MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
24 JUL 2026 PM 04:43
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: 01/15/2026 to 07/19/2026

1. Committee I.D. Number
C-2026-003

2. Committee Name
FRIENDS OF AIDAN SOVA

4. Candidate Last Name: SOVA First Name: AIDAN M.I.: M

4a. Office Sought Including District # or Community Served (If applicable)
COUNCIL MEMBER, WARD 4, ANN ARBOR

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

5. Committee's Mailing Address

2773 PAGE AVE
ANN ARBOR, MI 48104

Area Code and Phone (734) 730-4986
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

ENA R SOVA
2773 PAGE AVE
ANN ARBOR, MI 48104

Area Code & Phone (517) 455-3183

7. Treasurer's Business Address

2773 PAGE AVE
ANN ARBOR, MI 48104

Area Code and Phone (517) 455-3183

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

Area Code and Phone () -

9. **TYPE OF STATEMENT**

9a. ☒ Pre-Election **OR** 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☒ Primary
- ☐ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus
08/04/2026

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

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (.) Coverage Year

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

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper _____ / _____ Submitted electronically, signature on file Date 07/24/2026
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date 07/24/2026
Type or Print Name Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2026-003

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name FRIENDS OF AIDAN SOVA

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	55,021.81	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	55,021.81	(18.) $ 55,021.81
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	55,021.81	(20.) $ 55,021.81
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	826.44	(21.) $ 826.44
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0.00	(22.) $ 0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	40,930.13	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	40,930.13	(23.) $ 40,930.13
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0.00	(24.) $ 0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	0.00	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	0.00
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	55,021.81
15. SUBTOTAL Add lines 13 and 14	(15.) = $	55,021.81
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	40,930.13
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	14,091.68 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
AIDAN SOVA
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation REGIONAL PRODUCT LEAD Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
JAMES FIELDS
2539 PRAIRIE ST
ANN ARBOR, MI 48105

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
ADAM GOODMAN
400 VIRGINIA AVE
ANN ARBOR, MI 48103

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
BRANDON DIMCHEFF
1401 HARPST ST
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

Page Subtotal 1,530.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
SCOTT TRUDEAU
526 N MAIN ST
ANN ARBOR, MI 48104

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation CHIEF TECHNOLOGY OFFICER Employer LISTINGS PROJECT LLC

Business Address 526 N MAIN ST, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
GUARAV KULKARNI
139 ASHLEY MEWS DR
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer ASHBY

Business Address 139 ASHLEY MEWS DR, ANN ARBOR, MI 48104

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
JOHN IVANCICH
2529 TOWNER BLVD
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 600.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
MEREDITH KAHN
817 POMONA RD
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
ADAM JASKIEWICZ
1430 LAS VEGAS DR
ANN ARBOR, MI 48103

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
MARK SCERBO
2017 FAIR ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address
KEVIN NWOGU
1441 PEACHTREE ST NE
ATLANTA, GA 30309

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 420.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2026

Name & Address:
CALLIE COOPER
2597 LAKE ISLE LN
BROOMFIELD, CO 80023

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LAURA HOUK
2025 YEOMAN CT
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SARAH HENRY
4610 N DOVER ST
CHICAGO, IL 60640

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 180.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ALANA MCLAIN
123 DEVONSHIRE ST
YPSILANTI, MI 48198

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
JACOB KLIPSTEIN
9 PEMBROOK DR
YONKERS, NY 10710

$ 25.00 | $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ALEXIE MILUKHIN
237 S COTTAGE ST
POTTERVILLE, MI 48876

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
RUBY SCHNEIDER
900 N EVERY RD
MASON, MI 48854

$ 1.00 | $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 176.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
GINNY ROGERS
1332 WHITE ST
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
TRAVIS RADINA
2060 CHAMPAGNE DR
ANN ARBOR, MI 48108

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JACK DULWORTH
2355 MAPLE DR
JACKSON, MI 49203

$ 67.00 $ 67.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
STACEY LAROUCHE
320 FILLEY ST
LANSING, MI 48906

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 317.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ANNIE SOMERVILLE
40 E CROSS ST
YPSILANTI, MI 48198

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ANGELA WEBER
7308 OLDENBURG LN
PORTAGE, MI 49024

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JAMIE VANDERBROEK
625 BARBER AVE
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
NEIL OZA
259 GROSSE PINES DR
ROCHESTER HILLS, MI 48309

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 135.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JAMES LEIJA
1236 ARDMOOR AVE
ANN ARBOR, MI 48103

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
DANIEL ADAMS
1016 DANIEL ST
ANN ARBOR, MI 48103

$ 500.00 | $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer GENERAL MOTORS

Business Address 1016 DANIEL ST, ANN ARBOR, MI 48103

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
LETICIA ALBARRAN
608 N STATE ST
JACKSON, MI 49202

$ 20.00 | $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ANNE SULLIVAN
1375 BARDSTOWN TRAIL
ANN ARBOR, MI 48105

$ 1,225.00 | $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

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Page Subtotal 1,795.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
SANDRA SMITH
909 CAMINITO MADRIGAL
CARLSBAD, CA 92011

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
MAX TOLL
7120 GLENDALE PL
JACKSON, MI 49201

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
STEPHANIE WHITE
2115 WINCHELL DR
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LEIGH GREDEN
2860 GLADSTONE AVE
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

Page Subtotal 370.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JIMMIE WILSON JR
7110 WELLINGTON LN
YPSILANTI, MI 48197

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LAWRENCE WORKS
1328 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JUDAH GARBER
1508 GRANGER AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SARAH LEWIS
1999 CORONADA DR
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 260.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
SOFIA PAULO
MULHOLLEN DR
MONROE, MI 48161

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LIAM HEANEY
12460 SCIO CHURCH RD
CHELSEA, MI 48118

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
THOMAS SARABOK
1337 JEFFERSON AVE
APT 3
BUSHWICK, NY 11221

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
EVAN PRATT
1626 HARBAL DR
ANN ARBOR, MI 48105

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

Page Subtotal 375.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JOSEPH ANDERSON
4434 AVOCADO ST
LOS ANGELES, CA 90027

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
EWURAMA APPIAGYEI-DANKAH
25 CARLTON AVE SE
GRAND RAPIDS, MI 49506

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JUSTIN HODGE
1606 HURON ST
YPSILANTI, MI 48197

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer UNIVERSITY OF MICHIGAN

Business Address 500 S STATE ST, ANN ARBOR, MI 48109

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
JOSH WINSLOW
1939 LINDSAY LN
ANN ARBOR, MI 48104

$ 15.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 365.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
PAUL SCHULTZ
1785 ADDINGTON LN
ANN ARBOR, MI 48108

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
YOGEV BEN-YITSCHAK
8916 N IROQUOIS RD
BAYSIDE, WI 53217

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
DAN ALPERT
11041 CEDARWOOD DR
ROCKVILLE, MD 20852

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LOTTIE FERGUSON
3482 TAMARACK TRAIL
MT MORRIS, MI 48458

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 210.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
GREGORY MATTHEWS
1208 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTING Employer JFM CONSULTING GROUP

Business Address 225 GRATIOT AVE, SUITE 400, DETROIT, MI 48226

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ANGELO KOPRIVICA
433 E KIRBY ST
DETROIT, MI 48202

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
NATHANIEL LAVERY
830 BROWNS LAKE RD
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ROSS SMITH
2235 E 6TH ST
AUSTIN, TX 78702

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR INFRASTRUCTURE SECURITY ENGINEER Employer TEMPORAL.IO

Business Address 1607 CHARLTON AVE, ANN ARBOR, MI 48103

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

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Page Subtotal 450.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
GARY JAMES
816 N OAKLAND ST
APT 800
ARLINGTON, VA 22203

$ 250.00 | $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation HR PROGRAM MANAGER Employer GOOGLE

Business Address 816 N OAKLAND ST, ARLINGTON, VA 22203

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
JENNY SUH
182 W LAKE ST
CHICAGO, IL 60601

$ 10.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
MICAH CONNER
200 OBSERVATORY ST
217
ANN ARBOR, MI 48109

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
JUSTIN ONWENU
321 W LAFAYETTE BLVD
DETROIT, MI 48226

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 460.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
KAYLA JOHNSON
2515 DORVIN DR
JACKSON, MI 49201

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
CECE HUDDLESTON
17344 FAIRFIELD ST
DETROIT, MI 48221

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
PRAVEENA RAMASWAMI
2831 RENFREW ST
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ELI SAVIT
4993 HIDDEN BROOK CT
ANN ARBOR, MI 48105

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 260.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
KEEGAN RUMLER
5165 W BLUESTONE ST
JACKSON, MI 49201

$67.00 | $67.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
CHRISTOPHER FERNEY
6231 N 67TH AVE
GLENDALE, AZ 85301

$10.00 | $10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JACOB GEORGOPOULOS
1104 S HIGBY ST
JACKSON, MI 49203

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
PETER HONEYMAN
113 S 4TH AVE
ANN ARBOR, MI 48104

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 277.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ISAAC REGALADO
7 SHELLEY PL
HUNTINGTON STATION, NY 11746

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
EMMA HAW
18 DEER WOODS CT
GLEN ARM, MD 21057

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
GAVIN HART
1107 EL SIERRO
SAN ANTONIO, TX 78258

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
EMMA GRACE
1040 RIVER HILLS LN
JACKSON, MI 49203

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 35.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ANGELA TWUSAMI
30 E ROOSEVELT RD
CHICAGO, IL 60605

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LAUREN LASCESKI
155 CROSSROADS LN
TROY, MI 48083

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JOSHUA BUDA
1314 OAK ST
KALAMAZOO, MI 49008

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
KELSEY CHRISTIAN
528 S KENWOOD AVE
ROYAL OAK, MI 48067

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

Page Subtotal 290.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
BUSHRA AMIWALA
7945 N KENNETH AVE
SKOKIE, IL 60076

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
KOUTAIBA MERHEB
3542 FIELDCREST LN
YPSILANTI, MI 48197

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ASHLEY HALL
2631 LILLIAN RD
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
EMILY HOYUMPA
6849 PAINT CREEK CT
SHELBY TOWNSHIP, MI 48316

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 255.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
IRENE YOUNG
2438 KINGSBURY DR
TROY, MI 48098

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
HALEY SANCHEZ-DECK
1211 W FRANKLIN ST
JACKSON, MI 49203

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
MOE MALLAH
27068 SHEAHAN DR
DEARBORN HEIGHTS, MI 48127

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
MARC MCCRAY
6377 CONIFER DR
YPSILANTI, MI 48197

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 70.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JAKE LASCESKI
1227 LAVALLE CT
ST JOHNS, MI 48879

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
HAYDEN MACFARLANE
5604 SOUTHWEST PKWY
AUSTIN, TX 78735

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
PAIGE LAUGHLIN
407 LINDA VISTA ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SAVANNAH DUBOIS
116 SAGAMORE ST
JACKSON, MI 49203

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 70.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
MITCHELL CANDREVA
626 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
VIRI PEREZ
1487 SANBORN AVE
SAN JOSE, CA 95110

$ 30.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 40.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
NICHOLAS FOSTER
6369 W MICHIGAN AVE
JACKSON, MI 49201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 115.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
LIAM RICHICHI
795 GRACE ST
NORTHVILLE, MI 48167

$ 15.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
AMANDA LOVELAND
312 S GRINNELL ST
JACKSON, MI 49203

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
MICHAEL BENEDETTO
126 TOWER DR
SALINE, MI 48176

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
GEORGIA FROST
1135 E GRAND RIVER AVE
HOWELL, MI 48843

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 80.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ROBERT GRIGGS
154 MANHASSET DR
PORT MATILDA, PA 16870

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
DOMINICK VIOLETTA
2835 ROUNDTREE BLVD
YPSILANTI, MI 48197

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
OLIVIA PAGEAU
200 N JACKSON ST
JACKSON, MI 49201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
KATHRYN O'BRIEN
501 E 87TH ST
NEW YORK, NY 10128

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 235.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
KATIE SCOTT
926 LOYOLA DR
ANN ARBOR, MI 48103

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation REGISTERED NURSE Employer UNIVERSITY OF MICHIGAN

Business Address 1500 E MEDICAL CENTER DR, ANN ARBOR, MI 48109

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
NILA PARVATHY
4612 W CATBRIER CT
JACKSONVILLE, FL 32259

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
JING XING
605 W MADISON ST
CHICAGO, IL 60661

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
CHARLES WARPEHOSKI
2020 WINEWOOD AVE
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 385.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ALISON SHEREDA
536 JACOB WAY
ROCHESTER, MI 48307

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
CALLI NICKELS
433 E KIRBY ST
DETROIT, MI 48202

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
KAI CRANMORE
1610 S WOOSTER ST
LOS ANGELES, CA 90035

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LIZZY BUTTERFIELD
2041 N MAIN ST
ROYAL OAK, MI 48073

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 120.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
BRIAN CHAMBERS
2815 EMBER WAY
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
CASSANDRA SHAMEY
708 TAYLOR ST
ANN ARBOR, MI 48105

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
SUZETTE WANNINKHOF
225 MURRAY AVE
ANN ARBOR, MI 48103

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation PRODUCT LEAD Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
ABIGAIL FREW
2817 CUMBERLAND AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ANNA TARGETT
10169 NIMPHIE RD
FENTON, MI 48430

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
MEGHAN BUTTERFIELD
2190 BRYANT ST
#209
DENVER, CO 80211

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
LILY NAZARIAN
2071 LIBERTY HEIGHTS
ANN ARBOR, MI 48103

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
MAYSA SITAR
15607 COUNTY ROAD 402
NEWBERRY, MI 49868

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 130.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
CYNTHIA HARRISON
2251 WOODHAVEN CT
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SARAH DOYLE
11622 S MONTICELLO DR
KNOXVILLE, TN 37934

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
MARIO KAKOS
5325 WINDHAM HILL CT
WEST BLOOMFIELD, MI 48323

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
LORENZO SANTAVICCA
777 W MIDDLEFIELD RD
MOUNTAIN VIEW, CA 94043

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 155.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
PATRICK ZABAWA
11715 KENTON DR
WHITMORE LAKE, MI 48189

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SIMON HERNDL
25 MORNING DOVE CT
NEWNAN, GA 30265

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
TYLER DUONG
3852 THORNCREST DR
JACKSON, MI 49203

$ 67.00 $ 67.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
DANIELLE MACKEY
3830 KIRKWOOD ST
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 187.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
EMMY WYDMAN
331 11TH ST NE
WASHINGTON, DC 20002

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
DELINA GEBREKIDAN
5329 DRUMCALLY LN
DUBLIN, OH 43017

$ 10.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ALI ALSABBAR
3073 VALENCIA CIR
ANN ARBOR, MI 48108

$ 10.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
SABRINA IVANENCO
4930 FARWELL AVE
SKOKIE, IL 60077

$ 5.00 | $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 125.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
DEENA GARDNER
29176 FOREST HILL DR
FARMINGTON HILLS, MI 48331

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address
DANIEL LESH
6 S LAFLIN ST
CHICAGO, IL 60607

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2026

Name & Address:
ALEXANDER THIBODEAU
635 PARIS AVE SE
GRAND RAPIDS, MI 49503

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
THYE FISCHMAN
8213 BAYBERRY CT
DEXTER, MI 48130

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 450.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
CASSIE HAYNES
1410 S ZEEB RD
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
ALICE LARM
11 HOMER SQUARE
SOMERVILLE, MA 02143

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

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

Name & Address:
ALICE MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation PARISH ADMINISTRATOR Employer ST. PAUL'S EPISCOPAL CHURCH

Business Address 309 S JACKSON ST, JACKSON, MI 49201

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

---

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

Name & Address
ASHRAF JABER
445 N WAVERLY ST
DEARBORN, MI 48128

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 220.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
CALEB TATE
602 HARWOOD ST
JACKSON, MI 49203

$ 67.69 $ 67.69

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
NOAH COUSINS
11 SCHOPPE DR
ORONO, ME 04473

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
MIKE ZLONKEVICZ IV
420 CHANNING ST
FERNDALE, MI 48220

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation ACCOUNT MANAGER Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

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

Name & Address
CODY CARROLL
1085 N PAULINA ST
CHICAGO, IL 60622

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 142.69

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
CELESTE KANPURWALA
1739 TIMBER TRAIL
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
BRANDON SMITH
4295 ROLLING MEADOW LN
YPSILANTI, MI 48197

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation TEACHER Employer SALINE AREA SCHOOLS

Business Address 4295 ROLLING MEADOW LN, YPSILANTI, MI 48197

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

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

Name & Address:
KAMERON HEYEN
3044 NW MARKET ST
SEATTLE, WA 98107

$ 27.00 $ 27.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
BONNIE KRUPA
6089 BROWNS LAKE RD
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 427.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
OLIVIA YORK
14332 RIVERSIDE DR
LOS ANGELES, CA 91423

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
EMILY KALISH
2833 DEAKE AVE
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
BHOOMIKA GUPTA
749 9TH ST
APT 449
DURHAM, NC 27705

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
EMILY REISCH
5514 ALBION RD
CONCORD, MI 49237

$ 19.00 $ 19.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 84.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
MICHAEL REED
6359 OAKHURST DR
YPSILANTI, MI 48197

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
AMARI SELBY
738 UNION ST
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
SHARIFA MOORE
3235 FERNWOOD AVE
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation LEGAL Employer STATE OF MICHIGAN

Business Address 301 E HURON ST, ANN ARBOR, MI 48104

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

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

Name & Address
DREW WHITE
1097 POINTE NORTH
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 120.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
ROCHELLE IGRISAN
1430 GREENVIEW DR
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
CHRIS JARVIS
2917 WARD CT
ANN ARBOR, MI 48108

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
PAYTON TURNER
18 N CARPENTER ST
CHICAGO, IL 60607

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
JENNIFER CORNELL
1402 W WASHINGTON ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 180.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
THERESA REID
3025 PROVINCIAL DR
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
BRIANNA SISLO-SCHUTTA
1240 4TH ST NE
WASHINGTON, DC 20002

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
NATHAN SPEISER
RIDGEWAY CT
DEXTER, MI 48130

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation VIDEOGRAPHER Employer SELF

Business Address 2090 RIDGEWAY CT, DEXTER, MI 48130

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

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

Name & Address
TYRONE PETTYGRUE
35483 SMITH RD
ROMULUS, MI 48174

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 145.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
BRANDON BOND
15165 PEBBLEBROOK DR
BELLEVILLE, MI 48111

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
CHELSEA DODGE
2779 PAGE AVE
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
MALVIKA VATS
1 OAKDALE AVE
MILLBURN, NJ 07041

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
LEXY PATHICKAL
1352 BUFORD DR
MORRISVILLE, PA 19067

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 70.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address:
ADAM COHN
25836 PEMBROKE RD
HUNTINGTON WOODS, MI 48070

$ 75.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/22/2026

Name & Address
MARCIA BAILEY
645 HOLLY POINT
FENTON, MI 48430

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

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

Name & Address:
RILEY SWAIN
5820 WASHBURN AVE S
MINNEAPOLIS, MN 55410

$ 3.00 $ 3.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

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

Name & Address
ROB UTTERBACK
545 S 7TH ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 228.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
KERRINGTON CURL
6109 HARKSON DR
EAST LANSING, MI 48823

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
ASHLEY FORWARD
4851 STATEN DR
JACKSON, MI 49201

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
LANCE MENARD
3980 BYRON RD
HOWELL, MI 48855

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
NOEL MILLS FORD
8594 EXCELSIOR BLVD
HOPKINS, MN 55343

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 50.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
ALETA DAMM
1794 LOCHMOOR BLVD
JACKSON, MI 49201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
LLOYD LYONS
1460 ANNUNCIATION ST
NEW ORLEANS, LA 70130

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
DEVIN WOODRUFF
18668 OHIO ST
DETROIT, MI 48221

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
DAMARIS STROKER
9450 TAHOE DR
DAYTON, OH 45458

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 90.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
ALEC DOSS
638 5TH ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
CHRISTOPHER FERNEY
6231 N 67TH AVE
265
GLENDALE, AZ 85301

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
JENNIFER BAIR
200 N JACKSON ST
107
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
EDOM MEHARI
2816 TREE SWALLOW CIR
ELK GROVE, CA 95757

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 275.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
DEXTER MASON
2900 E JEFFERSON AVE
DETROIT, MI 48207

$ 33.33 $ 33.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
TERRA MOLENGRAFF
1523 PINE VALLEY BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
MEAGAN HART-MOLLOY
1475 WESTFIELD AVE
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
TAMYRA MACFARLANE
5833 BROWNS LAKE RD
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 243.33

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
LAURA GLUHANICH
4345 VRAIN ST
DENVER, CO 80212

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/23/2026

Name & Address
ELIEL FRYDMAN
4127 VIA MARINA
MARINA DEL REY, CA 90292

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
BRANDON RIGGINS
5418 RAINWOOD MEADOWS DR
RUSKIN, FL 33572

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
LAURA O'CONNOR
220 NELSON RD
SCARSDALE, NY 10583

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 110.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
DANIEL GREENE
3900 PINEWOOD LN
HOLLYWOOD, FL 33021

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
NATHANIEL JONES
425 E JEFFERSON AVE
WHEATON, IL 60187

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
JACOB CIEPLY
1049 HASPER DR
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
ALISON ULICNY
1567 LONG MEADOW TRAIL
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 160.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
MARY JO MADDA
9901 WASHINGTON BLVD
CULVER CITY, CA 90232

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
GRACE TOLL
7120 GLENDALE PL
JACKSON, MI 49201

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
JESSICA ALEXANDER
3485 GREENLEAF RD
ANN ARBOR, MI 48105

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer EASTERN MICHIGAN UNIVERSITY

Business Address 203 BOONE, YPSILANTI, MI 48197

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
MARLIN WHITAKER
1449 MOREHEAD DR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 195.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
NICHOLAS DURRIE
1334 SHEEHAN AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
DAVID DARR
2236 RUNNYMEDE BLVD
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
CHRIS EASTHOPE
1707 DUNMORE RD
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 250.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 60.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/24/2026

Name & Address
LISA DISCH
441 HILLDALE DR
ANN ARBOR, MI 48105

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer UNIVERSITY OF MICHIGAN

Business Address 505 S STATE ST, ANN ARBOR, MI 48109

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/25/2026

Name & Address:
CAITLIN KLEIN
1516 MORTON AVE
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NURSE PRACTITIONER Employer OTP

Business Address 1516 MORTON AVE, ANN ARBOR, MI 48104

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/25/2026

Name & Address
MEGAN MAZUREK
4538 LAKE VISTA DR
DEXTER, MI 48130

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 510.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address:
TESS GARCIA
267 6TH ST
PARK SLOPE, NY 11215

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address
SOFIA URBAN
1711 DEXTER AVE
ANN ARBOR, MI 48103

$ 15.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address:
KATE SHIER
814 HOFFMAN AVE
ROYAL OAK, MI 48067

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address
LOGAN PAGE
11385 SANDHILL DR
JACKSON, MI 49201

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 45.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address:
DEVON CALLAGHAN
5651 SUTTERS LN
BLOOMFIELD HILLS, MI 48301

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2026

Name & Address
ONNA SOLOMON
621 MADISON PL
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address:
LUKE RODEHORST
827 BROOKS ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address
LACHEZAR ATANASOV
701 CHINA BASIN ST
SF, CA 94158

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 260.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address:
THOMAS HATCH
600 W JOY RD
ANN ARBOR, MI 48105

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address
KAELYN BRENNAN
4353 VALENTINE RD
WHITMORE LAKE, MI 48189

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address:
ISABELLA PARKINSON
1894 BROOKVIEW DR
SALINE, MI 48176

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address
KAELYN GLASGOW
4353 VALENTINE RD
WHITMORE LAKE, MI 48189

$ 1,125.00 $ 1,125.00

5. If over $100.00 cumulative, please provide:

Occupation SALES AND STRATEGIES Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

Page Subtotal 1,425.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/27/2026

Name & Address:
SUSAN SHINK
600 W JOY RD
ANN ARBOR, MI 48105

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation STATE SENATOR Employer STATE OF MICHIGAN

Business Address 600 W JOY RD, ANN ARBOR, MI 48105

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

---

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

Name & Address
AMY SAREEN
109 BIG TRAIL CIR
MISSOURI CITY, TX 77459

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

---

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

Name & Address:
CHRISTINE TAYLOR
2079 CASCADE WOODS DRIVE
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

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

Name & Address
DANA FAIR
5651 PINE VIEW DR
YPSILANTI, MI 48197

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING COMM Employer UNIVERSITY OF MICHIGAN

Business Address 505 S STATE ST, ANN ARBOR, MI 48109

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

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Page Subtotal 1,600.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
MOLLY KLEINMAN
1447 HARPST ST
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
PHILLIP PARK
1478 ANNENDALE CT
ANN ARBOR, MI 48108

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
STEPH PARRISH
3704 N DIXBORO RD
ANN ARBOR, MI 48105

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation PRODUCT LEAD Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
NAOMI GOLDBERG
1701 CRESTLAND DR
ANN ARBOR, MI 48104

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCHER Employer MAP

Business Address 1701 CRESTLAND DR, ANN ARBOR, MI 48104

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

Page Subtotal 950.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
STEPHANIE DANIELS
1419 IROQUOIS PL
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
KELLY GASE
21346 WHEATON LN
NOVI, MI 48375

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
IBRAHIM KAMARA
1900 AIRPORT COMMERCE DR
AUSTIN, TX 78741

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer GOOGLE

Business Address 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043

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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
STEPHEN BROWN
1907 S BLUE ISLAND AVE
CHICAGO, IL 60608

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 475.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
JEN EYER
716 BRAESIDE PL
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
IAN BISHOP
5349 MOSER LN
PERRYSBURG, OH 43551

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address:
ANTHONY DEROSA
1358 KING GEORGE BLVD
ANN ARBOR, MI 48108

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/29/2026

Name & Address
AMANDA FRANKS
1859 SPAULDING CIR
LOUISVILLE, CO 80027

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 320.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address:
JORDAN FANNIN
643 PARKSIDE CT
CHELSEA, MI 48118

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address
CRAWFORD KOEBBE
2117 GANTON DR
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address:
LIBBY JOHNSON
845 N STATE ST
CHICAGO, IL 60611

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address
JASMINE ISAAC
200 N JACKSON ST
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 90.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address:
SARAELLEN STRONGMAN
1534 WOODLAND DR
ANN ARBOR, MI 48103

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address
ASHLEY OBERHEIDE
1908 SCOTTWOOD AVE
ANN ARBOR, MI 48104

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 01/30/2026

Name & Address:
RAYAN KHALAF
3909 WOODWARD AVE
DETROIT, MI 48201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/31/2026

Name & Address
BETTY TOLL
7120 GLENDALE PL
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 1,320.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/31/2026

Name & Address:
BRETTE RAPPLEYE
525 WILDWOOD AVE
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/01/2026

Name & Address
BRET HAUTAMAKI
1110 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
JULIA DENNEN
200 K ST NE
WASHINGTON, DC 20002

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
DEVON SOVA
5900 JOYMONT ST
JACKSON, MI 49201

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 115.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

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

Name & Address:
ANFERNEE GRAY
40-04 34TH AVE
ASTORIA, NY 11101

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation COMPLIANCE MANAGER Employer DOORDASH

Business Address 40-04 34TH AVE, ASTORIA, NY 11101

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

---

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

Name & Address
ADAM SHIBLEY
2353 N SEELEY AVE
CHICAGO, IL 60647

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation STRATEGY Employer SHORE CAPITAL

Business Address 621 LIVE LIFE LN, NASHVILLE, TN 37207

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address:
ELYSE GULIFOYLE
1944 EDISON ST
DETROIT, MI 48206

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation MANAGER Employer GOOGLE

Business Address 1944 EDISON ST, DETROIT, MI 48206

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address
HANA COON
95 S 10TH ST
MINNEAPOLIS, MN 55403

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 650.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address:
DYLAN YOUSIF
1444 S BATES ST
BIRMINGHAM, MI 48009

$500.00 | $500.00

5. If over $100.00 cumulative, please provide:

Occupation PRESIDENT Employer INVEST MGMT

Business Address 1444 S BATES ST, BIRMINGHAM, MI 48009

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address
SUMAIYA AHMED
5948 SHAUN RD
WEST BLOOMFIELD, MI 48322

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address:
ANNA FRUSHOUR
5298 CROWN CT
ANN ARBOR, MI 48108

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2026

Name & Address
SRIRAMA CHATRUVEDULA
14045 APRICOT HILL
SARATOGA, CA 95070

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/04/2026

Name & Address:
AMANDA CHRISTENSEN
4507 GINGER TRAIL
TOLEDO, OH 43623

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/04/2026

Name & Address
JOHN BALL
2953 S DEARING RD
SPRING ARBOR, MI 49283

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:
JENNIFER KELLY
33052 MIDDLEBORO ST
LIVONIA, MI 48154

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
RONALD BRONSON
2030 NW RALEIGH ST
PORTLAND, OR 97209

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	245.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/06/2026

Name & Address:
LINH SONG
1290 BARDSTOWN TRAIL
ANN ARBOR, MI 48105

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address
JEFFREY OWUSU-ANSAH
1222 P ST
LINCOLN, NE 68508

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address:
ZOE SAARI
7025 ARDSLEY DR
CANTON, MI 48187

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address
NISSA DUDA
1211 W FRANKLIN ST
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

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Page Subtotal 1,475.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address:
HAYDEN MACFARLANE
5604 SOUTHWEST PKWY
AUSTIN, TX 78735

$ 25.00 $ 35.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address
MAILLE HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address:
DANIEL ROTH
200 FLORIDA AVE NE
WASHINGTON, DC 20002

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address
MARGARET WYZLIC
4758 DUNBARTON CT
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 136.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address:
WILLIAM TOCCO
3405 HATHAWAY LN
JACKSON, MI 49201

$1.00 $1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/08/2026

Name & Address
TALIA ENGELSMA
668 EUCLID AVE
CLEVELAND, OH 44114

$10.00 $10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/09/2026

Name & Address:
ROBERT BOLEY
1619 DICKEN DR
ANN ARBOR, MI 48103

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/09/2026

Name & Address
JEREMY GLICK
9913 MARKHAM ST
SILVER SPRING, MD 20901

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer MAPLE LAW GROUP PLLC

Business Address 1892 W STADIUM BLVD, ANN ARBOR, MI 48103

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

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Page Subtotal 561.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2026

Name & Address:
CHERIE GOOD
11531 RUTAN CIR
JEROME, MI 49249

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2026

Name & Address
ERIN WHITE
869 PEMBERTON LN
JACKSON, MI 49203

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2026

Name & Address:
JEAN GRALLEY
63 LAKEVIEW TERRACE
HANOVER, PA 17331

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2026

Name & Address
AZAEL DEL ROSARIO
12719 WHITNEY MEADOW WAY
RIVERVIEW, FL 33578

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 160.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2026

Name & Address:
KATE WILLIAMS
35222 CARYN ST
FARMINGTON HILLS, MI 48331

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation COMMS MANAGER Employer UNIVERSITY OF MICHIGAN

Business Address 505 S STATE ST, ANN ARBOR, MI 48109

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address
MOLLY VANDENBERG
321 MILLS RD
SALINE, MI 48176

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address:
VICTORIA LYNDE
909 WILDT ST
ANN ARBOR, MI 48103

$ 75.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address
MICHAEL HENSCH
2256 LOMBARDY ST
LONGMONT, CO 80503

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 375.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address:
KATIE MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address
DANIEL ADAMS
1016 DANIEL ST
ANN ARBOR, MI 48103

$ 725.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer GENERAL MOTORS

Business Address 1016 DANIEL ST, ANN ARBOR, MI 48103

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address:
MELISSA ADAMS
1016 DANIEL ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address
NATALIE TOBEY
4465 KENNETH DR
OKEMOS, MI 48864

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 786.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address:
AUSTIN HORNFISHER
6955 MUIRFIELD DR
UTICA, MI 48316

$ 5.00 | $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/12/2026

Name & Address
ANNA MUESING
7024 TELLER CT
ARVADA, CO 80003

$ 25.00 | $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/12/2026

Name & Address:
JODENE POIRIER
S GROVE ST
YPSILANTI, MI 48198

$ 25.00 | $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/12/2026

Name & Address
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 105.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
ALEC BRIGGS
861 ALBRIGHT DR
JACKSON, MI 49203

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
JACOB KLIPSTEIN
9 PEMBROOK DR
YONKERS, NY 10710

$ 15.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
DAISY KIELTY
520 LEXINGTON RD
CONCORD, MA 01742

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
SOPHIA BARTLETT
922 HIGH ST
MARQUETTE, MI 49855

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 35.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
JENNIFER LUONG
2417 TESTIFY CT SE
CALEDONIA, MI 49316

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
ALBERT NAZARIAN
2278 TOUCHDOWN CT
UNIT 8
YPSILANTI, MI 48197

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
JOSH COOPER
1888 E 116TH AVE
NORTHGLENN, CO 80233

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
ARIC BIRCHMIER
1349 NE 31ST ST
ANKENY, IA 50021

$ 15.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 77.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
GEORGIA FOJTASEK
5325 BROWNS LAKE RD
JACKSON, MI 49203

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
KOBE MAXWELL
521 COMMONWEALTH AVE
JACKSON, MI 49202

$ 1.00 | $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address:
ALEX PESCH
6435 W HIDDEN LAKE CIR
RICHLAND, MI 49083

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/13/2026

Name & Address
SYDNEY BOWLER
4521 SID DR
JACKSON, MI 49201

$ 25.00 | $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 176.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/14/2026

Name & Address:
JUSTIN HODGE
1606 HURON ST
YPSILANTI, MI 48197

$ 975.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer UNIVERSITY OF MICHIGAN

Business Address 500 S STATE ST, ANN ARBOR, MI 48109

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/14/2026

Name & Address
MEGAN LASCESKI
1227 LAVALLE CT
ST JOHNS, MI 48879

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/15/2026

Name & Address:
ANDREW NOTTMEIER
2190 BRYANT ST
DENVER, CO 80211

$ 75.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
DANIEL AKAH
SUNSET LAKE DR
BURNSVILLE, MN 55337

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 1,070.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address:
KENDALL BROOKS
7 M ST NE
WASHINGTON, DC 20002

$ 100.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
SHAMINA MERCHANT
56 WILLOW GATE
ROSLYN HEIGHTS, NY 11577

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address:
AARON BANKS
50 W 30TH ST
NEW YORK, NY 10001

$ 10.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
NICOLE GERHAUSER
5883 N NEVADA AVE
COLORADO SPRINGS, CO 80918

$ 10.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 170.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address:
EDWARD AGYEMAN
710 W GRAND AVE
WOODBRIDGE, VA 22191

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 5.00 $ 45.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address:
EMILY ESSER
3416 WATERFORD CT NE
GRAND RAPIDS, MI 49525

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
MONICA PIERCE
1721 LOCHMOOR BLVD
JACKSON, MI 49201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 50.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address:
MARA SMITH
3535 N RACINE AVE
CHICAGO, IL 60657

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2026

Name & Address
JT ROGAN
3447 DIVISION ST
ENUMCLAW, WA 98022

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/17/2026

Name & Address:
PATRICIA YBARRA
230 SUMMIT ST
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/17/2026

Name & Address
JOELLE FUNDARO RANDALL
515 E JEFFERSON ST
ANN ARBOR, MI 48109

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 145.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/17/2026

Name & Address:
RACHEL LAHAIE
4964 HELENE RD
MEMPHIS, TN 38117

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/17/2026

Name & Address
NICK FERRAINA
16 LORD PL
OLD SAYBROOK, CT 06475

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address:
DARIA EBLE
426 E MINGES RD
BATTLE CREEK, MI 49015

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address
MARC YOUNKER
106 TERRACE AVE
WEST ORANGE, NJ 07052

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 170.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address:
ANDRE MORRIS
1628 MOREHEAD DR
ANN ARBOR, MI 48103

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation SOLUTION CONSULTANT Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address
DEENA GARDNER
29176 FOREST HILL DR
FARMINGTON HILLS, MI 48331

$ 500.00 $ 750.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address:
NISSI NGASSA
2615 N FEDERAL BLVD
APT 2
DENVER, CO 80211

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address
JESSICA SENDRA
1511 GOLDEN AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 1,200.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2026

Name & Address:
BELL ANDRZEJUK
122 CHURCH ST
SF, CA 94114

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/19/2026

Name & Address
AVERY WALDRON
1144 LEXINGTON BLVD
JACKSON, MI 49201

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation SURGICAL ACCOUNT MANAGER Employer MEDTRONIC

Business Address 1611 MICHIGAN AVE, DETROIT, MI 48216

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/19/2026

Name & Address:
PETER ALLEN
2224 APPLEWOOD CT
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 2532 PITTSFIELD BLVD, ANN ARBOR, MI 48104

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

---

Page Subtotal 370.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address:
CHAMEKA FOWLER
3893 MAYFIELD DR
JACKSON, MI 49203

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address
SARA AGATE
1404 GROVE AVE
BERWYN, IL 60402

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address:
ALBI POPAJ
25714 BECK RD
NOVI, MI 48374

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address
ABDULAZIZ MOHAMED
360 SPRING ST
SAINT PAUL, MN 55102

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 65.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/20/2026

Name & Address:
GAUTHAM NAGESH
5330 DEER RIDGE RD
JACKSON, MI 49201

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/21/2026

Name & Address
SANDRA SMITH
909 CAMINITO MADRIGAL
CARLSBAD, CA 92011

$100.00 $150.00

5. If over $100.00 cumulative, please provide:

Occupation RISK MANAGER Employer ICW GROUP

Business Address 909 CAMINITO MADRIGAL, CARLSBAD, CA 92011

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/21/2026

Name & Address:
CECE HUDDLESTON
17344 FAIRFIELD ST
DETROIT, MI 48221

$10.00 $20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/21/2026

Name & Address
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$5.00 $10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 215.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/21/2026

Name & Address:
JOHN LEVI
509 W WELLINGTON AVE
CHICAGO, IL 60657

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/21/2026

Name & Address
CINDY LIN
660 RAMONA AVE
WOODROW, NY 10309

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
JENNIFER LAWRENCE
4411 CHAD CT
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
CINDY BANK
2000 ALICE ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 400.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
DOMINICK VIOLETTA
2835 ROUNDTREE BLVD
YPSILANTI, MI 48197

$ 50.00 $ 60.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
MICHAEL RANKIN
2775 PAGE AVE
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
STEVE ZEKANY
388 E EVELYN AVE
SUNNYVALE, CA 94086

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer GOOGLE

Business Address 388 E EVELYN AVE, SUNNYVALE, CA 94086

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
SHALANDA HUNT
738 UNION ST
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 425.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
FRANCES DAVIS
PO BOX 559
ALANSON, MI 49706

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
MARCIA BUTTERFIELD
4000 SUMMER PL
JACKSON, MI 49201

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
NATALIE PERRY
18639 STOEPEL ST
DETROIT, MI 48221

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
NOELLE VIEAU
200 CENTER DR
PINCONNING, MI 48650

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 180.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address:
HAN DUONG
2600 BAY AREA BLVD
HOUSTON, TX 77058

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/22/2026

Name & Address
ANDY LIN
7223 SHAMAN LN
HOUSTON, TX 77083

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
ALLISON LIBERTY
40317 CHATSWORTH CT
CANTON, MI 48188

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation PROGRAM MANAGER Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
NLTA SHAH
39831 JOHN DR
CANTON, MI 48187

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 261.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
GINNY ROGERS
1332 WHITE ST
ANN ARBOR, MI 48104

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
RACHEL GOLDBERG
1011 BRUCE ST
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
JOAN LOWENSTEIN
502 BURSON PL
ANN ARBOR, MI 48104

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
SHARIFA MOORE
3235 FERNWOOD AVE
ANN ARBOR, MI 48108

$ 100.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 425.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
JACK EICHNER
2502 PACKARD ST
5505
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
GRETCHEN HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
SAMBUJANG FOFANA
47875 FREEDOM VALLEY DR
MACOMB, MI 48044

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
DEVONTE COX
10091 DIXIE
REDFORD, MI 48239

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 65.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
ZACH MCKAY
825 CORBETT DR
PITTSBURGH, PA 15234

$500.00 | $500.00

5. If over $100.00 cumulative, please provide:

Occupation NAVAL OFFICER Employer US NAVY

Business Address 825 CORBETT DR, PITTSBURGH, PA 15234

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address
ANNA LAMPORT
2911 ST PAUL ST
DENVER, CO 80205

$5.00 | $5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
SAMUEL BAGENSTOS
1140 MICHIGAN AVE
ANN ARBOR, MI 48104

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
ASHLEY HALL
2631 LILLIAN RD
ANN ARBOR, MI 48104

$50.00 | $75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 605.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
JOSEPH ABBETT
123 DEVONSHIRE ST
YPSILANTI, MI 48198

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
SHANNON FOSTER
2922 MARSHALL ST
ANN ARBOR, MI 48108

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
CELESTE KANPURWALA
1739 TIMBER TRAIL
ANN ARBOR, MI 48103

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
JUDAH GARBER
1508 GRANGER AVE
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
JOSEPH MALCOUN
1516 MORTON AVE
ANN ARBOR, MI 48104

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation CEO Employer JUICE RUNNERS

Business Address 206 E HURON ST, ANN ARBOR, MI 48104

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
ANDRE MORRIS
1628 MOREHEAD DR
ANN ARBOR, MI 48103

$ 25.00 $ 525.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
ANNA HILLAKER
3421 RICHARD ST
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 70.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 560.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
STEPHANIE SYMONS
1419 IROQUOIS PL
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SALES Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address
BENJAMIN PETERS
1436 CHAPLEAU DR
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/25/2026

Name & Address:
ROSS SMITH
2235 E 6TH ST
AUSTIN, TX 78702

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/26/2026

Name & Address
JULIAN TENERIFE
4300 COLLEGIATE WAY
MT PLEASANT, MI 48858

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 405.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/02/2026

Name & Address:
LATIFA SAID
124 HWY 13 E
BURNSVILLE, MN 55337

$ 30.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/03/2026

Name & Address
JANNIFER MAINO
2600 N DETTMAN RD
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/04/2026

Name & Address:
CARLY THOMPSON
509 LONG SHR DR
APT B
ANN ARBOR, MI 48105

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/04/2026

Name & Address
NEIL OZA
259 GROSSE PINES DR
ROCHESTER HILLS, MI 48309

$ 25.00 $ 35.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 130.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/04/2026

Name & Address:
SOFIA URBAN
1711 DEXTER AVE
ANN ARBOR, MI 48103

$ 25.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2026

Name & Address
ANTHONY DEROSA
1358 KING GEORGE BLVD
ANN ARBOR, MI 48108

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/06/2026

Name & Address:
SACHYRE VAN BUREN
50119 MONROE ST
CHERRY HILL VILLAGE, MI 48188

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/07/2026

Name & Address
GAUTHAM NAGESH
5330 DEER RIDGE RD
JACKSON, MI 49201

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation WRITER Employer VISUAL CONCEPTS

Business Address 1217 N KENMORE AVE, LOS ANGELES, CA 90029

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

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Page Subtotal 225.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/07/2026

Name & Address:
WONWOO LEE
218 W OAKBROOK DR
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/08/2026

Name & Address
MIKE ZLONKEVICZ IV
420 CHANNING ST
FERNDALE, MI 48220

$ 100.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/08/2026

Name & Address:
DONDRE YOUNG
1226 GILBERT ST
FLINT, MI 48532

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/09/2026

Name & Address
ALLISON BLASNER
29792 BRIARTON ST
FARMINGTON HILLS, MI 48331

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ACCOUNT MANAGER Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

Page Subtotal 425.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/09/2026

Name & Address:
JULIE GRAND
1604 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/09/2026

Name & Address
MARIA ZUBIRI
4846 JACKSON ST
TRENTON, MI 48183

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/09/2026

Name & Address:
MARY HALL-THIAM
2755 ARROWWOOD TRAIL
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/09/2026

Name & Address
JAIME SALMONSON
1 CLINTON ST
MT SINAI, NY 11766

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 185.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/09/2026

Name & Address:
RONNIE BACON
533 AVOCET DR
EAST LANSING, MI 48823

$ 405.79 $ 405.79

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
LUCILLE KIRK-MALCOLM
1017 GOTT ST
ANN ARBOR, MI 48103

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
RICHARD BARRON
324 ROLLING MEADOWS DR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
OLIVIA PEAGEAU
200 N JACKSON ST
218
JACKSON, MI 49201

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

Page Subtotal 605.79

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
HAILEY CARAGAY
3023 WOODMANOR CT
ANN ARBOR, MI 48108

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
PAUL SCHULTZ
1785 ADDINGTON LN
ANN ARBOR, MI 48108

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
ALYSHIA DYER
220 OPFER DR
WHITMORE LAKE, MI 48189

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation SHERIFF Employer WASHTENAW COUNTY

Business Address 2201 HOGBACK RD, ANN ARBOR, MI 48105

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
ANA MOLLOSEAU
1950 W LIBERTY ST
APT 9
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 350.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
STEVEN GULICK
437 SUMARK WAY
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation IRON WORKER Employer RETIRED

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
ALICE MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
MARIA ZUBIRI
4846 JACKSON ST
TRENTON, MI 48183

$ 25.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
RICHARD BARINBAUM
2767 PAGE AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

Page Subtotal 275.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
VICTORIA LYNDE
909 WILDT ST
ANN ARBOR, MI 48103

$ 50.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
JEREMY GLICK
9913 MARKHAM ST
SILVER SPRING, MD 20901

$ 50.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
JONATHAN KLEINMAN
2570 PACKARD ST
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
KATIE LAVERY
500 S JACKSON ST
JACKSON, MI 49203

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation MIDWIFE Employer EVERYDAY BLESSINGS

Business Address 500 S JACKSON ST, JACKSON, MI 49203

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

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Page Subtotal 375.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
LISA WADDELL
3122 HAPPY VALLEY RD
JACKSON, MI 49203

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
TRAMANE HALSCH
189 CIRCLE CT
SALINE, MI 48176

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
LISA NORGREN
2890 BAYLIS DR
ANN ARBOR, MI 48108

$200.00 $200.00

5. If over $100.00 cumulative, please provide:

Occupation YOGA TEACHER Employer SELF

Business Address 2890 BAYLIS DR, ANN ARBOR, MI 48108

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
ALICE MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$25.00 $175.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 325.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
COLE MCELDOWNEY
1001 26TH ST NW
301
WASHINGTON, DC 20037

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
JOSEPH KJAR
2307 WALTER DR
ANN ARBOR, MI 48103

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation STRATEGY Employer GOOGLE

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
ANDREW LABARRE
2411 MEADOWRIDGE CT
ANN ARBOR, MI 48105

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
MARY NICHOLS
8500 CHASE LAKE RD
FOWLERVILLE, MI 48836

$200.00 $200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

Page Subtotal 750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
AIDAN MACDONELL
333 E 34TH ST
6G
NEW YORK, NY 10016

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
EVELYN MARTIN
24179 SCOTT DR
FARMINGTON HILLS, MI 48336

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
KRISTY STARK
1919 S INDUSTRIAL HWY
ANN ARBOR, MI 48104

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
DIANE KELLER
1097 POINT N
JACKSON, MI 49201

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 275.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/10/2026

Name & Address:
PATRICIA RICE REILLY
4788 N ASHFORD WAY
YPSILANTI, MI 48197

$ 25.00 | $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address
DERRICK WHITE
1097 POINT N
JACKSON, MI 49201

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/10/2026

Name & Address:
CAROLINE SANDERS
2899 FOSTER AVE
ANN ARBOR, MI 48108

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2026

Name & Address
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 175.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/13/2026

Name & Address:
CARRIE RHEINGANS
2557 MILLER AVE
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/13/2026

Name & Address
COMMITTEE TO ELECT CARRIE RHEINGANS
2557 MILLER AVE
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/15/2026

Name & Address:
JONATHAN OBERHEIDE
1908 SCOTTWOOD AVE
ANN ARBOR, MI 48104

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation SELF EMPLOYED Employer SELF

Business Address 1908 SCOTTWOOD AVE, ANN ARBOR, MI 48104

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/18/2026

Name & Address
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 4.00 $ 49.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 1,429.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/19/2026

Name & Address:
CHAITANYA KARVE
502 E C??SAR E. CH??VEZ AVE
LANSING, MI 48906

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/19/2026

Name & Address
DEMETRIKE WELLS-O'BRIEN
1485 SCIO RDG CT
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/20/2026

Name & Address:
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 2532 PITTSFIELD BLVD, ANN ARBOR, MI 48104

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/20/2026

Name & Address
COTY DISALLE
6600 W 26TH AVE
EDGEWATER, CO 80214

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 350.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/21/2026

Name & Address:
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/21/2026

Name & Address
NICOLE HAMP
2205 MELROSE RD
ANN ARBOR, MI 48104

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation CHIEF HEALTH OFFICER Employer AUTISM ALLIANCE

Business Address 2000 BRUSH ST, DETROIT, MI 48226

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/21/2026

Name & Address:
KIFF HAMP
2205 MELROSE RD
ANN ARBOR, MI 48104

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation EXECUTIVE DIRECTOR Employer HURON WATERLOO PATHWAYS INITIATIVE

Business Address 339 E LIBERTY ST, ANN ARBOR, MI 48104

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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/23/2026

Name & Address
GRETCHEN HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 10.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 2,240.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 03/24/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 80.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/03/2026

Name & Address
JANNIFER MAINO
2600 N DETTMAN RD
JACKSON, MI 49201

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address:
MARCIA BAILEY
645 HOLLY POINT
FENTON, MI 48430

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/12/2026

Name & Address
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation TECH Employer GOOGLE

Business Address 510 FLATBUSH AVE, PROSPECT LEFFERTS GARDENS, NY 11225

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

Page Subtotal 210.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 04/14/2026

Name & Address:
WILLIAM CLARK
16367 PIKES PEAK DR
BROOMFIELD, CO 80023

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation OWNER Employer BLINGLE

Business Address 16367 PIKES PEAK DR, BROOMFIELD, CO 80023

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/15/2026

Name & Address
KIRAN SAMRA
2987 STOKE WY
ANN ARBOR, MI 48105

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/16/2026

Name & Address:
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 4.00 $ 53.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/17/2026

Name & Address
ERIC SHALAYKO
2779 PAGE AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 654.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 04/20/2026

Name & Address:
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer CANONICAL USA

Business Address 2532 PITTSFIELD BLVD, ANN ARBOR, MI 48104

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

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/21/2026

Name & Address
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/21/2026

Name & Address:
CECE HUDDLESTON
17344 FAIRFIELD ST
DETROIT, MI 48221

$ 10.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/23/2026

Name & Address
GRETCHEN HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 10.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 125.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 04/24/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 90.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/26/2026

Name & Address
PETER HILL
1404 E STADIUM BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/27/2026

Name & Address:
JANIS BOBRIN
3465 VINTAGE VALLEY RD
ANN ARBOR, MI 48105

$ 350.00 $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/29/2026

Name & Address
ADHAM KASSEM
3506 LINDEN ST
DEARBORN, MI 48124

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

Page Subtotal 960.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 04/29/2026

Name & Address:
RUSSELL DESY
2010 GLEN DR
JACKSON, MI 49203

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/01/2026

Name & Address
UBUSUKU ABUKUSUMO
2760 SILVER SPRING DR
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/01/2026

Name & Address:
JULISSA MILUKHIN
3743 BROOKLYN RD
APT 2
JACKSON, MI 49203

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/01/2026

Name & Address
STELLA ANDERSON
1422 PINE VALLEY BLVD
ANN ARBOR, MI 48104

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 180.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/02/2026

Name & Address:
MELANEE WEBERT
289 BRISTIE ST
PORTLAND, MI 48875

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address
ERICA BRIGGS
204 MARK HANNAH PL
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/03/2026

Name & Address:
JANNIFER MAINO
2600 N DETTMAN RD
JACKSON, MI 49201

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation BH THERAPIST Employer SELF

Business Address 2600 N DETTMAN RD, JACKSON, MI 49201

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2026

Name & Address
ANGELA DAVIS
118 W KINGSLEY ST
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 225.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/12/2026

Name & Address:
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation TECH Employer GOOGLE

Business Address 510 FLATBUSH AVE, PROSPECT LEFFERTS GARDENS, NY 11225

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/12/2026

Name & Address
MEGAN BROVAN
2871 PAGE AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2026

Name & Address:
TRAVIS GONYOU
2636 ESCH AVE
ANN ARBOR, MI 48104

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer HOOPER HATHAWAY

Business Address 126 S MAIN ST, ANN ARBOR, MI 48104

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/15/2026

Name & Address
ERIC GOLDBERG
3010 DEXTER RD
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 450.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/15/2026

Name & Address:
GRETA KRAPOHL
1502 GOLDEN AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/16/2026

Name & Address
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 4.00 $ 57.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/18/2026

Name & Address:
LUIS VAZQUEZ
909 BARTON DR
ANN ARBOR, MI 48105

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/21/2026

Name & Address
CECE HUDDLESTON
17344 FAIRFIELD ST
DETROIT, MI 48221

$ 10.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 139.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/21/2026

Name & Address:
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/23/2026

Name & Address
GRETCHEN HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 10.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
FRANCISCO LEON
3346 TACOMA CIR
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 75.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/25/2026

Name & Address:
JOHN GREDEN
2015 WOODSIDE RD
ANN ARBOR, MI 48104

$ 300.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/25/2026

Name & Address
AMEL LJALJIC
HARMONY DR
MACOMB, MI 48042

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/25/2026

Name & Address:
BRANDON MCGHEE
205 ASPENWOOD DR
CHAGRIN FALLS, OH 44022

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/25/2026

Name & Address
ALEXYS ROUNDTREE
220 26TH ST NW
APT 1313
ATLANTA, GA 30309

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 450.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/26/2026

Name & Address:
GARY JAMES
816 N OAKLAND ST
ARLINGTON, VA 22203

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation HR PROGRAM MANAGER Employer GOOGLE

Business Address 816 N OAKLAND ST, ARLINGTON, VA 22203

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/26/2026

Name & Address
OLIVIA KELLER
2828 LEMMON AVE
DALLAS, TX 75204

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/26/2026

Name & Address:
WYATT MORGAN
8621 SPINNAKER WAY
C3
YPSILANTI, MI 48197

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/27/2026

Name & Address
DANIELA ZAHAB-PALMER
340 SEDGEWOOD LN
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 750.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/27/2026

Name & Address:
ADE OLANIRAN
4535 COMMONWEALTH ST
DETROIT, MI 48208

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/27/2026

Name & Address
JULIANA DUDAS
250 CIMMARON WAY
BOULDER, CO 80303

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/27/2026

Name & Address:
JESSE BELANDER
3631 RANCHERO DR
APT 306
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/27/2026

Name & Address
NORA MALOY
2018 CHAUCER DR
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 130.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 05/27/2026

Name & Address:
ELLIOTT MONTROLL
409 S UNION ST
BURLINGTON, VT 05401

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/28/2026

Name & Address
ERIC GRAY
1345 N HOYNE AVE
APT 1
CHICAGO, IL 60622

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/29/2026

Name & Address:
DYLAN CINTI
213 S 4TH AVE
APT 2A
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/29/2026

Name & Address
MARCIA BAILEY
645 HOLLY POINT
FENTON, MI 48430

$ 100.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

Page Subtotal 260.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/02/2026

Name & Address:
LISA EMERY
2234 DELAWARE DR
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/03/2026

Name & Address
JANNIFER MAINO
2600 N DETTMAN RD
JACKSON, MI 49201

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation BH THERAPIST Employer SELF

Business Address 2600 N DETTMAN RD, JACKSON, MI 49201

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/03/2026

Name & Address:
ROB HALEY
3951 N WILLIAMS AVE
APT 405
PORTLAND, OR 97227

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/03/2026

Name & Address
JOHN GLAZKO
1245 FAIR OAKS PKWY
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

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Page Subtotal 325.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/04/2026

Name & Address:
AMBER KEITH
7558 ABIGAIL DR
SUPERIOR CHARTER TOWNSHIP, MI 48198

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/05/2026

Name & Address
HUGO CALDERON
5733 S NATCHEZ AVE
CHICAGO, IL 60638

$ 300.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation SOLUTION CONSULTANT Employer GOOGLE

Business Address 2913 W DENVER PL, DENVER, CO 80211

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

---

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

Name & Address:
KYLE ALI
4524 POST LOOP
ROUND ROCK, TX 78681

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR PROGRAM MANAGER Employer GOOGLE

Business Address 500 W 2ND ST, AUSTIN, TX 78701

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

---

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

Name & Address
BRADLEY HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation HANDYMAN Employer SIRFIXALOT HANDYMAN SERVICES, LLC

Business Address 408 S WATER ST, STOCKBRIDGE, MI 49285

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

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Page Subtotal 1,150.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/07/2026

Name & Address:
MICHAEL REED
6359 OAKHURST DR
YPSILANTI, MI 48197

$ 10.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/07/2026

Name & Address
LILA SAREEN
109 BIG TRAIL CIR
MISSOURI CITY, TX 77459

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

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

Name & Address:
MICAH CONNER
200 OBSERVATORY ST
217
ANN ARBOR, MI 48109

$ 10.00 $ 110.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

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

Name & Address
SARAH HENRY
4610 N DOVER ST
CHICAGO, IL 60640

$ 20.00 $ 70.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 50.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/07/2026

Name & Address:
MAYSA SITAR
15607 COUNTY ROAD 402
NEWBERRY, MI 49868

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/07/2026

Name & Address
KAYLA JOHNSON
2515 DORVIN DR
JACKSON, MI 49201

$ 10.00 $ 110.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

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

Name & Address:
RANSOM CLIFTON
845 S EUGENE ST
BATON ROUGE, LA 70806

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

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

Name & Address
ELI PALES
900 LOGAN ST
DENVER, CO 80203

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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Page Subtotal 160.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/08/2026

Name & Address:
LAUREN SNABB
1304 HENRY ST
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address
LAURA OCONNOR
220 NELSON RD
SCARSDALE, NY 10583

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address:
MARGARET WYZLIC
4758 DUNBARTON CT
ANN ARBOR, MI 48103

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING DIRECTOR Employer OXFORD COMPANIES

Business Address 777 E EISENHOWER PKWY, ANN ARBOR, MI 48108

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address
SOFIA PAULO
MULHOLLEN DR
MONROE, MI 48161

$ 15.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 175.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/08/2026

Name & Address:
SYDNEY CRISTIANO
3865 DEERFIELD DR
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address
KAELYN LEWIS
3475 AMBER OAKS DR
HOWELL, MI 48855

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address:
KATE BAILLARGEON
42 W 65TH ST
APT 4B
NEW YORK, NY 10023

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address
HALEY WILLIAMS
31845 WINDWOOD PARK LN
SPRING, TX 77386

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 50.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/08/2026

Name & Address:
PAIGE LAUGHLIN
407 LINDA VISTA ST
ANN ARBOR, MI 48103

$ 20.00 $ 70.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address
DANIELLE MACKEY
3830 KIRKWOOD ST
JACKSON, MI 49203

$ 20.00 $ 120.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
JOSEPH ANDERSON
4434 AVOCADO ST
LOS ANGELES, CA 90027

$ 100.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR ART DIRECTOR Employer ZEALOT

Business Address 4434 AVOCADO ST, LOS ANGELES, CA 90027

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
KATIE MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 5.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 145.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/09/2026

Name & Address:
DAVID GELLER
75 SHADY LN
FANWOOD, NJ 07023

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
PATRICIA AMORT
2061 PAULINE CT
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
SANDRA LANGSTON
4453 SPINNAKER LN
PLEASANT LAKE, MI 49272

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
SOPHIA BEEBE
2499 PACKARD ST
C
ANN ARBOR, MI 48104

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 140.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/09/2026

Name & Address:
FRANCES SMITH
243 E 18TH ST
APT 11
NEW YORK, NY 10003

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
ERIC GOLDBERG
3010 DEXTER RD
ANN ARBOR, MI 48103

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation PARTNER Employer SUDO LABORATORIES

Business Address 200 S 1ST ST, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
JACK CLARK
2063 E 4TH ST
203
CLEVELAND, OH 44114

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
ROSE CRAMTON
1316 S ST NW
WASHINGTON, DC 20009

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 135.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/09/2026

Name & Address:
GRANT MATTIA
2484 DUNDEE DR
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
CARRIE VAILLANCOURT
1500 CALKINS AVE
LONGMONT, CO 80501

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
BRANDON DIMCHEFF
1401 HARPST ST
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer OPENLY

Business Address 131 DARTMOUTH ST, BOSTON, MA 02116

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
BRITTA BERNTH
1037 MIAMI ST
WATERFORD, MI 48327

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 140.00

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/09/2026

Name & Address:
JAVON CAMPBELL
2106 MANHATTAN BEACH BLVD
REDONDO BEACH, CA 90278

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
JOSHUA BUDA
1314 OAK ST
KALAMAZOO, MI 49008

$ 20.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
ALEXIS RIED
602 E BIRD ST
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
MITZI KOORS
3709 BURKHART RD
JACKSON, MI 49201

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 100.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/09/2026

Name & Address:
BEN GALICKI
1942 LINDSAY LN
ANN ARBOR, MI 48104

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
CONNOR JOSELLIS
1302 N MILWAUKEE AVE
UNIT 401
CHICAGO, IL 60622

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address:
LAUREN BAER
8208 TERRALAND CT
CITRUS HEIGHTS, CA 95610

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2026

Name & Address
IVANA NUJIC
6967 36TH AVE SW
HUDSONVILLE, MI 49426

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 50.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/10/2026

Name & Address:
JONAH GENTHER
655 COLONY CT
CLIFTON, CO 81520

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address
SHARON DIOTTE
2209 S MAIN ST
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address:
GABRIEL MERCADO
815 BUSH ST
JACKSON, MI 49202

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address
NOAH ROBERTSON
3654 MIDDLETON AVE
APT 36
CINCINNATI, OH 45220

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 55.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/10/2026

Name & Address:
ANDREW VIANA
1616 FULMER ST
ANN ARBOR, MI 48103

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address
HARMONY THURMAN
3211 W WAPATO DR
MOSES LAKE, WA 98837

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address:
SCOTT FRANZ
2884 BAYLIS DR
ANN ARBOR, MI 48108

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/10/2026

Name & Address
MARA SMITH
3535 N RACINE AVE
CHICAGO, IL 60657

$ 50.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 130.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/11/2026

Name & Address:
JACOB NGAI
1050 CLAY ST
OAKLAND, CA 94607

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/12/2026

Name & Address
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation TECH Employer GOOGLE

Business Address 510 FLATBUSH AVE, PROSPECT LEFFERTS GARDENS, NY 11225

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/12/2026

Name & Address:
CONSTANCE COLTHORP
732 BRAESIDE PL
ANN ARBOR, MI 48103

$ 50.00 $ 64.36

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/13/2026

Name & Address
MEGAN HULL
11 SIERRA AVE
OAKLAND, CA 94611

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ACTIVIST Employer SELF

Business Address 11 SIERRA AVE, OAKLAND, CA 94611

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 360.00

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/13/2026

Name & Address:
SAWYER CLIFTON
906 MAIN ST
UNIT 415
CINCINNATI, OH 45202

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/13/2026

Name & Address
STEVEN GULICK
437 SUMARK WAY
ANN ARBOR, MI 48103

$ 150.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation IRON WORKER Employer RETIRED

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/13/2026

Name & Address:
ELI NATHANS
1210 CLAGUE AVE
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/14/2026

Name & Address
SCOTT HALPERT
1400 GRANGER AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 400.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/16/2026

Name & Address:
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 4.00 $ 61.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/18/2026

Name & Address
AMANDA BERCI
9961 CEDAR SHORES DR
WHITE LAKE, MI 48386

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/19/2026

Name & Address:
MARY JO DESPREZ
1203 HUTCHINS AVE
ANN ARBOR, MI 48103

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/19/2026

Name & Address
AMELIA CLARK
497 LARKSPUR ST
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 214.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/20/2026

Name & Address:
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 100.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 2532 PITTSFIELD BLVD, ANN ARBOR, MI 48104

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/20/2026

Name & Address
CAITLIN BEUCHE
1225 FAIR OAKS PKWY
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/20/2026

Name & Address:
MEGAN FURMAN
1304 HORMAN CT
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address
CECE HUDDLESTON
17344 FAIRFIELD ST
DETROIT, MI 48221

$ 10.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 410.00

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/21/2026

Name & Address:
ENA HUMPHRIES
2773 PAGE AVE
ANN ARBOR, MI 48104

$ 5.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address
PETER HOUK
2025 YEOMAN CT
ANN ARBOR, MI 48103

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer FORD MOTOR COMPANY

Business Address 6000 MERCURY DR, DEARBORN, MI 48126

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address:
MEREDITH KAHN
817 POMONA RD
ANN ARBOR, MI 48103

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/22/2026

Name & Address
PATTON DOYLE
1412 IROQUOIS PL
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

Page Subtotal 405.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/23/2026

Name & Address:
GRETCHEN HUMPHRIES
408 S WATER ST
STOCKBRIDGE, MI 49285

$ 10.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/24/2026

Name & Address
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 10.00 $ 110.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERPAIST Employer SELF

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2026

Name & Address:
TIMOTHY RICHARDS
1014 ROSE AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/26/2026

Name & Address
DON ROOF
306 POTTER AVE
ANN ARBOR, MI 48103

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 570.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/26/2026

Name & Address:
KAITLIN BUTTERS
823 N ELM AVE
JACKSON, MI 49202

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address
MARK DINCECCO
1517 SHADFORD RD
ANN ARBOR, MI 48104

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address:
GREGORY MATTHEWS
1208 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 50.00 $ 105.98

5. If over $100.00 cumulative, please provide:

Occupation CONSULTING Employer JFM CONSULTING GROUP

Business Address 225 GRATIOT AVE, SUITE 400, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
MARGY LONG
1513 MARTHA AVE
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 171.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/29/2026

Name & Address:
KARINA MILUKHIN
360 MILES
APT 2
JACKSON, MI 49201

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
HUGO CALDERON
5733 S NATCHEZ AVE
CHICAGO, IL 60638

$ 250.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation SOLUTION CONSULTANT Employer GOOGLE

Business Address 2913 W DENVER PL, DENVER, CO 80211

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address:
SARA LUCAS
744 CHRISTY AVE
JACKSON, MI 49203

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
MICAH CONNER
200 OBSERVATORY ST
217
ANN ARBOR, MI 48109

$ 20.00 $ 130.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 281.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/29/2026

Name & Address:
JENNIE LAPP
5165 W BLUESTONE ST
JACKSON, MI 49201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/30/2026

Name & Address
SANDRA SMITH
909 CAMINITO MADRIGAL
CARLSBAD, CA 92011

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation RISK MANAGEMENT Employer ICW GROUP

Business Address 909 CAMINITO MADRIGAL, CARLSBAD, CA 92011

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/30/2026

Name & Address:
OLIVER KILEY
1315 FRANKLIN BLVD
ANN ARBOR, MI 48103

$ 30.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/30/2026

Name & Address
CHRISTINE TAYLOR
2079 CASCADE WOODS DRIVE
JACKSON, MI 49203

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

Page Subtotal 230.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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 06/30/2026

Name & Address:
KIRK WESTPHAL
3505 CHARTER PL
ANN ARBOR, MI 48105

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/01/2026

Name & Address
LISA SAULLES
1630 WALTHAM DR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/01/2026

Name & Address:
MEGAN ELLIOTT
158 E OAKRIDGE AVE
FERNDALE, MI 48220

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/01/2026

Name & Address
STEVEN KLIPSTEIN
9 PEMBROOK DR
STONY BROOK, NY 10710

$ 30.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 180.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/02/2026

Name & Address:
JARED ZLOTNICK
26 DEVRIES AVE
SLEEPY HOLLOW, NY 10591

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/03/2026

Name & Address
JANNIFER MAINO
2600 N DETTMAN RD
JACKSON, MI 49201

$50.00 | $250.00

5. If over $100.00 cumulative, please provide:

Occupation BH THERAPIST Employer SELF

Business Address 2600 N DETTMAN RD, JACKSON, MI 49201

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/04/2026

Name & Address:
MEREDITH KAHN
817 POMONA RD
ANN ARBOR, MI 48103

$100.00 | $300.00

5. If over $100.00 cumulative, please provide:

Occupation LIBRARIAN Employer UNIVERSITY

Business Address 505 S STATE ST, ANN ARBOR, MI 48109

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/06/2026

Name & Address
BOYD CHRISTENSEN
PO BOX 719
CERRILLOS, NM 87010

$1,225.00 | $1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 1,425.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/08/2026

Name & Address:
MARGARET WYZLIC
4758 DUNBARTON CT
ANN ARBOR, MI 48103

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation MARKETING DIRECTOR Employer OXFORD COMPANIES

Business Address 777 E EISENHOWER PKWY, ANN ARBOR, MI 48108

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/08/2026

Name & Address
PETER HONEYMAN
113 S 4TH AVE
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/12/2026

Name & Address:
MENELIK MAJOR
501 FLATBUSH AVE
PROSPECT LEFFERTS GARDENS, NY 11225

$ 50.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation TECH Employer GOOGLE

Business Address 510 FLATBUSH AVE, PROSPECT LEFFERTS GARDENS, NY 11225

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/13/2026

Name & Address
JUDAH GARBER
1508 GRANGER AVE
ANN ARBOR, MI 48104

$ 100.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 300.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/15/2026

Name & Address:
SUSAN POLLAY
2776 PAGE AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/16/2026

Name & Address
CONOR MULHEARN
714 S THOMPSON ST
JACKSON, MI 49203

$ 4.00 $ 65.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/17/2026

Name & Address:
SCOTT HALPERT
1400 GRANGER AVE
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED 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

$ _____ $ _____

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	204.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	55,021.81

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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? ☐ Yes Name & Address: CONSTANCE CALTHORP 732 BRAESIDE PL ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Business Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description POPSICLES 5. Date Of Receipt: 06/02/2026 6. **Vendor Name & Address:** MEIJER 3145 ANN ARBOR-SALINE RD, ANN ARBOR, MI 48103	$ 14.36	$ 14.36
Contribution # 2 PAC Receipt? ☐ Yes Name & Address GREGORY MATTHEWS 1208 BROOKLYN AVE ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: CONSULTING Employer Name & Address: JFM CONSULTING GROUP 225 GRATIOT AVE, SUITE 400, DETROIT, MI 48226 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description POPSICLES 5. Date Of Receipt: 06/13/2026 6. **Vendor Name & Address:** KROGER 400 S MAPLE RD, ANN ARBOR, MI 48103	$ 5.98	$ 55.98
Contribution #3 PAC Receipt? ☐ Yes Name & Address: AIDAN SOVA 2773 PAGE AVE ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: REGIONAL PRODUCT LEAD Employer Name & Address: GOOGLE 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description CANDY 5. Date Of Receipt: 06/29/2026 6. **Vendor Name & Address:** COSTCO 771 AIRPORT BLVD, ANN ARBOR, MI 48108	$ 196.10	$ 201.10
	Page Subtotal	216.44	271.44
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

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? ☐ Yes Name & Address: NATHAN SPEISER 2090 RIDGEWAY CT DEXTER, MI 48130 **If over $100.00 cumulative, please provide:** Occupation: VIDEO EDITOR Employer Name & Business Address: SELF 2090 RIDGEWAY CT, DEXTER, MI 48130 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description VIDEO EDITING 5. Date Of Receipt: 06/30/2026 6. **Vendor Name & Address:**	$ 560.00	$ 585.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address BRADLEY HUMPHRIES 408 S WATER ST STOCKBRIDGE, MI 49285 **If over $100.00 cumulative, please provide:** Occupation: HANDYMAN Employer Name & Address: SIRFIXALOT HANDYMAN SERVICES, LLC 408 S WATER ST, STOCKBRIDGE, MI 49285 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☑ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description REFRESHMENTS 5. Date Of Receipt: 07/03/2026 6. **Vendor Name & Address:** MEIJER 3145 ANN ARBOR-SALINE RD, ANN ARBOR, MI 48103	$ 50.00	$ 300.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____
	Page Subtotal	610.00	885.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	826.44	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/06/2026 Date	$ 226.45
Expenditure #2 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/06/2026 Date	$ 55.97
Expenditure #3 Name MEGHAN BUTTERFIELD Address 2190 BRYANT ST #209 DENVER, CO 80211 ☐ Fund Raiser	Purpose: LOGO AND BRANDING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/10/2026 Date	$ 1,100.00
Expenditure #4 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/18/2026 Date	$ 15.00
Expenditure #5 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/23/2026 Date	$ 198.81

Subtotal this page 1,596.23

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name AMAZON Address 410 TERRY AVE N SEATTLE, WA 98109 ☐ Fund Raiser	Purpose: CANVASSING SUPPLIES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/24/2026 Date	$ 46.62
Expenditure #2 Name UNITED STATES POSTAL SERVICE Address 2075 W STADIUM BLVD ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: STAMPS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/04/2026 Date	$ 202.80
Expenditure #3 Name MEDITERRANO Address 2900 S STATE ST ANN ARBOR, MI 48104 ☑ Fund Raiser	Purpose: FUNDRAISER FOOD ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/11/2026 Date	$ 972.72
Expenditure #4 Name UPS Address 4007 CARPENTER RD YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/13/2026 Date	$ 74.20
Expenditure #5 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/18/2026 Date	$ 15.00

Subtotal this page	1,311.34
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name NATHAN SPEISER Address RIDGEWAY CT DEXTER, MI 48130 ☑ Fund Raiser	Purpose: VIDEOGRAPHY ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/01/2026	$ 500.00
Expenditure #2 Name MICHIGAN DEMOCRATIC PARTY Address 606 TOWNSEND ST LANSING, MI 48933 ☐ Fund Raiser	Purpose: VOTEBUILDER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/03/2026	$ 150.00
Expenditure #3 Name BANK OF ANN ARBOR Address 125 S 5TH AVE ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: CHECKS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/07/2026	$ 27.95
Expenditure #4 Name SAWICKI AND SONS Address 1521 W LAFAYETTE BLVD DETROIT, MI 48216 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/10/2026	$ 1,436.30
Expenditure #5 Name COLLEGE DEMOCRATS AT THE UNIVERSITY OF MICHIGAN Address 300 W MICHIGAN AVE YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: EVENT SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/14/2026	$ 300.00

Subtotal this page	2,414.25
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/20/2026 Date	$ 1,386.07
Expenditure #2 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/20/2026 Date	$ 15.00
Expenditure #3 Name SAWICKI AND SONS Address 1521 W LAFAYETTE BLVD DETROIT, MI 48216 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/27/2026 Date	$ 1,436.30
Expenditure #4 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/06/2026 Date	$ 371.00
Expenditure #5 Name MACKENZIE KILANO Address 416 E HURON ST APT 2 ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: DEPUTY CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/07/2026 Date	$ 350.00

Subtotal this page	3,558.37
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/12/2026 Date	$ 132.34
Expenditure #2 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/18/2026 Date	$ 15.00
Expenditure #3 Name ANN ARBOR OBSERVER Address PO BOX 1187 ANN ARBOR, MI 48106 ☐ Fund Raiser	Purpose: AD ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/20/2026 Date	$ 709.20
Expenditure #4 Name UPS Address 4007 CARPENTER RD YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/24/2026 Date	$ 124.02
Expenditure #5 Name MACKENZIE KILANO Address 416 E HURON ST APT 2 ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: DEPUTY CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2026 Date	$ 350.00

Subtotal this page	1,330.56
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name JIMMY WATKE-STACY Address 201 KOCH AVE ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: FIELD DIRECTOR ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/15/2026 Date	$ 2,000.00
Expenditure #2 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/18/2026 Date	$ 2,303.74
Expenditure #3 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/18/2026 Date	$ 15.00
Expenditure #4 Name COMPETE DIGITAL Address 1317 POTOMAC AVE SE WASHINGTON, DC 20003 ☐ Fund Raiser	Purpose: DIGITAL ADVERTISEMENTS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/18/2026 Date	$ 3,500.00
Expenditure #5 Name UNITED STATES POSTAL SERVICE Address 2075 W STADIUM BLVD ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: STAMPS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/22/2026 Date	$ 396.50

Subtotal this page	8,215.24
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/23/2026 Date	$ 1,519.12
Expenditure #2 Name ANN ARBOR OBSERVER Address PO BOX 1187 ANN ARBOR, MI 48106 ☐ Fund Raiser	Purpose: ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/26/2026 Date	$ 709.20
Expenditure #3 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/26/2026 Date	$ 1,519.31
Expenditure #4 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/29/2026 Date	$ 1,384.43
Expenditure #5 Name MACKENZIE KILANO Address 416 E HURON ST APT 2 ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: DEPUTY CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/29/2026 Date	$ 350.00

Subtotal this page	5,482.06
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/13/2026 Date	$ 2,394.34
Expenditure #2 Name STELLA CAMERLENGO Address 43780 ALGONQUIN DR NOVI, MI 48375 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/13/2026 Date	$ 500.00
Expenditure #3 Name BENNETT POLITICAL STRATEGIES LLC Address 625 KENMOOR AVE SE SUITE 301 GRAND RAPIDS, MI 49546 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGEMENT ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/15/2026 Date	$ 6,000.00
Expenditure #4 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: PRINTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	$ 2,394.34
Expenditure #5 Name COMPETE DIGITAL Address 1317 POTOMAC AVE SE WASHINGTON, DC 20003 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/17/2026 Date	$ 3,500.00

Subtotal this page	14,788.68
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ANN ARBOR JAYCEES Address PO BOX 1866 ANN ARBOR, MI 48106 ☐ Fund Raiser	Purpose: 4TH OF JULY PARADE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/17/2026 Date	$ 75.00
Expenditure #2 Name ACTION NETWORK Address 1900 L ST NW WASHINGTON, DC 20036 ☐ Fund Raiser	Purpose: EMAILS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/18/2026 Date	$ 15.00
Expenditure #3 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: CREDIT CARD FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/19/2026 Date	$ 1,330.76
Expenditure #4 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: ACTBLUE FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/19/2026 Date	$ 812.64
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	$

Subtotal this page	2,233.40
Grand Total of all Schedules 1B (Complete on last page of Schedule)	40,930.13

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-003

2. Committee Name FRIENDS OF AIDAN SOVA

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
03/10/2026	125	CAMPAIGN KICKOFF	MEDITERRANO 2900 S STATE ST ANN ARBOR, MI 48104 ☐ Private Residence

7. Total Contributions 5,480.79

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 5,480.79

10. Total Cost of Event 1,472.72
(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.