



FILED

25 JUL 2025 PM 03:31

WASHTENAW COUNTY CLERK
ANN ARBOR, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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

3. This Statement covers From: 11/26/2024 to 07/20/2025

1. Committee I.D. Number

C-2022-112

4. Candidate Last Name First Name M.I.

DYER ALYSHIA M

2. Committee Name

FRIENDS OF ALYSHIA DYER

4a. Office Sought Including District # or Community Served (If applicable)

SHERIFF, WASHTENAW COUNTY

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

5. Committee's Mailing Address

**1606 S HURON STREET
PO BOX972326
YPSILANTI, MI 48197**

Area Code and Phone (734) 395-4581
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

**RYAN YAPLE
1007 E SUMMERFIELD GLEN CIRCLE
ANN ARBOR, MI 48103**

Area Code & Phone (810) 623-5342

7. Treasurer's Business Address

**1007 E SUMMERFIELD GLEN CIRCLE
ANN ARBOR, MI 48103**

Area Code and Phone (810) 623-5342

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

**CHRISTOPHER CAMPBELL
4101 ALBEMARIE ST. NW APR. 605
WASHINGTON, DC 20016**

Area Code and Phone (714) 351-0485

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

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

- ☒ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement (2025)
Coverage Year

9d. ☐ Amendment to Campaign Statement
(Complete Item 9a, 9b , 9c or 9e to indicate which Statement is being amended.)

Date of Election, Convention or Caucus

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 lates fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I\We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my\our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/25/2025

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/25/2025



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2022-112

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name FRIENDS OF ALYSHIA DYER

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|---|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>19,358.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>19,358.00</u> | (18.) \$ <u>19,358.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>0.00</u> | (19.) \$ <u>0.00</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>19,358.00</u> | (20.) \$ <u>19,358.00</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>0.00</u> | (21.) \$ <u>0.00</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ <u>0.00</u> | (22.) \$ <u>0.00</u> |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>11,357.57</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ <u>0.00</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ <u>0.00</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ <u>11,357.57</u> | (23.) \$ <u>11,357.57</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| 10. Disbursements | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ <u>0.00</u> | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ <u>0.00</u> | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ <u>0.00</u> | (24.) \$ <u>0.00</u> |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ <u>0.00</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ <u>0.00</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>4,340.28</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>19,358.00</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ <u>23,698.28</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>11,357.57</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>12,340.71</u> | * |



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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) |
|--|--|--------------------|---|
| <p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/26/2024</u></p> <p>Name & Address: AHMAD CHAMMOUT 8651 AUTUMN CT CANTON, MI 48187</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS OWNER</u> Employer <u>CHAMA INC</u> Business Address <u>8651 AUTUMN CT, CANTON, MI 48187</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | \$ <u>3,000.00</u> | \$ <u>3,000.00</u> |
| <p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/27/2024</u></p> <p>Name & Address: CATHERINE CAMMANN 2008 CRESTLAND DR ANN ARBOR, MI 48104</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>2008 CRESTLAND DR, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | \$ <u>200.00</u> | \$ <u>300.00</u> |
| <p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/27/2024</u></p> <p>Name & Address: VICTOR LIU 8314 N WARWICK CT YPSILANTI, MI 48198</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>8314 N WARWICK CT, YPSILANI, MI 48198</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p> | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| <p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/27/2024</u></p> <p>Name & Address: VICTORIA BURTON-HARRIS 1848 HARLEY DR ANN ARBOR, MI 48103</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>WASHTENAW COUNTY</u> Business Address <u>1848 HARLEY DR, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p> | | \$ <u>100.00</u> | \$ <u>100.00</u> |

Page Subtotal 3,350.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>11/27/2024</u> | |
| Name & Address: TONI KAYUMI 5851 LIMA CENTER RD MANCHESTER, MI 48158 | | \$ <u>25.00</u> | \$ <u>25.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT AND CEO</u> Employer <u>ANN ARBOR YMCA</u> Business Address <u>400 W WASHINGTON ST, ANN ARBOR, MI 48103</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>12/01/2024</u> | |
| Name & Address: KATHERINE GRISWOLD 3565 FOX HUNT DR ANN ARBOR, MI 48105 | | \$ <u>27.00</u> | \$ <u>27.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3565 FOX HUNT DR, ANN ARBOR, MI 48105</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>12/02/2024</u> | |
| Name & Address: DICK CHASE 3538 TERHUNE RD ANN ARBOR, MI 48104 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3538 TERHUNE RD, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" 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>12/02/2024</u> | |
| Name & Address: JUSTIN HODGE 1606 HURON ST 970491 YPSILANTI, MI 48197 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>UNIVERSITY OF MICHIGAN</u> Business Address <u>500 S STATE ST, ANN ARBOR, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | |

Page Subtotal 202.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>12/03/2024</u> | |
| Name & Address: <u>CYNTHIA HARRISON</u> <u>2251 WOODHAVEN CT</u> <u>ANN ARBOR, MI 48105</u> | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>SELF EMPLOYED</u> Business Address <u>2251 WOODHAVEN CT, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" 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>12/03/2024</u> | |
| Name & Address: <u>JOE CROVA</u> <u>11609 LEHIGH CT</u> <u>PLYMOUTH, MI 48170</u> | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>COURT OFFICER</u> Employer <u>34TH DISTRICT COURT</u> Business Address <u>11129 WAYNE RD, ROMULUS, MI 48174</u> Type of Contribution: <input checked="" 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>12/06/2024</u> | |
| Name & Address: <u>KEVIN O'BRIEN</u> <u>5656 BIG PINE DR</u> <u>YPSILANTI, MI 48197</u> | | \$ <u>10.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>5656 BIG PINE DR, YPSILANTI, MI 48197</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>12/06/2024</u> | |
| Name & Address: <u>TAD WYSOR</u> <u>610 N MIAMI AVE</u> <u>YPSILANTI, MI 48198</u> | | \$ <u>7.00</u> | \$ <u>34.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal 117.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>12/07/2024</u> | |
| Name & Address: JAMES WALTER 4049 SPRING LAKE BLVD ANN ARBOR, MI 48108 | | \$ <u>5,000.00</u> | \$ <u>5,000.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>4049 SPRING LAKE BLVD, ANN ARBOR, MI 48108</u> Type of Contribution: <input checked="" 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>12/07/2024</u> | |
| Name & Address: M-PACE 3801 W BOULEVARD DR FLINT, MI 48505 | | \$ <u>150.00</u> | \$ <u>150.00</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 checked="" type="checkbox"/> Fund Raiser | | | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>12/11/2024</u> | |
| Name & Address: TAMARA MERGES 4531 SONGBIRD SPRINGS ANN ARBOR, MI 48103 | | \$ <u>27.00</u> | \$ <u>54.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>4531 SONGBIRD SPRINGS, ANN ARBOR, MI 48103</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>12/14/2024</u> | |
| Name & Address: MORGAN MAJORITY FUND 124 N CAPITOL AVE LANSING, MI 48933 | | \$ <u>100.00</u> | \$ <u>100.00</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 checked="" type="checkbox"/> Fund Raiser | | | |

Page Subtotal **5,277.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>12/14/2024</u> | |
| Name & Address: JOHN BOYLE 3285 MILLER RD ANN ARBOR, MI 48103 | | \$ <u>500.00</u> | \$ <u>500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>J.L. BOYLE INTERNATIONAL</u> Business Address <u>3285 MILLER RD, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | |
| 3. Contribution #2 | PAC Receipt? <input checked="" type="checkbox"/> YES | 4. Date of Receipt <u>12/14/2024</u> | |
| Name & Address: CARRIE CARES ABOUT MICHIGAN 2860 GLADSTONE AVE ANN ARBOR, MI 48104 | | \$ <u>250.00</u> | \$ <u>250.00</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 checked="" type="checkbox"/> Fund Raiser | | | |
| 3. Contribution # 3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>12/16/2024</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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 checked="" type="checkbox"/> YES | 4. Date of Receipt <u>12/21/2024</u> | |
| Name & Address: LIUNA 3080 PLATT RD ANN ARBOR, MI 48108 | | \$ <u>5,500.00</u> | \$ <u>5,500.00</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 | | | |

Page Subtotal **6,260.00**

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

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**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number C-2022-112
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| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---|--------------------------------------|---|
| 3. Contribution # 1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>01/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>41.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</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>01/16/2025</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>30.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>02/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>48.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</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>02/16/2025</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>40.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal **34.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>02/16/2025</u> | |
| Name & Address: DONNA EYSTER 7586 ABIGAIL DR YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>10.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>7586 ABIGAIL DR, YPSILANTI, MI 48198</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>03/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>58.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</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>03/16/2025</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>04/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>65.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal **37.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>04/11/2025</u> Name & Address: MATTHEW HARSHBERGER 2142 SPRING RIDGE DR ANN ARBOR, MI 48103 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>POLICE OFFICER</u> Employer <u>WASHTENAW COUNTY</u> Business Address <u>2201 HOGBACK RD, ANN ARBOR, MI 48105</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>04/11/2025</u> Name & Address: RAED ISAA 341 E HURON ST ANN ARBOR, MI 48104 | | \$ <u>500.00</u> | \$ <u>500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>SELF EMPLOYED</u> Employer <u>ISSA PROPERTIES</u> Business Address <u>341 E HURON ST, ANN ARBOR, MI 48104</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>04/16/2025</u> Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>60.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>04/27/2025</u> Name & Address: BRIANNA DUNT 2280 E MICHIGAN AVE YPSILANTI, MI 48198 | | \$ <u>1,000.00</u> | \$ <u>1,000.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ACCOUNTANT</u> Employer <u>AAA PARTS LLC</u> Business Address <u>2280 E MICHIGAN AVE, SUPERIOR TWP, MI 48198</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal

1,760.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>04/30/2025</u> | |
| Name & Address: ELI SAVIT 4993 HIDDEN BROOK CT ANN ARBOR, MI 48105 | | \$ <u>200.00</u> | \$ <u>700.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>PROSECUTING ATTORNEY</u> Employer <u>WASHTENAW COUNTY</u> Business Address <u>200 N MAIN ST, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" 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>04/30/2025</u> | |
| Name & Address: JASON MORGAN 1755 BRIAN CT ANN ARBOR, MI 48104 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>STATE REPRESENTATIVE</u> Employer <u>HOUSE OF REPRESENTATIVES</u> Business Address <u>PO BOX 30014, LANSING, MI 48909</u> Type of Contribution: <input checked="" 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>05/01/2025</u> | |
| Name & Address: CYNTHIA A BODEWES 14108 E AUSTIN RD MANCHESTER, MI 48158 | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>14108 E AUSTIN RD, MANCHESTER, MI 48158</u> 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>05/01/2025</u> | |
| Name & Address: ROBERT BURTON-HARRIS 500 GRISWOLD ST DETROIT, MI 48226 | | \$ <u>500.00</u> | \$ <u>500.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>BURTON-HARRIS LAW PLC</u> Business Address <u>500 GRISWOLD ST, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | |

Page Subtotal 800.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>05/01/2025</u> | |
| Name & Address: DOUG SCOTT 1525 HARDING RD ANN ARBOR, MI 48104 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1525 HARDING RD, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" 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>05/02/2025</u> | |
| Name & Address: JIMMIE WILSON 7110 WELLINGTON LN YPSILANTI, MI 48197 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>GOVERNMENT</u> Employer <u>MICHIGAN HOUSE OF REPRESENTATIVES</u> Business Address <u>124 N CAPITOL AVE, LANSING, MI 48933</u> Type of Contribution: <input checked="" 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>05/03/2025</u> | |
| Name & Address: ROBBEN SCHULZ 573 DELLWOOD DR ANN ARBOR, MI 48103 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>SELF</u> Employer <u>SELF</u> Business Address <u>573 DELLWOOD DR, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" 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>05/03/2025</u> | |
| Name & Address: DALE HARRISON 2251 WOODHAVEN CT ANN ARBOR, MI 48105 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>VP & SR. STAFF ENGINEER</u> Employer <u>COMERICA BANK</u> Business Address <u>3701 HAMLIN RD, ROCHESTER, MI 48309</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | |

Page Subtotal 700.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>05/03/2025</u> | |
| Name & Address: DALE BLANCHARD 1475 WARRINGTON DR ANN ARBOR, MI 48103 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>BLANCHARD & WALKER PLLC</u> Business Address <u>221 N MAIN ST, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" 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>05/03/2025</u> | |
| Name & Address: ALEX THOMAS 1108 BUICK AVENUE YPSILANTI, MI 48198 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ASSISTANT</u> Employer <u>WCSO</u> Business Address <u>2201 HOGBACK RD, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" 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>05/03/2025</u> | |
| Name & Address: SANDRA SMITH 1760 36TH ST SW WYOMING, MI 49519 | | \$ <u>20.00</u> | \$ <u>20.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1760 36TH ST SW, WYOMING, MI 49519</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>05/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>72.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal 227.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>05/08/2025</u> | |
| Name & Address: CHERYL SIBILSKY 839 BRUCE ST ANN ARBOR, MI 48103 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>839 BRUCE ST, ANN ARBOR, MI 48103</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>05/16/2025</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>70.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>06/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>79.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</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>06/10/2025</u> | |
| Name & Address: NICOLE FREI 513 4TH ST ANN ARBOR, MI 48103 | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN</u> Employer <u>TRINITY HEALTH</u> Business Address <u>513 4TH ST, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal **167.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| 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>06/11/2025</u> | |
| Name & Address: ARTHUR MEISSNER SILVER MAPLES DR CHELSEA, MI 48118 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1113 SILVER MAPLES DRIVE, CHELSEA, MI 48118</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>06/16/2025</u> | |
| Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>80.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>07/03/2025</u> | |
| Name & Address: MARK WINE 3468 RICHARD ST ANN ARBOR, MI 48104 | | \$ <u>50.00</u> | \$ <u>50.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>OPUS IVS</u> Business Address <u>7322 NEWMAN BLVD, DEXTER, MI 48130</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>07/06/2025</u> | |
| Name & Address: TAD WYSOR 610 N MIAMI AVE YPSILANTI, MI 48198 | | \$ <u>7.00</u> | \$ <u>86.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>U.S. ENVIRONMENTAL PROTECTION AGENCY</u> Business Address <u>2000 TRAVERWOOD DR, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | |

Page Subtotal **117.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-112
2. Committee Name FRIENDS OF ALYSHIA DYER

| | | | |
|---|--|------------------|---|
| <small>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.</small> | | 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>07/07/2025</u> Name & Address: EDWARD STEINMAN 621 5TH ST ANN ARBOR, MI 48103 | | \$ <u>250.00</u> | \$ <u>250.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>621 5TH ST, ANN ARBOR, MI 48103</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>07/16/2025</u> Name & Address: LEIGH GLAZER 1448 E CLARK RD YPSILANTI, MI 48198 | | \$ <u>10.00</u> | \$ <u>90.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>CUSTOMS BROKER</u> Employer <u>THYSSENKRUPP</u> Business Address <u>1448 E CLARK RD, YPSILANTI, MI 48198</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>07/20/2025</u> Name & Address: ALEX THOMAS 1108 BUICK AVENUE YPSILANTI, MI 48198 | | \$ <u>50.00</u> | \$ <u>150.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>ASSISTANT</u> Employer <u>WCSO</u> Business Address <u>2201 HOGBACK RD, ANN ARBOR, MI 48105</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 _____ Name & Address: _____ | | \$ _____ | \$ _____ |
| 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 type="checkbox"/> Fund Raiser | | | |

Page Subtotal **310.00**

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

19,358.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **C-2022-112**
2. Committee Name **FRIENDS OF ALYSHIA DYER**

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|--|---------------------------|--------------------|
| Expenditure #1 Name WIX.COM Address 500 TERRY A FRANCOIS BLVD FLOOR 6 SAN FRANCISCO, CA 94158 <input type="checkbox"/> Fund Raiser | Purpose: WEBSITE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 11/26/2024 Date | \$ 34.00 |
| Expenditure #2 Name CANVA Address 3212 E CESAR CHAVEZ ST AUSTIN, TX 78702 <input type="checkbox"/> Fund Raiser | Purpose: SOFTWARE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 11/26/2024 Date | \$ 29.49 |
| Expenditure #3 Name WIX.COM Address 500 TERRY A FRANCOIS BLVD FLOOR 6 SAN FRANCISCO, CA 94158 <input type="checkbox"/> Fund Raiser | Purpose: WEBSITE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/02/2024 Date | \$ 144.00 |
| Expenditure #4 Name JAMAL BUFFORD Address 9629 LAKESIDE DR YPSILANTI, MI 48197 <input checked="" type="checkbox"/> Fund Raiser | Purpose: DJ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/18/2024 Date | \$ 250.00 |
| Expenditure #5 Name ELIZABETH GUYTON Address 1246 KENSINGTON DR ANN ARBOR, MI 48104 <input checked="" type="checkbox"/> Fund Raiser | Purpose: EVENT SERVICES <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/18/2024 Date | \$ 1,318.91 |

Subtotal this page

1,776.40

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **C-2022-112**
2. Committee Name **FRIENDS OF ALYSHIA DYER**

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|--|---------------------------|--------------------|
| Expenditure #1 Name YOUTUBE Address 901 CHERRY AVE SAN BRUNO, CA 94066 <input type="checkbox"/> Fund Raiser | Purpose: SOFTWARE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/24/2024 Date | \$ 13.99 |
| Expenditure #2 Name WIX.COM Address 500 TERRY A FRANCOIS BLVD FLOOR 6 SAN FRANCISCO, CA 94158 <input type="checkbox"/> Fund Raiser | Purpose: SOFTWARE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/26/2024 Date | \$ 34.00 |
| Expenditure #3 Name CANVA Address 3212 E CESAR CHAVEZ ST AUSTIN, TX 78702 <input type="checkbox"/> Fund Raiser | Purpose: SOFTWARE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/26/2024 Date | \$ 29.49 |
| Expenditure #4 Name SLYNUMBER Address 4 FANEUIL HALL SQ BOSTON, MA 02109 <input type="checkbox"/> Fund Raiser | Purpose: SOFTWARE <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 12/26/2024 Date | \$ 8.99 |
| Expenditure #5 Name WASHTENAW COMMUNITY COLLEGE Address 4800 E HURON RIVER DR ANN ARBOR, MI 48105 <input checked="" type="checkbox"/> Fund Raiser | Purpose: CATERING <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | 01/16/2025 Date | \$ 7,494.70 |

Subtotal this page **7,581.17**

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number **C-2022-112**
2. Committee Name **FRIENDS OF ALYSHIA DYER**

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---------------------------|--------------------|
| Expenditure #1 Name RYAN YAPLE Address 1007 E SUMMERFIELD GLEN CIR ANN ARBOR, MI 48103 <input type="checkbox"/> Fund Raiser | Purpose: <u>EVENT DEPOSIT - POLO FIELDS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>06/30/2025</u> Date | \$ <u>1,000.00</u> |
| Expenditure #2 Name RYAN YAPLE Address 1007 E SUMMERFIELD GLEN CIR ANN ARBOR, MI 48103 <input type="checkbox"/> Fund Raiser | Purpose: <u>EVENT DEPOSIT - POLO FIELDS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>07/01/2025</u> Date | \$ <u>1,000.00</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 **2,000.00**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **11,357.57**

Enter this total
on line 8a of
Summary Page