



SEP 03 2015

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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: 7.20.15 to 8.24.15

1. Committee I.D. Number
129001

2. Committee Name
Rosalynn Bliss for Mayor

4. Candidate Last Name Bliss First Name Rosalynn M.I. C

4a. Office Sought Including District # or Community Served (If applicable)
Mayor - City of Grand Rapids

4b. County of Residence Kent

5. Committee's Mailing Address
21 Holmdene Blvd
Grand Rapids, MI 49503

Area Code and Phone 1616889-1977

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
Amy Snow
1783 Plateau Dr.
Wyoming, MI 49519

Area Code & Phone 1616 500-1655

7. Treasurer's Business Address
7041 Riverwood Ln
Grand Rapids, MI
49546

Area Code and Phone 1616500/1655

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
Amy Snow
1783 Plateau Dr
Wyoming, MI 49519

Area Code and Phone 1616500-1655

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
Aug. 4, 2015

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 Amy Snow Signature [Signature] Date 9-1-15

Candidate Rosalynn Bliss Signature [Signature] Date 9-3-2015



1. Committee I.D. Number 129001

2. Committee Name Rosalynn Bliss for Mayor

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>27,850.73</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ _____	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>27,850.73</u>	(20.) \$ <u>120,235.73</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>2,171</u>	(21.) \$ <u>7,046</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>11,408</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>11,408</u>	(23.) \$ <u>59,896.84</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>43,896.16</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>27,850.73</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>71,746.89</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>11,408</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>60,338.89</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 Name & Address: <u>Rachel Hood-Petroelje</u> <u>28 Guild NE</u> <u>Grand Rapids MI 49505</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Grand Rapids Police Officers Labor Council PAC</u> <u>4228 Glen Hollow Drive</u> <u>Hudsonville MI 49426</u>	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	\$ <u>500</u> \$ <u>3,000</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Jenny Lyan</u> <u>3446 Devon Drive NE</u> <u>Grand Rapids MI 49546</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Thea Hauge</u> <u>354 Benjamin Ave. SE</u> <u>Grand Rapids MI 49506</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$595
~~1000~~

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

Enter this total on

108 22



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES Name & Address: ✓ Kathleen Ley-Bruinsma 1748 Alexander SE Grand Rapids MI 49506 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7-29-15</u>	\$ <u>\$50</u>	<u> </u>
Click Here for Memo Itemization			
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES Name & Address: ✓ Don Lee 306 Hampton Ave. SE Grand Rapids MI 49506 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7-29-15</u>	\$ <u>\$50</u>	<u> </u>
Click Here for Memo Itemization			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES Name & Address: ✓ Christine Helms-Maletic 701 Atwood NE Grand Rapids MI 49503 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7-29-15</u>	\$ <u>\$50</u>	<u> </u>
Click Here for Memo Itemization			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES Name & Address: ✓ Kay Courtney 231 Paris Ave SE Grand Rapids MI 49503 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7-29-15</u>	\$ <u>\$25</u>	<u>15.5</u>
Click Here for Memo Itemization			

Page Subtotal

\$175

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

Enter this total on _____

20822



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Sharon Pitts</u> <u>516 Fountain St #5</u> <u>Grand Rapids MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Linda Glaser</u> <u>7673 Silverthorne Drive SE</u> <u>Ada MI 49301</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Dale Robertson</u> <u>3370 Brookpoint Drive SE</u> <u>Grand Rapids MI 49546</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>GR Public Museum</u> Business Address <u>272 Pearl St GR, MI 49504</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$50</u>	\$ <u>150</u> Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Sandra Frost Steensma</u> <u>P.O. Box 1849</u> <u>Mackinac Island MI 49757</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$100</u>	\$ _____ Click Here for Memo Itemization

Page Subtotal \$250

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Friends of Phil Skaggs</u> <u>2615 Hall St. SE</u> <u>Grand Rapids MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>StellaFly Social Media LLC - LAURA</u> <u>2756 Abigail St. SE</u> <u>Grand Rapids MI 49506</u> <u>CAPRANA</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Melissa Gorman</u> <u>1339 Myrtle St. NW</u> <u>Grand Rapids MI 49504</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Jon Connor</u> <u>1229 Sprucewood Ave. NW</u> <u>Grand Rapids MI 49504</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal

\$250

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Mercedes Toohy</u> <u>211 Bristol Ave. NW</u> <u>Grand Rapids MI 49504</u>		\$ <u>\$25</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Mark Dykstra</u> <u>62 College Ave. NE</u> <u>Grand Rapids MI 49503</u>		\$ <u>\$50</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Robert William</u> <u>1241 Thomas SE</u> <u>Grand Rapids MI 49506</u>		\$ <u>\$30</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Paul Asselin</u> <u>332 Morris Ave. SE</u> <u>Grand Rapids MI 49503</u>		\$ <u>\$50</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$155

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Jeanne Elders DeWaard</u> <u>4522 Whiteoak Farms Drive NE</u> <u>Grand Rapids MI 49525</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>\$50</u></p>	<p>\$ _____</p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Elizabeth Welch</u> <u>955 Cambridge SE</u> <u>Grand Rapids MI 49506</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Wich Law</u> Business Address <u>166 Louis Campau, GR, Mich. 49503</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p>	<p>\$ <u>350</u></p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Kim McLaughlin</u> <u>2172 Watermark</u> <u>Grand Rapids MI 49546</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p>	<p>\$ _____</p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Sarah Matias</u> <u>141 Auburn Ave SE</u> <u>Grand Rapids MI 49506</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>25</u></p>	<p>\$ _____</p> <p>Click Here for Memo Itemization</p>

Page Subtotal

\$275

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

Enter this total on

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Andrew DeBraber</u> <u>1675 Country Club Drive NE</u> <u>Grand Rapids MI 49505</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>25</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ _____</p>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>James Miller</u> <u>1245 Wineleaf Lane</u> <u>Dewitt MI 48820</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ _____</p>
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Steve Faber</u> <u>105 Newberry St. NE</u> <u>Grand Rapids MI 49503</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ _____</p>
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Claire Johnston</u> <u>2891 Court Drive</u> <u>Lowell MI 49331</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ _____</p>

Page Subtotal \$225

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

Enter this total on _____

708 22



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Dianne Byrum</u> <u>4933 Bellevue Road</u> <u>Onondaga MI 49264</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Russell Kavalhuna</u> <u>1400 Dewberry Court NE</u> <u>Grand Rapids MI 49505</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Assist. US Attorney</u> Employer <u>US Dept. of Justice</u> Business Address <u>110 Michigan St GR, MI 49503</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Donna Allen</u> <u>1153 Madison Ave. SE</u> <u>Grand Rapids MI 49507</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Ronald Koehler</u> <u>122 Forest Hill Ave. SE</u> <u>Grand Rapids MI 49546</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization

Page Subtotal

\$400

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 Name & Address: <u>Agnes Kempker Cloud</u> <u>43 Oswego St. NW</u> <u>Grand Rapids MI 49504</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Lambert Zuidervart</u> <u>322 Morris Ave. SE</u> <u>Grand Rapids MI 49503</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Stephen Wooden</u> <u>1310 Westview Ave., Apt. 242B</u> <u>East Lansing MI 48823</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Manuel Lara</u> <u>1521 Benjamin Ave. NE</u> <u>Grand Rapids MI 49505</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization	

Page Subtotal

\$ 200

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

Enter this total on

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 Name & Address: <u>Christopher Glass</u> <u>645 Kellogg St. SE</u> <u>Grand Rapids MI 49503</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u>	\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Noreen Myers</u> <u>1019 E. Main St.</u> <u>Lowell MI 49331</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u>	\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Myers Attorney at Law</u> Business Address <u>1019 E. Main St Lowell, MI 49331</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Committee to Elect Ruth Kelly</u> <u>940 Monroe Ave. NW, Apt. 219</u> <u>Grand Rapids MI 49503</u>	PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt _____	\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Carrie Helmholdt</u> <u>3016 Lehigh Trail</u> <u>Senison MI 49428</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u>	\$ <u>80</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 280

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Johnny Brann</u> <u>5561 Highbury Drive SE</u> <u>Ada MI 49301</u>		\$ <u>200</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Brann's Restaurant</u> Business Address <u>401 Leonard St NW GR, MI 49504</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Jack Hoffman</u> <u>247 Morris Ave. SE</u> <u>Grand Rapids MI 49503</u>		\$ <u>100</u>	\$ <u>700 -</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kuiper Cortebeke PC</u> Business Address <u>180 Monroe Ave NW, Suite 400, GR, MI 49503</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>Marcia Warner</u> <u>1444 Johnston St. SE</u> <u>Grand Rapids MI 49507</u>		\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-29-15</u>	
Name & Address: <u>William Kirk</u> <u>235 S. Division Ave. Apt. 112</u> <u>Grand Rapids MI 49503</u>		\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$400

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Jeffrey Hill</u> <u>3611 Arbor Chase Court NE</u> <u>Grand Rapids MI 49525</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Grace Johnson</u> <u>1460 Page St. NE</u> <u>Grand Rapids MI 49505</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>George Heartwell</u> <u>440 Fulton St. E. Apt. 1</u> <u>Grand Rapids MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Bridget Cheney</u> <u>P.O. Box 286</u> <u>Hastings MI 49058</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ _____ Click Here for Memo Itemization

Page Subtotal

\$250

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>David Lubbers and Elizabeth Miele</u> <u>700 Giddings Ave. SE</u> <u>Grand Rapids MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$25</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Mark Miller</u> <u>566 Morris Ave. SE</u> <u>Grand Rapids MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Architect</u> Employer <u>Acerveld</u> Business Address <u>217 Grandville Ave GR, MI 49503</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$100</u>	\$ <u>150</u> Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>John D. Loeks III</u> <u>449 Edgemere Drive SE</u> <u>East Grand Rapids MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$100</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7-29-15</u> Name & Address: <u>Edgar Kettle - Public Affairs Counsel</u> <u>2015 Tremont Blvd. NW</u> <u>Grand Rapids MI 49504</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>\$50</u>	\$ _____ Click Here for Memo Itemization

Page Subtotal \$275

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

Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

129001

2. Committee Name

Rosalyn Biss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>7.20.15</u>
Name & Address: <u>David Levitt</u> <u>855 Plymouth Ave SE</u> <u>Grand Rapids, MI</u>		\$ <u>500</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal</u> Employer <u>Third Coast</u>		Click Here for Memo Itemization	
Business Address <u>168 Louis Campau GR, Mich 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>7.20.15</u>
Name & Address: <u>Carol Paire McGovern</u> <u>2445 Hall St SE</u> <u>Grand Rapids, MI</u>		\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Kent Schools Network</u>		Click Here for Memo Itemization	
Business Address <u>790 Fuller Ave NE GR, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>7.20.15</u>
Name & Address: <u>Max Benedict</u> <u>1838 Forest Lake Dr SE</u> <u>Grand Rapids, MI</u>		\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal</u> Employer <u>Third Coast</u>		Click Here for Memo Itemization	
Business Address <u>168 Louis Campau, GR, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>7.20.15</u>
Name & Address: <u>Hal Ostrow</u> <u>144 Baynton Ave NE</u> <u>Grand Rapids, MI</u>		\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Ostrow Law Firm</u>		Click Here for Memo Itemization	
Business Address <u>168 Louis Campau, GR, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

1351

Grand Total of All Schedules 1A
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Enter this total on

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Roselyn Bliss for Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.20.15</u>	
Name & Address: <u>Candace Elisevich</u> <u>9106 Twin Oak Ln</u> <u>Ada, MI 49301</u>		\$ <u>100</u>	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.20.15</u>	
Name & Address: <u>Louis Glazer</u> <u>3035 Whisperwood Dr Apt 349</u> <u>Ann Arbor, MI 48105</u>		\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.20.15</u>	
Name & Address: <u>Brad Roseley</u> <u>5739 Preservation Ct NE</u> <u>Ada, MI 49301</u>		\$ <u>500</u>	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Principal</u> Employer <u>Third Coast</u>			
Business Address <u>168 Louis Campau GR, MI 49503</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.21.15</u>	
Name & Address: <u>James Knapp</u> <u>100 Mayfair Dr</u> <u>GR, MI 49503</u>		\$ <u>25</u>	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 675

Grand Total of All Schedules 1A
(Complete on last page of Schedule) Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 13900
2. Committee Name Rosalyn Bliss for Mayor

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7.21.15

Name & Address: Gary Anderson
3630 Beechtree Ln
Okemos, MI 48864

6. Amount \$ 25 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 7.22.15

Name & Address: Peter Beukema
7550 Ransom St
Zeeland, MI 49464

6. Amount \$ 250.01 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Partner Employer Suburban Inns

Business Address 6407 Valencia Dr Rockford, MI 49341

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7.22.15

Name & Address: TJ Appel
7307 Davis Dr NE
Rockford, MI 49341

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7.22.15

Name & Address: Adrian Casal
1040 Roxburg Ave
E. Lansing, MI 48823

6. Amount \$ 250 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Govt Affairs Specialist Employer Muchmore, Harrington & Smalley

Business Address 124 W. Allegan Lansing, MI 48933

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 625.01

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

Enter this total on

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 Name & Address: <u>Annie Funke</u> <u>2026 N. Rockwell Apt 2FF</u> <u>Chicago, IL 60647</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7.22.15</u>	\$ <u>70</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Helen Lehman</u> <u>3895 Bell Lake Dr</u> <u>Ada, MI 49301</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7.22.15</u>	\$ <u>50</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Carl Erickson</u> <u>334 Briarwood SE</u> <u>Grand Rapids, MI 49506</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7.24.15</u>	\$ <u>1000</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Atomic Object</u> Business Address <u>941 Wealthy St GR, MI 49506</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Brian Benkema</u> <u>10550 Belding Rd NE</u> <u>Rockford, MI</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7.24.15</u>	\$ <u>250</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Suburban Inns</u> Business Address <u>6407 Valencia Dr Rockford, MI 49341</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1320

Grand Total of All Schedules 1A
(Complete on last page of Schedule) _____
Enter this total on _____

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001

2. Committee Name Rosa Gutierrez for Mayor

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 7.24.15

Name & Address: Ryan Schmidt
436 Roswood Ave SE
GR, MI 49506

\$ 50 \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 7.25.15

Name & Address: Tina Dumling
31 Prospect Ave SE
GR, MI 49503

\$ 100 \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7.25.15

Name & Address: Ron Lichtenstein
1456 Lake Dr SE
GR, MI 49506

\$ 50 \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7.25.15

Name & Address: Math Vicari
2541 Annchester Dr SE
GR, MI 49506

\$ 200 \$ _____

5. If over \$100.00 cumulative, please provide:

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Occupation Attorney Employer Miller Johnson

Business Address 250 Monroe Ave NW GR, MI 49503

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

400

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

1. Committee I.D. Number 129001
2. Committee Name Rosalyn Bin for Mayor

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 Name & Address: <u>Keith St. Clair</u> <u>105 CAMPAN LIE NW</u> <u>GR, MI 49503</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.25.15</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Joel Kamstra</u> <u>1050 Calvin Ave SE</u> <u>GR, MI 49506</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.27.15</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Carla Blinkhorn</u> <u>13457 Green St</u> <u>Grand Haven, MI 49417</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.28.15</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Walt Gutowski</u> <u>20607 Westwinde</u> <u>GR, MI 49504</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7.31.15</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>SWA Printing</u> Business Address <u>404 Bridge St GR, MI 49504</u>		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 1250
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on

19 of 22



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8.19.15
Name & Address: Committee to Elect Rosalynn Bliss
PO Box 3055
GR, MI 49503

6. Amount \$ 16,349.72 \$ _____
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt _____
Name & Address _____

6. Amount \$ _____ \$ _____
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt _____
Name & Address _____

6. Amount \$ _____ \$ _____
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt _____
Name & Address _____

6. Amount \$ _____ \$ _____
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 16,349.72

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

27,850.73

Enter this total on _____

220222



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>Practical Political</u> Address <u>920 Washington Ave</u> <u>Lansing, MI 48906</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>consulting</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p>\$ <u>1099.50</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #2</p> <p>Name <u>USPS</u> Address <u>255 Michigan St</u> <u>GR, MI 49503</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Stamps</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p>\$ <u>98.-</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #3</p> <p>Name <u>Bigby Coffee</u> Address <u>365 Fuller Ave NE</u> <u>GR, MI 49503</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>COFFEE</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p>\$ <u>82.52</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #4</p> <p>Name <u>Costco</u> Address <u>5100 28th St</u> <u>Grand Rapids, MI</u> <u>49512</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Supplies</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p>\$ <u>197.23</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #5</p> <p>Name <u>USPS</u> Address <u>255 Michigan St</u> <u>GR, MI 49503</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>STAMPS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/16/15</u> Date</p>	<p>\$ <u>245</u></p> <p>Click Here for Memo Itemization Type</p>

Subtotal this page 1702.25

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

Enter this total
on line 8a of



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>July 29, 2015</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>62</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. <u>Wendy Falb</u> <u>350 Cherry St</u> <u>Grand Rapids, MI</u> <input type="checkbox"/> Private Residence
--	---	--	--

7. Total Contributions 3730

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event 521
(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.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: John Green 563 Belvedere GR, MI 49506 If over \$100.00 cumulative, please provide: Occupation: Co-owner Employer Name & Business Address: Founders 235 Grandville GR, MI 49503 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>refreshments</u> 5. Date Of Receipt: <u>8/18/15</u> 6. Vendor Name & Address: _____ Click Here for Memo Itemization	\$ <u>1650</u> \$ _____	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Wendy Falb 350 Cherry St GR, MI 49503 If over \$100.00 cumulative, please provide: Occupation: Executive Director Employer Name & Address: Literacy Center 1120 Monroe GR, MI 49503 <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>refreshments</u> 5. Date Of Receipt: <u>7/26/15</u> 6. Vendor Name & Address: _____ Click Here for Memo Itemization	\$ <u>521</u> \$ _____	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: _____ Click Here for Memo Itemization	\$ _____ \$ _____	

Page Subtotal **2171**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **2171**

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 129006
2. Committee Name Rosalba Bein for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Klaas Kwast</u> Address <u>4150 Grand River</u> <u>GR, MI 49525</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/19/15</u> Date	<u>\$ 117.33</u>
Expenditure #2 Name <u>Paypal</u> Address <u>www.paypal.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>paypal fees</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/20/15</u> Date	<u>\$ 66.29</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 183.62
 Grand Total of all Schedules 1B
 (Complete on last page of Schedule) 11,408

Enter this total on line 8a of



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 129001
2. Committee Name Rosalyn Bliss for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Sicilianos</u> Address <u>2840 Lake Michigan</u> <u>GR, MI 49504</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>gift</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 100-</u>
Expenditure #2 Name <u>D&D Printing</u> Address <u>342 Market Ave SE</u> <u>GR, MI 49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 296.80</u>
Expenditure #3 Name <u>East Hills</u> Address <u>131 Eastern Ave SE</u> <u>GR, MI 49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/11/15</u> Date	<u>\$ 100-</u>
Expenditure #4 Name <u>Art of the Table</u> Address <u>606 Wealthy St SE</u> <u>GR, MI 49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Refreshments</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/14/15</u> Date	<u>\$ 535.08</u>
Expenditure #5 Name <u>Founders</u> Address <u>935 Grandville Ave</u> <u>Grand Rapids, MI</u> <u>49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Refreshments</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/18/15</u> Date	<u>\$ 300</u>

Subtotal this page 1351.88

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

Enter this total
on line 8a of



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 129001
2. Committee Name Rosalyn Bliss for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>AP and Company</u> Address <u>510 College GR, MI 49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultant</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 1000-</u>
Expenditure #2 Name <u>Revere Consulting</u> Address <u>1000 Innes St GR, MI 49503</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consultant</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 250-</u>
Expenditure #3 Name <u>KCI</u> Address <u>3901 East Paris Ave GR, MI 49512</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 5004.18</u>
Expenditure #4 Name <u>Jeff Winston</u> Address <u>1525 Forrest Avenue GR, MI 49505</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 184.28</u>
Expenditure #5 Name <u>Facebook</u> Address <u>www.facebook.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/8/15</u> Date	<u>\$ 206.96</u>

Subtotal this page 6695.42

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

Enter this total on line 8a of



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>LARO CULTURAL</u></p> <p>Address <u>3923 28th St SE</u> <u>GR, MI 49512</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Ad</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/4/15</u> Date</p>	<p><u>\$ 335</u></p>
<p>Expenditure #2</p> <p>Name <u>Meijer</u></p> <p>Address <u>1997 E. Beltline</u> <u>GR, MI 49505</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Supplies</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/3/15</u> Date</p>	<p><u>\$ 54.83</u></p>
<p>Expenditure #3</p> <p>Name <u>Paypal</u></p> <p>Address <u>www.paypal.com</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>e-giving</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p><u>\$ 30-</u></p>
<p>Expenditure #4</p> <p>Name <u>Constant Contact</u></p> <p>Address <u>www.constantcontact.com</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>e-communication</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p><u>\$ 35-</u></p>
<p>Expenditure #5</p> <p>Name <u>WYGR</u></p> <p>Address <u>PO Box 9591</u> <u>Wyoming, MI 49509</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Radio Ads</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/1/15</u> Date</p>	<p><u>\$ 1000</u></p>

Subtotal this page

1454.83

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

Enter this total on line 8a of



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalynn Bliss for Mayor

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 8.4.15
Name & Address: Jonathan Rocks
73 W Walton Ave, Suite A
Muskegon, MI 49440 \$ 500 \$ _____
5. If over \$100.00 cumulative, please provide:
Occupation President Employer Parkland Properties Click Here for Memo Itemization
Business Address 940 Monroe GR, MI 49503
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/5/15
Name & Address: Dick Gritter
3841 Pemberton Dr SE
GR, MI 49508 \$ 50 \$ _____
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 8.4.15
Name & Address: Nathaniel Moody
2222 Rolling Hills Dr SE
GR, MI 49546 \$ 100 \$ _____
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8.4.15
Name & Address: Mark Huizenga
3841 Butterworth St SW
Walker, MI 49891 \$ 200 \$ _____
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Mayor Employer Walker
Business Address 3841 Butterworth St Walker, MI 49534
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

650
~~00000000~~
Enter this total on

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

210822



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129001
2. Committee Name Rosalyn Buss for Mayor

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8.1.15

Name & Address: Jaray Brower
1436 Wilcox Park Dr SE
GR, MI 49506

6. Amount \$ 50 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 200

5. If over \$100.00 cumulative, please provide: Occupation Consultant Employer Brower Consulting [Click Here for Memo Itemization](#)

Business Address 1436 Wilcox Park Dr GR, MI 49506

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 8.1.15

Name & Address: Anne Rothwell
3005 E. Fulton St
GR, MI 49506

6. Amount \$ 100 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ [Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 8.1.15

Name & Address: Diana Sieger
2101 Lamberton Creek Ln NE
GR, MI 49505

6. Amount \$ 150 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation President Employer GR Community Foundation [Click Here for Memo Itemization](#)

Business Address 185 OAKES ST GR, MI 49823

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8.4.15

Name & Address: Sidney Jansma
1 Riverfront Plaza
GR, MI 49503

6. Amount \$ 1000 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation President Employer Wolverine [Click Here for Memo Itemization](#)

Business Address 55 Campau Ave NW GR, MI 49503

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 1300
Grand Total of All Schedules 1A (Complete on last page of Schedule) _____
Enter this total on _____

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