



FILED

23 OCT 2026 PM 04:51

KENT COUNTY CLERK
GRAND RAPIDS, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 07/16/2026 to 10/18/2026

1. Committee I.D. Number

2026080

2. Committee Name

AMAAD HARDY FOR SCHOOL BOARD

4. Candidate Last Name

HARDY

First Name

AMAAD

M.I.

R

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 1059
GRAND RAPIDS, MI 49503**

Area Code and Phone (616) 485-3688
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

**MAX AULBACH
1814 CRESCENT DR NE
GRAND RAPIDS, MI 49503**

Area Code & Phone (616) 890-3669

7. Treasurer's Business Address

**1814 CRESCENT DR NE
GRAND RAPIDS, MI 49503**

Area Code and Phone (616) 890-3669

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

10/23/2026

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

10/23/2026



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 2026080

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>7,225.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>7,225.00</u>	(18.) \$ <u>7,225.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>7,225.00</u>	(20.) \$ <u>7,225.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>90.89</u>	(21.) \$ <u>90.89</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3,066.40</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3,066.40</u>	(23.) \$ <u>3,066.40</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>7,225.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>7,225.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>3,066.40</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>4,158.60</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/17/2026</u>	
Name & Address: AMAAD HARDY 2347 RADCLIFF VILLAGE DR SE GRAND RAPIDS, MI 49546		\$ <u>5.00</u>	\$ <u>5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS DEVELOPMENT</u> Employer <u>CITY OF GRAND RAPIDS</u> Business Address <u>300 MONROE AVE NW, 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>07/24/2026</u>	
Name & Address: TONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>5.00</u>	\$ <u>5.00</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/24/2026</u>	
Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEVELOPMENT DIRECTOR</u> Employer <u>MOSAIC COUNSELING</u> Business Address <u>1705 S DESPELDER ST, GRAND HAVEN, MI 49417</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/24/2026</u>	
Name & Address: STEVEN STARNES 2930 HALL ST SE EAST GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>FINANCIAL ADVISOR</u> Employer <u>FIDUCIARY FINANCIAL ADVISORS</u> Business Address <u>124 FULTON ST E, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **135.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/25/2026</u>	
Name & Address: JOEL VANKUIKEN 618 WINDSOR TERRACE SE GRAND RAPIDS, MI 49503		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATIONS</u> Employer <u>SEE CONTEXT</u> Business Address <u>618 WINDSOR TERRACE 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>07/25/2026</u>	
Name & Address: ROGAYLE FREEMAN 904 GRIGGS ST SE GRAND RAPIDS, MI 49507		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: BENJAMIN SIZON 2214 29TH ST SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: COURTNEY HOWE 5334 RIVERSIDE DRIVE SARANAC, MI 48881		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS OWNER</u> Employer <u>YELLOW UMBRELLA CREATIVE</u> Business Address <u>5334 RIVERSIDE DR, SARANAC, MI 48881</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **110.00**

Grand Total of All Schedules 1A
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: SCOTT KING 229 PROSPECT AVE NE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2445 32ND ST SE, KENTWOOD, MI 49512</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: OWEN TIMMERMAN 16892 96TH AVE NUNICA, MI 49448		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2200 MORTON AVE, MUSKEGON, MI 49441</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: NATHAN WALTON 2875 8TH AVE BYRON CENTER, MI 49315		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MUSICIAN</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2875 8TH AVE, BYRON CENTER, MI 49315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/07/2026</u>	
Name & Address: COLIN MCCORKLE 1747 CHATEAU DR SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>FISHBECK</u> Business Address <u>1515 ARBORETUM DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **130.00**

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/08/2026</u>	
Name & Address: ANDREW JUODAWLKIS 1210 JACKSON ST NW GRAND RAPIDS, MI 49504		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>SCHOLAR</u> Business Address <u>1210 JACKSON ST 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>08/08/2026</u>	
Name & Address: HALLE GIBBS 1523 COLORADO AVE SE GRAND RAPIDS, MI 49507		\$ <u>5.00</u>	\$ <u>5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CASE MANAGER</u> Employer <u>SENIOR NEIGHBORS</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/08/2026</u>	
Name & Address: MICHAEL TOWNSEND 61 DIAMOND AVE NE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MIXER</u> Employer <u>UNIBAND</u> Business Address <u>1035 FULLER AVE 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>08/08/2026</u>	
Name & Address: GREGORY MORRIS 6079 WHEATFIELD DR SE GRAND RAPIDS, MI 49508		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **125.00**

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/10/2026</u>	
Name & Address: MARLEE DARCO 9914 DAILEY DR CALEDONIA, MI 49316		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>SSI</u> Business Address <u>9914 DAILEY DR, CALEDONIA, MI 49316</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/10/2026</u>	
Name & Address: CHASE ROETMAN 3397 ELWOOD AVE SW GRANDVILLE, MI 49418		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>MONARCHS CLUB</u> Business Address <u>646 STOCKING AVE NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/10/2026</u>	
Name & Address: GAVIN KNOLLWOOD 139 PEARL ST NW GRAND RAPIDS, MI 49503		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>MONARCH CLUB</u> Business Address <u>646 STOCKING 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>08/10/2026</u>	
Name & Address: SHANNON BERGER 700 CHERRY ST SE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>MONARCHS CLUB</u> Business Address <u>646 STOCKING AVE NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 220.00

Grand Total of All Schedules 1A
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/11/2026</u>	
Name & Address: CARLOS SANCHEZ 1730 RIDGEMOOR DR SE GRAND RAPIDS, MI 49506		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>DAVENPORT UNIVERSITY</u> Business Address <u>17 FOUNTAIN ST NW, 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>08/11/2026</u>	
Name & Address: CARRIE WILSON 1525 108TH ST SW BYRON CENTER, MI 49315		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>FREEDOM CONSTRUCTION</u> Business Address <u>7120 DIVISION AVE S, GRAND RAPIDS, MI 49548</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/11/2026</u>	
Name & Address: ANDRE HOLLINGSWORTH 3906 S ROSEBUD CT SE GRAND RAPIDS, MI 49512		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>TRINITY</u> Business Address <u>200 JEFFERSON AVE 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>08/11/2026</u>	
Name & Address: CHRISTOPHER BENNETT 210 GARFIELD AVE SW GRAND RAPIDS, MI 49504		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>BUTCHERS UNION</u> Business Address <u>438 BRIDGE ST NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 420.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/11/2026</u>	
Name & Address: REBECA PADILLA 824 9TH ST NW GRAND RAPIDS, MI 49504		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>311 CSR</u> Employer <u>CITY OF GRAND RAPIDS</u> Business Address <u>824 9TH ST 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>08/12/2026</u>	
Name & Address: AMELIA ACKLEY 141 CARRIER ST NE GRAND RAPIDS, MI 49505		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/12/2026</u>	
Name & Address: PAUL FLYNN 73 LAKESIDE DR SE GRAND RAPIDS, MI 49506		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AUTO EXECUTIVE</u> Employer <u>GENTEX</u> Business Address <u>73 LAKESIDE DR 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>08/12/2026</u>	
Name & Address: CATON VANCE 1653 W KENTVIEW DR NE GRAND RAPIDS, MI 49505		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1653 W KENTVIEW DR NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **380.00**

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

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1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/12/2026</u>	
Name & Address: DAVID BULKOWSKI 1810 SOUTHAMPTON SE GRAND RAPIDS, MI 49508		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>DISABILITY ADVOCATES</u> Business Address <u>160 68TH ST SW, GRAND RAPIDS, MI 49548</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/12/2026</u>	
Name & Address: HOLLY YOUNG 350 BENJAMIN AVE SE GRAND RAPIDS, MI 49506		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INCLUSION MANAGER</u> Employer <u>WOLVERINE WORLDWIDE</u> Business Address <u>9341 COURTLAND DR NE, ROCKFORD, MI 49351</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/12/2026</u>	
Name & Address: TYLER BOBOWSKI 23 WESTFIELD LN DES PLAINES, IL 60018		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>TRANSPORTATION INTERN</u> Employer <u>GVMC</u> Business Address <u>1015 CALIFORNIA ST 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>08/13/2026</u>	
Name & Address: RYAN HUIZENGA 1105 DEN HERTOG ST SW WYOMING, MI 49509		\$ <u>15.00</u>	\$ <u>15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NONPROFIT FUNDRAISING</u> Employer <u>FARA</u> Business Address <u>533 W UWCHLAN AVE, DOWNINGTOWN, PA 19335</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **135.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/13/2026</u> Name & Address: ANTHONY HALCHAK 8281 HERRINGTON AVE NE BELMONT, MI 49306 5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATIONS</u> Employer <u>SELF EMPLOYED</u> Business Address <u>6446 BELLA VISTA DR NE, ROCKFORD, MI 49341</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/13/2026</u> Name & Address: LOGAN TREVORROW 822 ANN ST NE GRAND RAPIDS, MI 49505 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/13/2026</u> Name & Address: HIJJI HILL 1440 COLORADO AVE SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/14/2026</u> Name & Address: JALEN HARDY 1551 RIVERSIDE PKWY LITHIA SPRINGS, GA 30122 5. If over \$100.00 cumulative, please provide: Occupation <u>BILLING COORDINATOR</u> Employer <u>HALL BOOTH SMITH LLV</u> Business Address <u>5130 CASCADE HILLS CIR SW, ATLANTA, GA 30331</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>30.00</u>	\$ <u>30.00</u>

Page Subtotal **150.00**

Grand Total of All Schedules 1A
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Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number 2026080
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/14/2026</u>	
Name & Address: GWENDOLYN GOREE 2121 SUMMER BROOK DR SE KENTWOOD, MI 49508		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MEDICAL SUPPLIES</u> Employer <u>ASPEN SURGICAL</u> Business Address <u>2347 RADCLIFF VILLAGE DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/14/2026</u>	
Name & Address: JIMMY WILLIS 510 COLLEGE AVE NE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CORRECTIONS OFFICER</u> Employer <u>KENT COUNTY</u> Business Address <u>703 BALL AVE NE, 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>08/14/2026</u>	
Name & Address: COREY HART 6617 BROOKHILLS CT SE GRAND RAPIDS, MI 49546		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STARTUP ADVISOR</u> Employer <u>COREY THE HART</u> Business Address <u>6617 BROOKHILLS CT 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>08/15/2026</u>	
Name & Address: WENDE RANDALL 908 42ND ST SW WYOMING, MI 49509		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL SERVICES</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			

Page Subtotal 60.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number 2026080
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/15/2026</u>	
Name & Address: MATTHEW MARQUEZ RIVERVIEW DR NW JENISON, MI 49428		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MUSICIAN</u> Employer <u>SELF EMPLOYED</u> Business Address <u>7681 RIVERVIEW DR, JENISON, MI 49428</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/15/2026</u>	
Name & Address: JAMES HUGHES 949 WEALTHY ST SE GRAND RAPIDS, MI 49506		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AV ENGINEER</u> Employer <u>TRIUMPH MUSIC ACADEMY</u> Business Address <u>949 WEALTHY 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 <u>08/15/2026</u>	
Name & Address: DILLI GAUTAM 115 SWART ST EAST LANSING, MI 48823		\$ <u>40.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNITY ENGAGEMENT</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>320 S WALNUT ST, LANSING, MI 48933</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/17/2026</u>	
Name & Address: CHRISTOPHER LAFLEUR 9797 CLYDE PARK AVE SW BYRON CENTER, MI 49315		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>LAFLEUR LEGAL MARKETING</u> Business Address <u>549 OTTAWA AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **160.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/17/2026</u>	
Name & Address: JOHN ARENDSHORST 2056 WILSHIRE DR SE EAST GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>VARNUM LLP</u> Business Address <u>333 BRIDGE ST 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>08/18/2026</u>	
Name & Address: NEIL CARLSON 1719 WOODCLIFF AVE SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTING</u> Employer <u>DATAWISE CONSULTING, LLC</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/18/2026</u>	
Name & Address: STEPHEN FABER 1845 MEADOWFIELD DR NE GRAND RAPIDS, MI 49505		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMISSIONER</u> Employer <u>KENT COUNTY</u> Business Address <u>99 MONROE AVE NW, ARDMORE, OK 73401</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/20/2026</u>	
Name & Address: MATTHEW PETERSON 2285 CHRISTINE CT SE GRAND RAPIDS, MI 49546		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>JOHN BALL ZOO</u> Business Address <u>1017 4TH ST NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 350.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/20/2026</u>	
Name & Address: MAX AULBACH 1840 CRESCENT DR NE GRAND RAPIDS, MI 49503		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PUBLIC AFFAIRS</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>425 W OTTAWA ST, LANSING, MI 48933</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/21/2026</u>	
Name & Address: ANDRE HOLLINGSWORTH 3906 S ROSEBUD CT SE GRAND RAPIDS, MI 49512		\$ <u>50.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>TRINITY</u> Business Address <u>200 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>08/21/2026</u>	
Name & Address: AMANDA MORTON 4481 WALMA AVE SE KENTWOOD, MI 49512		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIGITAL MARKETING</u> Employer <u>OTTAWA AREA ISD</u> Business Address <u>13565 PORT SHELDON ST, HOLLAND, MI 49424</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/21/2026</u>	
Name & Address: JEFFREY CRANSON 2618 COLLEGE AVE NE GRAND RAPIDS, MI 49505		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PUBLIC AFFAIRS</u> Employer <u>STATE OF MICHIGAN</u> Business Address <u>425 W OTTAWA ST, LANSING, MI 48933</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 200.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/21/2026</u>	
Name & Address: NATE RAUH-BIERI 66 COLLEGE AVE NE GRAND RAPIDS, MI 49503		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROJECT MANAGER</u> Employer <u>JUSTAIR SOLUTIONS</u> Business Address <u>66 COLLEGE 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>08/22/2026</u>	
Name & Address: ALTON HARDY 337 FAIR OAKS BLVD FAIRFIELD, AL 35064		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PASTOR</u> Employer <u>URBAN HOPE COMMUNITY CHURCH</u> Business Address <u>4708 GARY AVE, FAIRFIELD, AL 35064</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/22/2026</u>	
Name & Address: SIRENA JOHNSON 12233 HOSKINS AVE NE CEDAR SPRINGS, MI 49319		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIGITAL MEDIA SPECIALISTS</u> Employer <u>CITY OF GRAND RAPIDS</u> Business Address <u>2125 NEWPORT ST SW, GRAND RAPIDS, MI 49519</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/23/2026</u>	
Name & Address: KATY CONRAN 5051 EGYPT VALLEY AVE NE BELMONT, MI 49306		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COFOUNDER</u> Employer <u>SKYPROOF</u> Business Address <u>5051 EGYPT VALLEY AVE NE, BELMONT, MI 49306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 285.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/24/2026</u>	
Name & Address: TONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>5.00</u>	\$ <u>10.00</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>08/25/2026</u>	
Name & Address: CHRISTOPHER ROMERO 2149 E SHIAWASSEE RD SE GRAND RAPIDS, MI 49506		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROGRAM OFFICER</u> Employer <u>FREY FOUNDATION</u> Business Address <u>40 PEARL ST NW, 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>08/25/2026</u>	
Name & Address: TONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>100.00</u>	\$ <u>110.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: TOM DUISTERHOF 1425 CRAMTON AVE NE FOREST HILLS, MI 49301		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>GORDON WATER SYSTEMS</u> Employer <u>OWNER</u> Business Address <u>1425 CRAMTON AVE NE, FOREST HILLS, MI 49301</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 385.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: STEPHANIE BROWN 3159 TURRET DR SE GRAND RAPIDS, MI 49512		\$ <u>120.00</u>	\$ <u>120.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DENTIST</u> Employer <u>SMILE</u> Business Address <u>3159 TURRET DR 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>08/31/2026</u>	
Name & Address: KATIE LEHMKUHL 145 GILPIN ST NE GRAND RAPIDS, MI 49505		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROJECT COORDINATOR</u> Employer <u>MICEO</u> Business Address <u>145 GILPIN ST NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: THOMAS VISCO 2820 LEELANAU DR NE GRAND RAPIDS, MI 49525		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>POLICY DIRECTOR</u> Employer <u>MICHIGAN COMMUNITY ACTION</u> Business Address <u>2173 COMMONS PKWY, OKEMOS, MI 48864</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: ANDY JOHNSTON 2891 COURT DR SE LOWELL, MI 49331		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR VP</u> Employer <u>GRAND RAPIDS CHAMBER</u> Business Address <u>250 MONROE AVE NW, ARDMORE, OK 73401</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 280.00

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

Enter this total on
line 3a of Summary
Page.



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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: ALVIN HILLS 1667 CHATEAU DR SW GRAND RAPIDS, MI 49519		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>CITY OF GRAND RAPIDS</u> Business Address <u>300 MONROE AVE NW, 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>08/31/2026</u>	
Name & Address: SUSAN CLARK 1125 PATTERSON AVE SE GRAND RAPIDS, MI 49546		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CREATIVE</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1125 PATTERSON AVE 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>08/31/2026</u>	
Name & Address: RICHARD TRIPLET 966 60TH ST SE GRAND RAPIDS, MI 49508		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: KHRISTIAN SILVIS 955 SYDNEY DR NW GRAND RAPIDS, MI 49534		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 210.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: SUSAN WELSFORD 642 WENDOVER BLVD NORTON SHORES, MI 49441		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OPERATIONS COORDINATOR</u> Employer <u>RENK AMERICA</u> Business Address <u>76 S GETTY ST, MUSKEGON, MI 49442</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: SUSAN WELSFORD 642 WENDOVER BLVD NORTON SHORES, MI 49441		\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OPERATIONS COORDINATOR</u> Employer <u>RENK AMERICA</u> Business Address <u>76 S GETTY ST, MUSKEGON, MI 49442</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: YOLANDA BROWN 1050 BENJAMIN AVE SE GRAND RAPIDS, MI 49506		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHILDCARE PROVIDER</u> Employer <u>SELF</u> Business Address <u>1050 BENJAMIN AVE 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>08/31/2026</u>	
Name & Address: CLAY WEST 1600 GLEN FOREST DR SE FOREST HILLS, MI 49301		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>JUDGE</u> Employer <u>KENT COUNTY</u> Business Address <u>180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **180.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: AUDREY PIMPLETON 516 LAFAYETTE AVE SE GRAND RAPIDS, MI 49503		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: KURTIS BROWN 60 LAFAYETTE AVE NE GRAND RAPIDS, MI 49503		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: DANIEL HESSE 117 KNAPP ST NE GRAND RAPIDS, MI 49505		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>IT MANAGER</u> Employer <u>ROYCE ROLLS RINGER CO.</u> Business Address <u>117 KNAPP ST 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>08/31/2026</u>	
Name & Address: DEREK ATEN 3540 REDKEY CT SW GRANDVILLE, MI 49418		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BANKER</u> Employer <u>LMCU</u> Business Address <u>3540 RED KEY DR SW, GRANDVILLE, MI 49418</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 260.00

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

Enter this total on
line 3a of Summary
Page.



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CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: JOSHUA USADEL 2301 84TH ST SW BYRON CENTER, MI 49315		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ISS</u> Employer <u>KENT ISD</u> Business Address <u>1925 FRANCIS AVE 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>08/31/2026</u>	
Name & Address: BENJAMIN SCHEID 1818 GIDDINGS AVE SE GRAND RAPIDS, MI 49507		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOM CARPENTER</u> Employer <u>SELF</u> Business Address <u>1818 GIDDINGS AVE SE, GRAND RAPIDS, MI 49507</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: KYLE SULLIVAN 247 CHARLES AVE SE GRAND RAPIDS, MI 49503		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SENIOR WEB ENGINEER</u> Employer <u>PURPLE WAVE</u> Business Address <u>247 CHARLES AVE 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>08/31/2026</u>	
Name & Address: DARRYL MCGHEE 2066 MARTIN AVE SE GRAND RAPIDS, MI 49507		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **180.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/2026</u>	
Name & Address: WENDY WINSTON 1525 FORREST AVE NE GRAND RAPIDS, MI 49505		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>GRAND RAPIDS PUBLIC SCHOOLS</u> Business Address <u>1331 MARTIN LUTHER KING AVE, 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>08/31/2026</u>	
Name & Address: JOEL VANKUIKEN 618 WINDSOR TERRACE SE GRAND RAPIDS, MI 49503		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COMMUNICATIONS</u> Employer <u>SEE CONTEXT</u> Business Address <u>618 WINDSOR TERRACE 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>09/01/2026</u>	
Name & Address: DAVID WEADER 2582 3 MILE RD NE GRAND RAPIDS, MI 49525		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>PRIORITY</u> Business Address <u>1231 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>09/07/2026</u>	
Name & Address: BENJAMIN SIZON 2214 29TH ST SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **190.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/07/2026</u>	
Name & Address: COLIN MCCORKLE 1747 CHATEAU DR SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>FISHBECK</u> Business Address <u>1515 ARBORETUM DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/10/2026</u>	
Name & Address: MICHAEL TOWNSEND 61 DIAMOND AVE NE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MIXER</u> Employer <u>UNIBAND</u> Business Address <u>1035 FULLER AVE SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/10/2026</u>	
Name & Address: CHASE ROETMAN 3397 ELWOOD AVE SW GRANDVILLE, MI 49418		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>MONARCHS CLUB</u> Business Address <u>646 STOCKING 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>09/11/2026</u>	
Name & Address: BRIELLE SEELEY 9883 WHITNEYVILLE AVE SE ALTO, MI 49302		\$ <u>5.00</u>	\$ <u>5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **35.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/11/2026</u>	
Name & Address: OLAKUNLE AKINPELU 1012 COLD BROOK ST NE GRAND RAPIDS, MI 49503		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>GE AEROSPACE</u> Business Address <u>3290 PATTERSON 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>09/12/2026</u>	
Name & Address: VLADISLAV CHASNYK 7288 THORNCREST DR SE FOREST HILLS, MI 49301		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PROJECT MANAGEMENT</u> Employer <u>SIEMENS</u> Business Address <u>7288 THORNCREST DR SE, FOREST HILLS, MI 49301</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/12/2026</u>	
Name & Address: CATON VANCE 1653 W KENTVIEW DR NE GRAND RAPIDS, MI 49505		\$ <u>20.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1653 W KENTVIEW DR 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>09/13/2026</u>	
Name & Address: LOGAN TREVORROW 822 ANN ST NE GRAND RAPIDS, MI 49505		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **130.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/13/2026</u>	
Name & Address: MICHAEL NAESS 2811 MIDLAND DR SE GRAND RAPIDS, MI 49506		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>HOLLAND SYMPHONY</u> Business Address <u>PO BOX 2685, HOLLAND, MI 49422</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/13/2026</u>	
Name & Address: REYNALDO HERRERA 2510 CHASSELL ST SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MATHEMATICIAN</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2510 CHASSELL ST SW, WYOMING, MI 49519</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/14/2026</u>	
Name & Address: ED GARNER 37 E GRAND AVE MUSKEGON, MI 49442		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REGIONAL DIRECTOR</u> Employer <u>GVSU</u> Business Address <u>50 FRONT AVE SW, 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>09/14/2026</u>	
Name & Address: COREY HART 6617 BROOKHILLS CT SE GRAND RAPIDS, MI 49546		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STARTUP ADVISOR</u> Employer <u>COREY THE HART</u> Business Address <u>6617 BROOKHILLS CT SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 295.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/15/2026</u>	
Name & Address: JAMES HUGHES 949 WEALTHY ST SE GRAND RAPIDS, MI 49506		\$ <u>10.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AV ENGINEER</u> Employer <u>TRIUMPH MUSIC ACADEMY</u> Business Address <u>949 WEALTHY ST SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/18/2026</u>	
Name & Address: HIJJI HILL 1440 COLORADO AVE SE GRAND RAPIDS, MI 49507		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/18/2026</u>	
Name & Address: GWENDOLYN GOREE 2121 SUMMER BROOK DR SE KENTWOOD, MI 49508		\$ <u>30.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MEDICAL SUPPLIES</u> Employer <u>ASPEN SURGICAL</u> Business Address <u>2347 RADCLIFF VILLAGE 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>09/21/2026</u>	
Name & Address: CINDY SCHLEE BROOK DR SE KENTWOOD, MI 49512		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 240.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/24/2026</u>	
Name & Address: TONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>5.00</u>	\$ <u>115.00</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>09/25/2026</u>	
Name & Address: TONY BAKER 455 MADISON AVE SE GRAND RAPIDS, MI 49503		\$ <u>100.00</u>	\$ <u>215.00</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/28/2026</u>	
Name & Address: CHRISTINE KRAMER 111 GRACELAND ST NE GRAND RAPIDS, MI 49505		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATION</u> Employer <u>UFCW LOCAL 951</u> Business Address <u>4045 60TH ST SE, KENTWOOD, MI 49512</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/05/2026</u>	
Name & Address: ANDREW CASCINI 1019 FULTON ST E GRAND RAPIDS, MI 49503		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>HL PLC</u> Business Address <u>1019 FULTON ST E, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 380.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/07/2026</u>	
Name & Address: COLIN MCCORKLE 1747 CHATEAU DR SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>FISHBECK</u> Business Address <u>1515 ARBORETUM DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/07/2026</u>	
Name & Address: BENJAMIN SIZON 2214 29TH ST SW WYOMING, MI 49519		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/07/2026</u>	
Name & Address: ALEXANDER THIBODEAU 635 PARIS AVE SE GRAND RAPIDS, MI 49503		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WARNER NORCROSS + JUDD LLP</u> Employer <u>ATTORNEY</u> Business Address <u>150 OTTAWA AVE 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>10/07/2026</u>	
Name & Address: GAYLE HARVEY 2103 PLYMOUTH AVE SE GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PUBLIC ADMINISTRATION</u> Employer <u>CITY OF GRAND RAPIDS</u> Business Address <u>300 MONROE AVE NW, GRAND RAPIDS, MI 49503</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 620.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/08/2026</u>	
Name & Address: MICHAEL TOWNSEND 61 DIAMOND AVE NE GRAND RAPIDS, MI 49503		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MIXER</u> Employer <u>UNIBAND</u> Business Address <u>1035 FULLER AVE SE, GRAND RAPIDS, MI 49506</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/08/2026</u>	
Name & Address: PATRICK MILES 2856 REEDS LAKE BLVD SE EAST GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>BARNES & THORNBURG</u> Business Address <u>171 MONROE AVE NW, 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>10/10/2026</u>	
Name & Address: CHASE ROETMAN 3397 ELWOOD AVE SW GRANDVILLE, MI 49418		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BARTENDER</u> Employer <u>MONARCHS CLUB</u> Business Address <u>646 STOCKING 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>10/12/2026</u>	
Name & Address: CATON VANCE 1653 W KENTVIEW DR NE GRAND RAPIDS, MI 49505		\$ <u>20.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MARKETING</u> Employer <u>SELF EMPLOYED</u> Business Address <u>1653 W KENTVIEW DR NE, GRAND RAPIDS, MI 49505</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **140.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/13/2026</u>	
Name & Address: LOGAN TREVORROW 822 ANN ST NE GRAND RAPIDS, MI 49505		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/13/2026</u>	
Name & Address: MICHAEL NAESS 2811 MIDLAND DR SE GRAND RAPIDS, MI 49506		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>HOLLAND SYMPHONY</u> Business Address <u>PO BOX 2685, HOLLAND, MI 49422</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2026</u>	
Name & Address: HIJJI HILL 1440 COLORADO AVE SE GRAND RAPIDS, MI 49507		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2026</u>	
Name & Address: GWENDOLYN GOREE 2121 SUMMER BROOK DR SE KENTWOOD, MI 49508		\$ <u>30.00</u>	\$ <u>90.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MEDICAL SUPPLIES</u> Employer <u>ASPEN SURGICAL</u> Business Address <u>2347 RADCLIFF VILLAGE DR SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 390.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2026</u>	
Name & Address: COREY HART 6617 BROOKHILLS CT SE GRAND RAPIDS, MI 49546		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>STARTUP ADVISOR</u> Employer <u>COREY THE HART</u> Business Address <u>6617 BROOKHILLS CT SE, GRAND RAPIDS, MI 49546</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/14/2026</u>	
Name & Address: ERICK HORTON 4505 WOODCREEK DR SE GRAND RAPIDS, MI 49546		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WAYSEEKER SECURITY</u> Employer <u>FOUNDER</u> Business Address <u>4505 WOODCREEK DR 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>10/15/2026</u>	
Name & Address: JAMES HUGHES 949 WEALTHY ST SE GRAND RAPIDS, MI 49506		\$ <u>10.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AV ENGINEER</u> Employer <u>TRIUMPH MUSIC ACADEMY</u> Business Address <u>949 WEALTHY 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>10/16/2026</u>	
Name & Address: THOMAS RADEMACHER 1319 WEBSTER ST NW GRAND RAPIDS, MI 49504		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>WRAP TECH</u> Employer <u>XTREME GRAPHICS</u> Business Address <u>1319 WEBSTER ST NW, GRAND RAPIDS, MI 49504</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 170.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/16/2026</u>	
Name & Address: TERRELL DANIELS 2101 SHILOH HILLS DR SE GRAND RAPIDS, MI 49546		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/17/2026</u>	
Name & Address: STACY BARE 1920 OAKCLIFF DR NE GRAND RAPIDS, MI 49525		\$ <u>10.00</u>	\$ <u>10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE DIRECTOR</u> Employer <u>FRIENDS OF GRAND RAPIDS PARKS</u> Business Address <u>1920 OAKCLIFF DR NE, GRAND RAPIDS, MI 49525</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/17/2026</u>	
Name & Address: PAUL WINSLOW 2050 EASTERN AVE NE GRAND RAPIDS, MI 49505		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2050 EASTERN 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>10/17/2026</u>	
Name & Address: JIM WINSLOW 1972 W CEDAR DR MCBAIN, MI 49657		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **155.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 2026080
2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/18/2026</u> Name & Address: IAN BOTBYL 2101 LAKE DR SE EAST GRAND RAPIDS, MI 49506		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation DIRECTOR OF PRODUCT AND SOLUTION MARKETING Employer <u>LIGHTPATH</u> Business Address <u>1111 STEWART AVE, BETHPAGE, NY 11714</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/18/2026</u> Name & Address: BOBBI KAYSER 4785 BLACK BEAR DR TRAVERSE CITY, MI 49685		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ 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 **125.00**

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

7,225.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2026080

CANDIDATE COMMITTEE

2. Committee Name AMAAD HARDY FOR SCHOOL BOARD

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEVELOPMENT DIRECTOR Employer Name & Business Address: MOSAIC COUNSELING 1705 S DESPELDER ST, GRAND HAVEN, MI 49417 ☐ 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>WEBHOSTING</u> 5. Date Of Receipt: <u>08/01/2026</u> 6. Vendor Name & Address: ACTBLUE PO BOX 962017, BOSTON, MA 02196	\$ <u>10.89</u>	\$ <u>35.89</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEVELOPMENT DIRECTOR Employer Name & Address: MOSAIC COUNSELING 1705 S DESPELDER ST, GRAND HAVEN, MI 49417 ☐ 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>WEBHOSTING</u> 5. Date Of Receipt: <u>09/01/2026</u> 6. Vendor Name & Address: ACTBLUE PO BOX 962017, BOSTON, MA 02196	\$ <u>40.00</u>	\$ <u>75.89</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: RICHARD WILLIAMSON 1213 CALGARY ST NE GRAND RAPIDS, MI 49505 If over \$100.00 cumulative, please provide: Occupation: DEVELOPMENT DIRECTOR Employer Name & Address: MOSAIC COUNSELING 1705 S DESPELDER ST, GRAND HAVEN, MI 49417 ☐ 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>WEBHOSTING</u> 5. Date Of Receipt: <u>10/01/2026</u> 6. Vendor Name & Address: ACTBLUE PO BOX 962017, BOSTON, MA 02196	\$ <u>40.00</u>	\$ <u>115.89</u>

Page Subtotal

90.89

115.89

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

90.89

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **2026080**
2. Committee Name **AMAAD HARDY FOR SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUE Address PO BOX 962017 BOSTON, MA 02196 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/01/2026 Date	\$ 3.09
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/01/2026 Date	\$ 5.66
Expenditure #3 Name THE ORIGINAL PRINT SHOP Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: YARDSIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/21/2026 Date	\$ 768.31
Expenditure #4 Name MEIJER Address 1540 28TH ST SE GRAND RAPIDS, MI 49508 ☒ Fund Raiser	Purpose: EVENT SUPPLIES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/31/2026 Date	\$ 20.84
Expenditure #5 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/01/2026 Date	\$ 110.43

Subtotal this page **908.33**

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 **2026080**
2. Committee Name **AMAAD HARDY FOR SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUE Address PO BOX 962017 BOSTON, MA 02196 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/01/2026 Date	\$ 63.41
Expenditure #2 Name MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE Address 606 TOWNSEND ST LANSING, MI 48933 ☐ Fund Raiser	Purpose: CONTRIBUTION ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/10/2026 Date	\$ 75.00
Expenditure #3 Name THE ORIGINAL PRINT SHOP Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: YARDSIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/18/2026 Date	\$ 768.31
Expenditure #4 Name PHOTOGRAPHY Address 2 FULTON ST W GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: ISABEL MEDIA STUDIO ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/21/2026 Date	\$ 225.00
Expenditure #5 Name ACE HARDWARE Address 1234 MICHIGAN ST NE GRAND RAPIDS, MI 49503 ☐ Fund Raiser	Purpose: YARDSIGN STAKES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/2026 Date	\$ 42.29

Subtotal this page

1,174.01

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 **2026080**
2. Committee Name **AMAAD HARDY FOR SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOP Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: LITERATURE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/23/2026 Date	\$ 180.20
Expenditure #2 Name META Address 1 HACKER WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/29/2026 Date	\$ 11.99
Expenditure #3 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2026 Date	\$ 25.51
Expenditure #4 Name ACTBLUE Address PO BOX 962017 BOSTON, MA 02196 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/01/2026 Date	\$ 14.12
Expenditure #5 Name THE ORIGINAL PRINT SHOP Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: LITERATURE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/05/2026 Date	\$ 180.20

Subtotal this page

412.02

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 **2026080**
2. Committee Name **AMAAD HARDY FOR SCHOOL BOARD**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE ORIGINAL PRINT SHOP Address 270 S TELEGRAPH RD PONTIAC, MI 48341 ☐ Fund Raiser	Purpose: YARDSIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/11/2026 Date	\$ 386.37
Expenditure #2 Name CAMPAIGN VERIFY Address 1215 31ST ST NW WASHINGTON, DC 20007 ☐ Fund Raiser	Purpose: SOFTWARE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/13/2026 Date	\$ 95.00
Expenditure #3 Name LOWES Address 3330 28TH ST SE KENTWOOD, MI 49512 ☐ Fund Raiser	Purpose: YARDSIGN STAKES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/14/2026 Date	\$ 16.92
Expenditure #4 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/18/2026 Date	\$ 45.99
Expenditure #5 Name ACTBLUE Address PO BOX 962017 BOSTON, MA 02196 ☐ Fund Raiser	Purpose: FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/18/2026 Date	\$ 27.76

Subtotal this page	572.04
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3,066.40

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number **2026080**
2. Committee Name **AMAAD HARDY FOR SCHOOL BOARD**

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 08/31/2026	4. Number of Individuals Attending or Participating (whichever is greater) 23	5. Type of Fund Raising Activity MEET & GREET	6. Address and Name (If any) of the place where the activity was held. GLASS HOUSE 710 MICHIGAN ST NE GRAND RAPIDS, MI 49503 ☐ Private Residence
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7. Total Contributions **1,440.00**
8. Other Receipts **0.00**
9. Gross Receipts (Add lines 7 and 8) **1,440.00**
10. Total Cost of Event **20.84**
(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.