(15.) = $ 18,319.16
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $ 2,332.71
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $ 15,986.45 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/06/2026

Name & Address:
HARVEY KONING
5364 QUEENSBURY DR SE
KENTWOOD, MI 49508

$ 258.32 $ 258.32

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer VARNUM LLP

Business Address 333 BRIDGE ST NW, GRAND RAPIDS, MI 49504

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/08/2026

Name & Address
JON BYLSMA
621 RUSSWOOD ST NE
GRAND RAPIDS, MI 49505

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer VARNUM LLP

Business Address 333 BRIDGE ST NW, GRAND RAPIDS, MI 49504

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/08/2026

Name & Address:
JOHN ARENDSHORST
2056 WILSHIRE DR SE
EAST GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer VARNUM

Business Address 333 BRIDGE ST NW, GRAND RAPIDS, MI 49504

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/09/2026

Name & Address
CHARLES BURPEE
22 CAMPAU CIR NW
GRAND RAPIDS, MI 49503

$ 250.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD LLP

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,008.32

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/14/2026

Name & Address:
GAETAN GERVILLE-REACHE
5741 MANCHESTER HILLS DR SE
GRAND RAPIDS, MI 49546

$ 250.00 $ 750.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/16/2026

Name & Address
PAUL MCCARTHY
554 LOVETT AVE SE
GRAND RAPIDS, MI 49506

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer RHOADES MCKEE

Business Address 55 CAMPAU AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/16/2026

Name & Address:
MATTHEW VICARI
2541 ANNCHESTER DR SE
GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer MILLER JOHNSON

Business Address 45 OTTAWA AVE SW, STE 1100, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/16/2026

Name & Address
HAL OSTROW
144 BAYNTON AVE NE
GRAND RAPIDS, MI 49503

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer RHOADES MCKEE

Business Address 55 CAMPAU AVE NW, STE 300, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 850.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/18/2026

Name & Address:
DENNIS DONOHUE
2019 ARGENTINA DR SE
GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/19/2026

Name & Address
LOREN ANDRULIS
9109 LAKE FIELD CT SE
ALTO, MI 49302

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
STEPHEN WATERBURY
150 WOODWARD LN SE
GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer RETIRED

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
FREDERICK DILLEY
2340 ACADEMY DR NE
GRAND RAPIDS, MI 49503

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer FOSTER SWIFT

Business Address 1700 E BELTLINE AVE NE, GRAND RAPIDS, MI 49525

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1,000.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address:
LARRY WILLEY
4350 RIVERWATCH RD
ROCKFORD, MI 49341

$ 200.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WILLEY & CHAMBERLAIN

Business Address 300 OTTAWA AVE NW, SUITE 810, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/28/2026

Name & Address
MARK WASSINK
62 LAKESIDE DR SE
GRAND RAPIDS, MI 49506

$ 258.32 $ 258.32

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/01/2026

Name & Address:
DOUG DOZEMAN
2719 HAMPSHIRE BLVD SE
GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/01/2026

Name & Address
CHRISTIAN MEYER
350 MANHATTAN RD SE
EAST GRAND RAPIDS, MI 49506

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, STE 1500, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 958.32

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/05/2026

Name & Address:
RICHARD BOUMA
3694 LAKE DR SE
GRAND RAPIDS, MI 49546

$150.00 $150.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer WARNER NORCROSS + JUDD

Business Address 150 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/05/2026

Name & Address
GERALD LYKINS
3031 W BLUFFS DR SE
GRAND RAPIDS, MI 49546

$250.00 $550.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer LYKINS LAW PLC

Business Address 234 DIVISION AVE N, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/05/2026

Name & Address:
CLAY WEST
1600 GLEN FOREST DR SE
ADA, MI 49301

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation JUDGE Employer 17TH CIRCUIT COURT

Business Address 180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/05/2026

Name & Address
JESSICA WOOD
1039 SAN JOSE DR SE
GRAND RAPIDS, MI 49506

$250.00 $250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer DICKINSON WRIGHT

Business Address BRIDGE ST NW, STE 800, GRAND RAPIDS, MI 49504

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/06/2026

Name & Address:
KEVIN TOLER
1353 BRIDGE ST NW
GRAND RAPIDS, MI 49504

$ 1,000.00 $ 1,100.00

5. If over $100.00 cumulative, please provide:

Occupation PARTNER AND WEALTH ADVISOR Employer HILL ISLAND FINANCIAL

Business Address 38 COMMERCE AVE SW, STE 310, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/14/2026

Name & Address
CAROL HENNESSEY
1510 KENAN AVE NW
GRAND RAPIDS, MI 49504

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation COUNTY COMMISSIONER Employer KENT COUNTY

Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address:

$ $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address

$ $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 1,050.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5,616.64

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/02/2026 Date	$ 25.00
Expenditure #2 Name EASTOWN US POST OFFICE Address 1451 LAKE DR SE GRAND RAPIDS, MI 49516 ☑ Fund Raiser	Purpose: POSTAGE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/12/2026 Date	$ 82.38
Expenditure #3 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	01/13/2026 Date	$ 30.00
Expenditure #4 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/02/2026 Date	$ 103.58
Expenditure #5 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/13/2026 Date	$ 30.00

Subtotal this page	270.96
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PAUL LAGRAND Address 1248 HALL ST SE GRAND RAPIDS, MI 49506 ☐ Fund Raiser	Purpose: WEBSITE SERVICES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/17/2026 Date	$ 696.00
Expenditure #2 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/02/2026 Date	$ 48.75
Expenditure #3 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/13/2026 Date	$ 30.00
Expenditure #4 Name WILLIAM DEMMINK Address 6960 OLDE PINE DR GEORGETOWN TWP, MI 49428 ☐ Fund Raiser	Purpose: STIPEND ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/01/2026 Date	$ 600.00
Expenditure #5 Name GOOGLE Address 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043 ☐ Fund Raiser	Purpose: GSUITE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/01/2026 Date	$ 252.00

Subtotal this page 1,626.75

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/02/2026 Date	$ 25.00
Expenditure #2 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/13/2026 Date	$ 30.00
Expenditure #3 Name CALVIN COLLEGE DEMOCRATS Address 3201 BURTON ST SE GRAND RAPIDS, MI 49546 ☐ Fund Raiser	Purpose: EVENT TICKET ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/25/2026 Date	$ 65.00
Expenditure #4 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/04/2026 Date	$ 25.00
Expenditure #5 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/13/2026 Date	$ 30.00

Subtotal this page	175.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/02/2026 Date	$ 25.00
Expenditure #2 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/15/2026 Date	$ 30.00
Expenditure #3 Name KENT COUNTY BLACK CAUCUS Address 4764 WOLF RUN AVE SE KENTWOOD, MI 49548 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/26/2026 Date	$ 150.00
Expenditure #4 Name PARAGON PAYMENT SOLUTIONS Address 2141 E BROADWAY RD SUITE 202 TEMPE, AZ 85282 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/02/2026 Date	$ 25.00
Expenditure #5 Name HOMEBASE Address 835 HOWARD ST 2ND FLOOR SF, CA 94103 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/13/2026 Date	$ 30.00

Subtotal this page	260.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	2,332.71

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 2023021

2. Committee Name LAGRAND FOR GRAND RAPIDS

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
02/05/2026	10	RECEPTION	VARNUM 333 BRIDGE ST NW GRAND RAPIDS, MI 49504 ☐ Private Residence

7. Total Contributions 4,816.64

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 4,816.64

10. Total Cost of Event 82.38
(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.