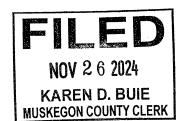


MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

BALLOT QUESTION COMMITTEE COVER PAGE



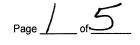
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.		3.This Statement covers From: <u>07/21/24</u> To <u>10/20/24</u>			
1. Committee I.D. Number 84291			4. Committee's Mailing Address 354 W Muskegon Ave, Muskegon, MI 49440		
2. Committee Name Muskegon Partnership for	Reasonable Limits		Area Code and Phone: (231) 215-8952 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.		
5. Treasurer's Name and Residential John Richard Allen 354 W Muskegon Ave Muskegon, MI 49440					
Area Code and Phone (231) 215-8 6. Treasurer's Business Address 354 W Muskegon Ave Muskegon, MI 49440	3952	Kristin 2262 F	esignated Record Keeper's Name and M the committee has a Designated Record e McDermott Harding Ave egon, MI 49441	lailing Address d Keeper)	
Area Code and Phone (231) 215-89	952	Area	Code and Phone (989) 292-9489		
8. TYPE OF STATEMENT: 8a. PRE- ELECTION OR POST- ELECTION Pre-Election or Post-Election Statement relates to: PRIMARY GENERAL SCHOOL SPECIAL OTHER: Date of Election: 11/05/25	8b. FEBRUARY STATEMENT APRIL STATEMENT JULY STATEMENT OCTOBER STATEMENT 8c. ANNUAL STATEMEN (Coverage Year)	г	8d: Post Petition Sample Filing under MCL 168.483a (Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition) 8e. AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)	8f. DISSOLUTION OF COMMITTEE REQUEST Effective Date of Dissolution By checking this item, I certify that the committee has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.	
Schedules. Direct contributions, in-kii If any of the information listed in items amendment to the Statement of Orga or before the filing deadline of a reconstruction. I certify that all reasonal my knowledge and belief the content of Current Treasurer or Designated Record Keeper	nd contributions, loans, exper s 4, 5, 6, or 7 has changed sir nization should accompany th quired campaign statement ble diligence was used in the	nditures nce the i nis Cam , that ca prepara	Campaign Statements. The Campaign S and outstanding debts count against the information was shown on the committee paign Statement. If a request for a Repaign Statement can not be waived tion of this statement and attached sche	a \$1,000 Reporting Waiver threshold. 2's Statement of Organization, an corting Waiver is not received on	



1. Committee I. D. Number 84291
2. Committee Name Muskegon Partnership for Reasonable Limits

3. Name and Address from whom received	4. Type of In-Kind Contribution (Check applicable box)	7. Amount or Fair	8. Cumulative
If contribution is from an individual, please enter last name first.	Date of Receipt Name & Address of Vendor from whom goods or services were purchased	Market Value	for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address:	4. Loan endorsement or guarantee		
West Michigan Dock & Market	Goods Donated or loaned Services Donated	t c	
560 Mart Street	Goods or Services Purchased by Others		
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	ູ 45.96	_s 45.96
If over \$100.00 cumulative, please provide:	Description petition clipboards	Ψ	
Occupation	5. DATE OF RECEIPT: 08/10/24		
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mization
	Amazon		
	440 Terry Ave N		
l	Seattle, WA 98109		
Fund Raiser			
Contribution #2 Name & Address:	4. Loan endorsement or guarantee		
West Michigan Dock & Market	Goods Donated or loaned Services Donated	I	
560 Mart Street	Goods or Services Purchased by Others		
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	312.00	257.06
If over \$100.00 cumulative, please provide:	Description paid signature gathering	_{\$} 312.00	_{\$} 357.96
Occupation	5. DATE OF RECEIPT: 08/19/24		
Employer Name & Address:		Click Here for Memo Ite	emization
Zimproyer realises.	6. VENDOR NAME & ADDRESS:		
	Mia Wilson		
<u> </u>	2280 Jerome		
Fund Raiser	Muskegon, MI 49442		
Contribution #3	Loan endorsement or guarantee		
Name & Address:	Goods Donated or loaned Services Donated	t	
West Michigan Dock & Market 560 Mart Street	Goods or Services Purchased by Others		
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	50.00	
If over \$100.00 cumulative, please provide:	Description paid signature gathering	_{\$} 50.00	_{\$} 407.96
Occupation ,			
·	5. DATE OF RECEIPT: 08/19/24	Click Here for Memo Ite	emization
Employer Name & Address:	6. VENDOR NAME & ADDRESS:		
	Gregory J Cooke, Jr.		
	922 Moulton Ave		
Fund Raiser	North Muskegon, MI 49445		
	Page Subtotal	\$407.96	
	Grand Total of all Schedules 4-IK		
	(Complete on last page of Schedule	LE .	





1. Committee I. D. Number 84291
2. Committee Name

Name and Address from whom received	4. Type of In-Kind Contribution (Check applicable box)	7. Amount or Fair	8. Cumulative
If contribution is from an individual, please enter last name first.	Date of Receipt Name & Address of Vendor from whom goods or services were purchased	Market Value	for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address:	4. Loan endorsement or guarantee		
West Michigan Dock & Market	Goods Donated or loaned Services Donated		
560 Mart Street	✓ Goods or Services Purchased by Others	400	400
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	_{\$_} 100	_{\$} 100
If over \$100.00 cumulative, please provide:	Description paid signature gathering		
Occupation	5. DATE OF RECEIPT: 08/19/24	Click Here for Memo Iter	nization
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Silok Here for Memo iter	mzation
	Ashley Cooke		
	922 Moulton Ave		
Fund Raiser	North Muskegon, MI 49445		
Contribution #2 Name & Address:	4. Loan endorsement or guarantee		
West Michigan Dock & Market	Goods Donated or loaned Services Donated		
560 Mart Street	✓ Goods or Services Purchased by Others		
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	_s 156.00	256.00
If over \$100.00 cumulative, please provide:	Description paid signature gathering	\$_130.00	_{\$} 256.00
Occupation	08/19/24	Oliale I Iawa fan Manaa Ma	
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mization
	Hunter Colella 1649 Lawnel Avenue		:
Cond Daines	Muskegon, MI 49441		
Fund Raiser			
Contribution #3 Name & Address:	4. Loan endorsement or guarantee		
West Michigan Dock & Market	Goods Donated or loaned Services Donated		
560 Mart Street	✓ Goods or Services Purchased by Others		
Muskegon, MI 49440	Goods or Services Purchased by Others - LOAN	_s 1740.00	_s 1996.00
If over \$100.00 cumulative, please provide:	Description paid signature gathering	\$ 1740.00	\$ 1330.00
Occupation	5. DATE OF RECEIPT: 08/27/24		
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mization
	Molly Shepherd		
	2261 Morton Ave		
Fund Raiser	Muskegon, MI 49441		
	Page Subtotal	\$1,996.00	

Enter this total on line 6a of Summary Page

Grand Total of all Schedules 4-IK (Complete on last page of Schedule)

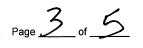
Page <u>2</u> of <u>5</u>



1. Committee I. D. Number 84291
2. Committee Name Muskegon Partnership for Reasonable Limits

Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description paid signature gathering	_{\$_} 846.00	_{\$} 846.00
Occupation Employer Name & Address:	6. VENDOR NAME & ADDRESS: John Allen 354 W Muskegon Ave	Click Here for Memo Iter	nization
Fund Raiser	Muskegon, MI 49440		
Contribution #2 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN ☐ Description paid signature gathering 5. DATE OF RECEIPT: 08/27/24 6. VENDOR NAME & ADDRESS: ☐ John C Allen ☐ 354 W Muskegon Ave ☐ Muskegon, MI 49440	\$_750.00 Click Here for Memo Ite	\$1596.00
Contribution #3 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description legal services 5. DATE OF RECEIPT: 08/30/24 6. VENDOR NAME & ADDRESS: Curcio Law Firm 16905 Birchview Dr Nunica, MI 49448	\$ 392.17 Click Here for Memo Ite	_{\$} 1988.17 mization
	Page Subtotal	\$1,988.17	

Grand Total of all Schedules 4-IK (Complete on last page of Schedule)





. Committee I. D. Nu	mber 84291	
Committee Name	Muskegon Partnership for Reasonable Limits	

Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated ✓ Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Voter registration list	_{\$} 25.00	_{\$} 25.00
Employer Name & Address:	5. DATE OF RECEIPT: 09/05/24 6. VENDOR NAME & ADDRESS: City of Muskegon 933 Terrace Street Muskegon, MI 49440	Click Here for Memo Itel	mization
Contribution #2 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. □Loan endorsement or guarantee □Goods Donated or loaned □ Services Donated ▼Goods or Services Purchased by Others □Goods or Services Purchased by Others - LOAN □BOODS Purchased by Others - LOAN □BOODS Purchased by Others - LOAN	\$_112.00	\$137.00 mization
Contribution #3 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. □Loan endorsement or guarantee □Goods Donated or loaned □ Services Donated □Goods or Services Purchased by Others □Goods or Services Purchased by Others - LOAN □Description office supplies 5. DATE OF RECEIPT: 09/20/24 6. VENDOR NAME & ADDRESS: Amazon 440 Terry Ave N Seattle, WA 98109	\$ 45.96 Click Here for Memo Ite	§ 182.96 mization
	Page Subtotal	\$182.96	

Grand Total of all Schedules 4-IK (Complete on last page of Schedule)

Employer Name & Addre
Fund Raiser
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Page of 5
- ugo or



1. Committee I. D. Number 84291			
2. Committee Name	Muskegon Partnership for Reasonable Limits		

		1	
Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: West Michigan Dock & Market 560 Mart Street	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated ✓ Goods or Services Purchased by Others	i	,
Muskegon, MI 49440 If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Others - LOAN Description paid signature gathering	_{\$_} 256.00	_{\$} 256.00
Occupation Employer Name & Address:	5. DATE OF RECEIPT: 09/25/24 6. VENDOR NAME & ADDRESS:	Click Here for Memo Itel	mization
Fund Raiser	Karan Bond 1880 5th St Muskegon, MI 49441		
Contribution #2 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. □Loan endorsement or guarantee □Goods Donated or loaned □ Services Donated □Goods or Services Purchased by Others □Goods or Services Purchased by Others - LOAN □Description paid signature gathering 5. DATE OF RECEIPT: 09/25/24 6. VENDOR NAME & ADDRESS: □Goods or Services Purchased by Others - LOAN □Description paid signature gathering	\$_1720.00 Click Here for Memo Ite	_{\$} 1976.00
Fund Raiser	Ethan Robillard 1880 5th St Muskegon, MI 49441		
Contribution #3 Name & Address: West Michigan Dock & Market 560 Mart Street Muskegon, MI 49440 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description paid signature gathering 5. DATE OF RECEIPT: 10/07/24 6. VENDOR NAME & ADDRESS:	\$ 352.00 Click Here for Memo Ite	\$ 2328.00 mization
Fund Raiser	Patsy Petty 1131 Allen Ave Muskegon, MI 49442		

Grand Total of all Schedules 4-IK (Complete on last page of Schedule)

Page Subtotal \$2,328.00 \$6,903.09





SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 84291

2. Committee Name Muskegon Partnership for Reasonable Limit

	2. Committee Name Muskegon Partr	nmittee Name Muskegon Partnership for Reasonable Limit		
RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle		
Contributions a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) <u>\$</u>	,,,,,		
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE			
c. Subtotal of Contributions	(3c.) \$	(18.) \$		
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	(19.) \$		
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$	(20.) \$ _0.00		
IN-KIND CONTRIBUTIONS				
In-Kind Contributions a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ 6,903.09			
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE			
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ 6,903.09	(21.) \$ _6,903.09		
EXPENDITURES				
8. Expenditures				
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$			
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$			
 c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7) 	(8c.) \$			
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$			
e. Subtotal of Expenditures	(8e.) \$	(22.) \$		
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	(23.) \$		
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	(24.) \$		
IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$	(25.) \$		
DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 4E)	(12a.)\$			
b. Owed to the Committee (Schedule 4E)	(12b.) \$			
BALANCE STATEMENT				
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 0.00	·		
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + 0.00			
15. SUBTOTAL Add lines 13 and 14	(15.) = 0.00			
 Amount expended during reporting period (Line 10, Column I, Total Expenditures) 	(16.) - 0.00			
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 0.00	*		

^{*}If your ending balance is negative, please recheck your math.

