MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 01/02/2026 to 07/19/2026

1. Committee I.D. Number
C-2026-001

2. Committee Name
DAVE ZEGLEN FOR THE PEOPLE

4. Candidate Last Name: ZEGLEN First Name: DAVID M.I.: I

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
376 HARBOR WAY
ANN ARBOR, MI 48103

Area Code and Phone (785) 550-3262
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
JEFFREY WARD
2228 MEDFORD ROAD
ANN ARBOR, MI 48104

Area Code & Phone (810) 875-2264

7. Treasurer's Business Address
2228 MEDFORD ROAD
ANN ARBOR, MI 48104

Area Code and Phone (810) 875-2264

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
JEFFREY WARD
2228 MEDFORD ROAD
ANN ARBOR, MI 48104

Area Code and Phone (810) 875-2264

9. **TYPE OF STATEMENT**

9a. [X] Pre-Election **OR** 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

- [X] 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 _____
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date _____
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-2026-001

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	26,457.75	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	26,457.75	(18.) $ 26,457.75
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.) $	26,457.75	(20.) $ 26,457.75
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	1,904.53	(21.) $ 1,904.53
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.) $	11,986.19	
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.) $	11,986.19	(23.) $ 11,986.19
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.) $	663.07	
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.) + $	26,457.75
15. SUBTOTAL Add lines 13 and 14	(15.) = $	26,457.75
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	11,986.19
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	14,471.56 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
ANNMARIE ARBAUGH
1915 AUSTIN AVE
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation REALTOR Employer COLDWELL BANKER WEIR MANUEL

Business Address 2723 S STATE ST, ANN ARBOR, MI 48108

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
AASAKIRAN MADAMANCHI
25109 WESTMORELAND DR
FARMINGTON HILLS, MI 48336

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer THE UNIVERSITY OF MICHIGAN

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:
LAUREN GABOURY
229 OAKLAWN AVE
YPSILANTI, MI 48198

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer EAGLE ASSOCIATES

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/09/2026

Name & Address
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

Business Address

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

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Page Subtotal 330.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 02/12/2026

Name & Address:
HENRY BARRY
911 OLIVIA AVE
ANN ARBOR, MI 48104

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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
JOHN GODFREY
2809 BROCKMAN BLVD
ANN ARBOR, MI 48104

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/14/2026

Name & Address:
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

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
NANCY LEFF
1512 MONTCLAIR PL
ANN ARBOR, MI 48104

$ 0.00 $ 664.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address _____

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

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Page Subtotal 725.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
EMBER MCCOY
736 TEAL LN
STATE COLLEGE, PA 16803

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation POSTDOCTORAL FELLOW Employer PENN STATE UNIVERSITY

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
NATHANIEL IBRAHIM
47870 PAVILLON RD
CANTON, MI 48188

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation ORGANIZER Employer SEIU HCMI

Business Address 21700 NORTHWESTERN HWY, SOUTHFIELD, MI 48075

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:
DANIEL MCCARTER
560 LITTLE LAKE DR
ANN ARBOR, MI 48103

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer FORD MOTOR COMPANY

Business Address 17000 ROTUNDA DR, DEARBORN, MI 48120

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
MARK TALLENTS
616 W 4TH ST S
FULTON, NY 13069

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation LABOR Employer AFL-CIO

Business Address 3435 BRENTWOOD CT, ANN ARBOR, MI 48108

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

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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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, 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 02/18/2026

Name & Address
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
LEVI PIERPONT
3137 HOMESTEAD COMMONS DR
ANN ARBOR, MI 48108

$ 72.00 $ 72.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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 02/18/2026

Name & Address
LINDA DABROWSKI
1202 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation HUMAN RESOURCES Employer THE UNIVERSITY OF MICHIGAN

Business Address

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

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Page Subtotal 157.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
TIMOTHY GIBSON
4207 32ND RD S
ARLINGTON, VA 22206

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer GEORGE MASON UNIVERSITY

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
ANTHONY DELLICOLLI
224 N ALTADENA AVE
ROYAL OAK, MI 48067

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer NISSAN

Business Address 39001 SUNRISE DR, FARMINGTON HILLS, MI 48331

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:
MAXINE SECSKAS
1472 ASTOR AVE
ANN ARBOR, MI 48104

$ 40.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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 02/23/2026

Name & Address
AUSTEN COLE
391 S JEFFERSON ST
MASON, MI 48854

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation ON-STREET MANAGER Employer PCI MUNICIPAL PARKING

Business Address 749 JEFFERSON LN, MILAN, MI 48160

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

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Page Subtotal 165.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
KATHALENE RAZZANO
2704 FARRIS LN
BOWIE, MD 20715

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer UMBC

Business Address FINE ARTS BLDG, ROOM 421,

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
CAROLINE MOHAI
1331 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
OLIVIA GUNTHER
415 HARBOR WAY
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation PROGRAM MANAGER Employer BURNING GLASS INSTITUTE

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
KATHLEEN M SINGER
1352 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address

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)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
SID SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer SEWANEE

Business Address 735 UNIVERSITY AVE, SEWANEE, TN 37375

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
MICHAEL HAWKINS
3242 BOLGOS CIR
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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2026

Name & Address:
ADA ESTES
156 S PROSPECT ST
YPSILANTI, MI 48198

$ 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 02/24/2026

Name & Address
MIKE LEE
2590 MILLER RD
ANN ARBOR, MI 48103

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation YARD WORKWE Employer SELF

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/24/2026

Name & Address:
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING RD, ANN ARBOR, MI 48103

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
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
RYAN MCCARTY
113 PERRIN ST
YPSILANTI, MI 48197

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 02/24/2026

Name & Address
LIZ BAUR
412 WESTWOOD AVE
ANN ARBOR, MI 48103

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer S-DOCS INC

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
PETER NELSON
1319 ARDMOOR AVE
ANN ARBOR, MI 48103

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer FORD MOTOR COMPANY

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
JOHN EATON
1606 DICKEN DR
ANN ARBOR, MI 48103

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer RETIRED

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 02/24/2026

Name & Address:
MOLLAN CALAHAN
4850 WASHTENAW AVE
ANN ARBOR, MI 48108

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation DATA ANALYST Employer BLUE CROSS BLUE SHIELD OF MICHIGAN

Business Address 600 E LAFAYETTE ST, DETROIT, MI 48226

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
SCOTT GABOURY
1147 SHADY OAKS CT
ANN ARBOR, MI 48103

$30.00 $30.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
JIMMY BRANCHO
413 S HURON ST
YPSILANTI, MI 48197

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer THE UNIVERSITY OF MICHGAN

Business Address 435 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 02/24/2026

Name & Address
RHEA CHAPPELL
1856 W STADIUM BLVD
APT 6
ANN ARBOR, MI 48103

$ 15.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation CASHIER Employer PLUM MARKET

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:
JUSTIN YUAN
508 PINOAK DR
MONROEVILLE, PA 15146

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation CUSTODIAN Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 02/24/2026

Name & Address
ERIC PRICHARD
1780 BROOKFIELD DR
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer THE UNIVERSITY OF MICHGAN

Business Address 435 S STATE ST, ANN ARBOR, MI 48109

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

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Page Subtotal 190.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
KESHAVA DEMERATH-SHANTI
640 DELLWOOD DR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation STUDENT 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
AISHAH AL-MOHAMEDI
2717 HWY 48 N
DICKSON, TN 37055

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation STUDENT 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:
JOHN GODFREY
2809 BROCKMAN BLVD
ANN ARBOR, MI 48104

$ 50.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address 2809 BROCKMAN 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 02/24/2026

Name & Address
AMELIA SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT INSTRUCTOR Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 S STATE ST, ANN ARBOR, MI 48109

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
BETHANY BEEKLY
1943 POINTE LN
#303
ANN ARBOR, MI 48105

$125.00 | $125.00

5. If over $100.00 cumulative, please provide:

Occupation LECTURER Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 02/24/2026

Name & Address
DOMINYKAS SIAUDVYTIS
823 ADDINGTON LN
ANN ARBOR, MI 48108

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation WEB DEVELOPER Employer LIMINAL ARC

Business Address 2180 SATELLITE BLVD NW, DULUTH, GA 30097

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:
ANNE BANNISTER
612 N MAIN ST
ANN ARBOR, MI 48104

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/25/2026

Name & Address
BRIAN GEIRINGER
415 PEARL ST
YPSILANTI, MI 48197

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation DIRECTOR Employer ANN ARBOR FOR PUBLIC POWER

Business Address 2370 E STADIUM BLVD, ANN ARBOR, MI 48104

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 02/25/2026

Name & Address:
NATALIE FULKERSON
559 GALEN CIR
ANN ARBOR, MI 48103

$150.00 $150.00

5. If over $100.00 cumulative, please provide:

Occupation LIBRARIAN Employer UNIVERSITY OF MICHIGAN

Business Address 435 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 02/26/2026

Name & Address
MALLIKA INSAARD
504 CHURCH ST
ANN ARBOR, MI 48104

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation STUDENT Employer

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 02/26/2026

Name & Address:
SAMUEL MACKINNON
334 E KINGSLEY ST
ANN ARBOR, MI 48104

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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
SARAH KEELER
23849 LLOYD CT
DEARBORN, MI 48124

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation ORGANIZER Employer LECTURERS' EMPLOYEE ORGANIZATION

Business Address 150 S 5TH AVE, ANN ARBOR, MI 48104

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 02/26/2026

Name & Address:
AMBER FELLOWS
320 VINEWOOD CT
YPSILANTI, MI 48198

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation PROGRAM DIRECTOR Employer ICPJ

Business Address 1414 HILL 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 02/28/2026

Name & Address
LAUREN GABOURY
229 OAKLAWN AVE
YPSILANTI, MI 48198

$ 25.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer EAGLE ASSOCIATES

Business Address

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/03/2026

Name & Address:
GABRIELLE BOWYER
1721 NEWPORT RD
ANN ARBOR, MI 48103

$ 150.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer ANN ARBOR BEHAVIORAL SERVICES

Business Address 3200 W LIBERTY RD, ANN ARBOR, MI 48103

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/08/2026

Name & Address
ANNMARIE ARBAUGH
1915 AUSTIN AVE
ANN ARBOR, MI 48104

$ 750.00 $ 950.00

5. If over $100.00 cumulative, please provide:

Occupation REALTOR Employer COLDWELL BANKER WEIR MANUEL

Business Address 2723 S STATE ST, ANN ARBOR, MI 48108

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

Page Subtotal 945.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 | $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/11/2026

Name & Address
JOHN EATON
1606 DICKEN DR
ANN ARBOR, MI 48103

$ 1,000.00 | $ 1,050.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer RETIRED

Business Address 1606 DICKEN DR, ANN ARBOR, MI 48103

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2026

Name & Address:
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$ 25.00 | $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/14/2026

Name & Address
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

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Page Subtotal 1,055.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 03/18/2026

Name & Address:
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$ 10.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, ANN ARBOR, MI 48104

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/18/2026

Name & Address
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 112 SOMERSET DR NE, GRAND RAPIDS, MI 49503

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/19/2026

Name & Address:
PETER ECKSTEIN
2551 LONDONDERRY RD
ANN ARBOR, MI 48104

$ 450.00 $ 450.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2551 LONDONDERRY ROAD,

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/19/2026

Name & Address
NANCY LEFF
1512 MONTCLAIR PL
ANN ARBOR, MI 48104

$ 25.00 $ 689.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address 1512 MONTCLAIR PL, ANN ARBOR, MI 48104

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

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Page Subtotal 535.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
MICHELLE DEATRICK
5630 MEADOW LN
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation WRITER/FARMER Employer VERDANDE/MICHELLE DEATRICK

Business Address 5630 MEADOW LN, ANN ARBOR, MI 48105

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2026

Name & Address
LISA JEVENS
1054 MARTIN PL
ANN ARBOR, MI 48104

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1054 MARTIN PL, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2026

Name & Address:
PETER NELSON
1319 ARDMOOR AVE
ANN ARBOR, MI 48103

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer FORD MOTOR COMPANY

Business Address 1319 ARDMOOR AVE, ANN ARBOR, MI 48103

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2026

Name & Address
PATRICK MURPHY
1476 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1476 ROSEWOOD ST, ANN ARBOR, MI 48104

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

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Page Subtotal 2,150.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$ 10.00 $ 85.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 10390 WILSON RD, MONTROSE, MI 48457

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/24/2026

Name & Address
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$ 25.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING 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 03/24/2026

Name & Address:
AMELIA SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT INSTRUCTOR Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 03/24/2026

Name & Address
BRAEDAN JOHNIGAN
231 GRANITE ST
CADILLAC, MI 49601

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation BARISTA Employer STARBUCKS

Business Address 231 GRANITE ST, CADILLAC, MI 49601

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

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Page Subtotal 95.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
LINDA DOKAS
1243 MARLBOROUGH DR
ANN ARBOR, MI 48104

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMLOYED

Business Address 1243 MARLBOROUGH DR, ANN ARBOR, MI 48104

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/24/2026

Name & Address
RICHARD DOKAS
1243 MARLBOROUGH DR
ANN ARBOR, MI 48104

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMLOYED

Business Address 1243 MARLBOROUGH DR, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/27/2026

Name & Address:
JULIE COHEN
1117 GRANGER AVE
ANN ARBOR, MI 48104

$50.00 | $50.00

5. If over $100.00 cumulative, please provide:

Occupation COMPANION CARE Employer JULIE COHEN

Business Address 1117 GRANGER 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 03/29/2026

Name & Address
MAJOR STEVENS
32117 RED ARROW HWY
PAW PAW, MI 49079

$30.00 | $30.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT Employer THE UNIVERSITY OF MICHIGAN

Business Address 345 S STATE ST, ANN ARBOR, MI 48109

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

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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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 03/29/2026

Name & Address:
SID SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer SEWANEE

Business Address 735 UNIVERSITY AVE, SEWANEE, TN 37375

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
KATHERINE GRISWOLD
3565 FOX HUNT DR
ANN ARBOR, MI 48105

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 3565 FOX HUNT 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 03/29/2026

Name & Address:
ZACKARIAH FARAH
476 PRENTIS ST
APT 6
DETROIT, MI 48201

$ 35.00 $ 35.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 476 PRENTIS ST, APT 6, DETROIT, MI 48201

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
CODY JONAITIS
125 W HOOVER AVE
ANN ARBOR, MI 48103

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 125 W HOOVER AVE, ANN ARBOR, MI 48103

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 03/29/2026

Name & Address:
JEFF CROCKETT
506 E KINGSLEY ST
ANN ARBOR, MI 48104

$100.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
CULIN GOHEEN
749 JEFFERSON LN
MILAN, MI 48160

$10.00 | $10.00

5. If over $100.00 cumulative, please provide:

Occupation SHIFT COORDINATOR Employer PCI MUNICIPAL SERVICES

Business Address 220 N ASHLEY 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 03/29/2026

Name & Address:
COLE AUSTEN
391 S JEFFERSON ST
APT 4
COLDWATER, MI 49036

$20.00 | $20.00

5. If over $100.00 cumulative, please provide:

Occupation ASSISTANT ON-STREET MANAGER Employer PCI MUNICIPAL PARKING

Business Address 749 JEFFERSON LN, MILAN, MI 48160

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
MARK TALLENTS
616 W 4TH ST S
FULTON, NY 13069

$20.00 | $45.00

5. If over $100.00 cumulative, please provide:

Occupation LABOR STAFF Employer HURON VALLEY AREA LABOR FEDERATION

Business Address 1049 ISLAND DR CT, ANN ARBOR, MI 48105

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

---

Page Subtotal 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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 03/29/2026

Name & Address:
GREGG WOODRING
1012 W CROSS ST
YPSILANTI, MI 48197

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer PROPIO LANGUAGE SERVICES

Business Address 10801 MASTIN ST, OVERLAND PARK, KS 66210

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
RHEA CHAPPELL
1856 W STADIUM BLVD
APT 6
ANN ARBOR, MI 48103

$ 20.00 $ 35.00

5. If over $100.00 cumulative, please provide:

Occupation CASHIER Employer PLUM MARKET

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address:
NATHANIAL IBRAHIM
47870 PAVILLON RD
CANTON, MI 48188

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation UNION ORGANIZER Employer SEIU HCMI

Business Address 207 S 7TH ST, ANN ARBOR, MI 48103

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/29/2026

Name & Address
GRACE WALTON
207 S 7TH ST
ANN ARBOR, MI 48103

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation BARISTA Employer ONDO

Business Address 324 S STATE ST, ANN ARBOR, MI 48104

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

---

Page Subtotal 97.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 03/31/2026

Name & Address:
LINDA DABROWSKI
1202 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 100.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation HUMAN RESOURCES Employer THE UNIVERSITY OF MICHIGAN

Business Address 345 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 04/02/2026

Name & Address
KAREN JONES
1505 KENSINGTON DR
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation OCCUPATIONAL THERAPY Employer KAREN JONES

Business Address 1505 KENSINGTON DR, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/03/2026

Name & Address:
GABRIELLE BOWYER
1721 NEWPORT RD
ANN ARBOR, MI 48103

$ 150.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer ANN ARBOR BEHAVIORAL SERVICES

Business Address 3200 W LIBERTY RD, ANN ARBOR, MI 48103

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
BARBARA WETULA
623 FELCH ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/07/2026

Name & Address:
JOSEPH FREDAL
13343 HART AVE
HUNTINGTON WOODS, MI 48070

$ 2.00 | $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
WILLIAM SALO
PO BOX 876
MARQUETTE, MI 49855

$ 2.00 | $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
LUTHER HOY
3018 RODMAN ST NW
WASHINGTON, DC 20008

$ 5.00 | $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
MEL MALCZEWSKI
2530 UNDERHILL RD
TOLEDO, OH 43615

$ 2.00 | $ 2.00

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 11.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/07/2026

Name & Address:
SIHAM DHAGANE
6014 PIPER AVE
LANSING, MI 48911

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
QUINN MURPHY
1146 CHESTNUT LN
SOUTH LYON, MI 48178

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
ANASTASIA SHAW
16 MULBERRY AVE
GARDEN CITY, NY 11530

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation UNEMPLOYED Employer UNEMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
GRACE WALTON
207 S 7TH ST
ANN ARBOR, MI 48103

$ 2.00 $ 4.00

5. If over $100.00 cumulative, please provide:

Occupation BARISTA Employer ONDO

Business Address 324 S STATE ST, ANN ARBOR, MI 48104

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

---

Page Subtotal 8.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/07/2026

Name & Address:
SIHAM DHAGANE
6014 PIPER AVE
LANSING, MI 48911

$ 2.00 $ 4.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
CARTER BURTON
56401 SOLINA CT
MACOMB, MI 48042

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
SIHAM DHAGANE
6014 PIPER AVE
LANSING, MI 48911

$ 2.00 $ 6.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/07/2026

Name & Address
MASON BARRIS
26 GREEN HOLLOW RD
EAST HAMPTON, NY 11937

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

Page Subtotal 8.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/07/2026

Name & Address:
BODHI WHITE
500 ALBERT ST
MARQUETTE, MI 49855

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/09/2026

Name & Address
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 $ 15.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/09/2026

Name & Address:
MEL MALCZEWSKI
2530 UNDERHILL RD
TOLEDO, OH 43615

$ 2.00 $ 4.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/09/2026

Name & Address
FIONA DUNLOP
109 N THAYER ST
ANN ARBOR, MI 48104

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

Page Subtotal 29.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/09/2026

Name & Address:
SID SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 10.00 $ 85.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer SEWANEE

Business Address 735 UNIVERSITY AVE, SEWANEE, TN 37375

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/09/2026

Name & Address
ANGELINA HAMBLIN
14181 WILLIAMSBURG DR
RIVERVIEW, MI 48193

$ 2.00 $ 2.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/09/2026

Name & Address:
TODD LEFF
1512 MONTCLAIR PL
ANN ARBOR, MI 48104

$ 500.00 $ 760.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1512 MONTCLAIR PL, ANN ARBOR, MI 48104

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
MARC GERSTEIN
1321 FOREST CT
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

Page Subtotal 537.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/17/2026

Name & Address
NICK CONDER
1240 E MORGAN RD
ANN ARBOR, MI 48108

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/18/2026

Name & Address:
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$ 10.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, ANN ARBOR, MI 48104

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/18/2026

Name & Address
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 112 SOMERSET DR NE, GRAND RAPIDS, MI 49503

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/19/2026

Name & Address:
MOE FITZSIMONS
300 S REVENA BLVD
ANN ARBOR, MI 48103

$ 800.00 $ 800.00

5. If over $100.00 cumulative, please provide:

Occupation ORGANIZER Employer SEIU

Business Address 300 S REVENA BLVD, ANN ARBOR, MI 48103

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/20/2026

Name & Address
BARBARA WETULA
623 FELCH ST
ANN ARBOR, MI 48103

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 623 FELCH 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 04/22/2026

Name & Address:
KATHLEEN M SINGER
1352 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 20.00 $ 120.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address 1352 MARLBOROUGH 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 04/22/2026

Name & Address
KRISTEN KAISER
2154 S 7TH ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation BUSINESS Employer WOVENX HEALTH

Business Address 2154 S 7TH ST, ANN ARBOR, MI 48103

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

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Page Subtotal 1,020.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$ 10.00 $ 95.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 10390 WILSON RD, MONTROSE, MI 48457

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/24/2026

Name & Address
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$ 25.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING 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 04/24/2026

Name & Address:
AMELIA SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT INSTRUCTOR Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 04/24/2026

Name & Address
CLARE KOLEVAR
704 HUTCHINS AVE
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation ADMINISTRATIVE SPECIALIST Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 S STATE ST, ANN ARBOR, MI 48109

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 04/25/2026

Name & Address:
APRIL CAMPBELL
1323 PINE VALLEY CT
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/29/2026

Name & Address
LAUREN GABOURY
229 OAKLAWN AVE
YPSILANTI, MI 48198

$ 25.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer EAGLE ASSOCIATES

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/30/2026

Name & Address:
SLOAN CHILDERS
100 STILL CREEK LN
ATHENS, GA 30605

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation ACCOUNTANT Employer ERNST & YOUNG LLP

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
CONNOR O'BRIEN
914 MOUNTAIN VIEW AVE
MOUNTAIN VIEW, CA 94040

$ 16.67 $ 16.67

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer CROWDSTRIKE

Business Address _____

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

---

Page Subtotal 151.67

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/01/2026

Name & Address:
ANDREW HOSTERT
1069 RABBIT RUN CIR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation CLAIMS ADJUSTER Employer FARMERS INSURANCE

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
NIKOLAS LETENDRE-CAHILLANE
39 RIDGEWOOD TERRACE
NORTHAMPTON, MA 01060

$ 14.28 $ 14.28

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
GABRIELLE BOWYER
1721 NEWPORT RD
ANN ARBOR, MI 48103

$ 150.00 $ 450.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer ANN ARBOR BEHAVIORAL SERVICES

Business Address 3200 W LIBERTY RD, ANN ARBOR, MI 48103

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/03/2026

Name & Address
REENA LIBERMAN
914 LINCOLN AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer SELF

Business Address 914 LINCOLN AVE, ANN ARBOR, MI 48104

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

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Page Subtotal 239.28

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/03/2026

Name & Address:
HAVA BAZZ
2225 S OAK PARK DR
TUCSON, AZ 85710

$4.28 $4.28

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/04/2026

Name & Address
ROBINSON BLOCK
4315 DARTER ST
HOUSTON, TX 77009

$4.86 $4.86

5. If over $100.00 cumulative, please provide:

Occupation FIREFIGHTER Employer HOUSTON FIRE DEPARTMENT

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/04/2026

Name & Address:
MATHEWOS SAMSON
399 ANGIER PL NE
ATLANTA, GA 30308

$20.00 $20.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer OXOS MEDICAL

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/05/2026

Name & Address
SUSAN STEIGERWALT
16551 WARWICK ST
DETROIT, MI 48219

$150.00 $150.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

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Page Subtotal 179.14

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/05/2026

Name & Address:
NANCY ROMER
445 6TH ST
PARK SLOPE, NY 11215

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation COLLEGE PROFESSOR Employer BROOKLYN COLLEGE

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2026

Name & Address
JOHN CATTANEO
15 4TH ST SE
WASHINGTON, DC 20003

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation SERVER Employer TAQ

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2026

Name & Address:
ROBERT STENCEL
2865 ESCH AVE
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/07/2026

Name & Address
DEBORAH FRENCH
138 DUANE ST
4N
NEW YORK, NY 10013

$ 11.11 $ 11.11

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

Page Subtotal 121.11

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/07/2026

Name & Address:
LYNN LISTON
10037 ROSEHILL RD
BERRIEN SPRINGS, MI 49103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation INFANT/EARLY CHILDHOOD MENTAL HEALTH CONSULTAN Employer SELF

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/07/2026

Name & Address
SETH MANGOLD
3422 NORTHWEST AVENUE 37
BELLINGHAM, WA 98225

$ 2.77 $ 2.77

5. If over $100.00 cumulative, please provide:

Occupation COMMUNITY ENGAGEMENT Employer RE SOURCES

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/2026

Name & Address:
CHET LEXVOLD
239 E BELLEVUE AVE
SAN MATEO, CA 94401

$ 11.11 $ 11.11

5. If over $100.00 cumulative, please provide:

Occupation EXECUTIVE DIRECTOR Employer AFT 1493

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/2026

Name & Address
CURT RIES
101 SUNNYHILLS CT
APT 68
MILPITAS, CA 95035

$ 2.78 $ 2.78

5. If over $100.00 cumulative, please provide:

Occupation MAINTENANCE WORKER Employer TOWN OF SAN ANSELMO

Business Address

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

---

Page Subtotal 41.66

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/2026

Name & Address:
SANDRA SCHROEDER
17300 QUAKER LN
D-6
ASHTON-SANDY SPRING, MD 20860

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/08/2026

Name & Address
JACK HAMILTON
2709 16TH ST
SACRAMENTO, CA 95818

$ 11.11 $ 11.11

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/09/2026

Name & Address:
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/09/2026

Name & Address
LINDA RYKWALDER
1301 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

Page Subtotal 51.11

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/09/2026

Name & Address:
BENJAMIN LAPPEN
100 NEW SUDBURY ST
#502
BOSTON, MA 02114

$2.78 $2.78

5. If over $100.00 cumulative, please provide:

Occupation HOUSING CASE MANAGEE Employer CITY OF SOMERVILLE

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/10/2026

Name & Address
IAN ROBINSON
3435 BRENTWOOD CT
ANN ARBOR, MI 48108

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation FACULTY Employer UNIVERSITY OF MICHIGAN

Business Address 435 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 05/10/2026

Name & Address:
MICHAEL DAURIO
1201 S HOPE ST
APT 2611
LOS ANGELES, CA 90015

$10.00 $10.00

5. If over $100.00 cumulative, please provide:

Occupation ATTORNEY Employer SELF

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/12/2026

Name & Address
ROBERT HERKIMER
PO BOX 30153
SAVANNAH, GA 31410

$3.12 $3.12

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

Page Subtotal 115.90

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/14/2026

Name & Address:
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2026

Name & Address
JACQUELINE ALI CORDOBA
1585 WALLER ST
APT2
SF, CA 94117

$ 62.50 $ 62.50

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer BLOCK

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:
JOSH PECK
11300 EXPO BLVD
SAN ANTONIO, TX 78230

$ 1.25 $ 1.25

5. If over $100.00 cumulative, please provide:

Occupation DIGITAL ASSOCIATE Employer MISSIONWIRED

Business Address

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
KATHLEEN FALLON
201 E 37TH ST
NEW YORK, NY 10016

$ 12.50 $ 12.50

5. If over $100.00 cumulative, please provide:

Occupation PUBLISHING Employer SCHOLASTIC

Business Address

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

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Page Subtotal 101.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
LILAH ROSENFIELD
273 S 400 EAST
UNIT 2
SALT LAKE CITY, UT 84111

$ 202.50 $ 202.50

5. If over $100.00 cumulative, please provide:

Occupation SERVICE PLANNER Employer UTAH TRANSIT AUTHORITY

Business Address 273 S 400 EAST, SALT LAKE CITY, UT 84111

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
ELLEN RAMSBURGH
1503 CAMBRIDGE RD
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1503 CAMBRIDGE RD, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/17/2026

Name & Address:
DANIEL ATKINS
2003 MARRA DR
ANN ARBOR, MI 48103

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2003 MARRA DR, ANN ARBOR, MI 48103

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/17/2026

Name & Address
WILL HATHAWAY
3424 STOWE ST
ANN ARBOR, MI 48103

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 600 W ST JOSEPH ST, LANSING, MI 48933

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

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Page Subtotal 1,002.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/18/2026

Name & Address:
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$ 10.00 $ 40.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, ANN ARBOR, MI 48104

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/18/2026

Name & Address
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 112 SOMERSET DR NE, GRAND RAPIDS, MI 49503

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:
THERESA F ALT
206 EDDY STREET
ITHACA, NY 14850

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/18/2026

Name & Address
JOHN MACIEJEWSKI
1445 NORTHBROOK DR
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation PHYSICIAN Employer THE UNIVERSITY OF MICHIGAN

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

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/19/2026

Name & Address:
CAROLINE MOHAI
1331 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/19/2026

Name & Address
NIKHIL SHIMPI
139 EMERSON PL
APT107
CLINTON HILL, NY 11205

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation LAWYER Employer NATIONAL LABOR RELATIONS BOARD (U.S. GOVERNMENT)

Business Address 26 FEDERAL PLAZA, NEW YORK, NY 10278

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/19/2026

Name & Address:
JENNA L DOW
217 BASKET RD
WEBSTER, NY 14580

$ 3.13 $ 3.13

5. If over $100.00 cumulative, please provide:

Occupation CASHEIR Employer WEGMANS

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
MICHAEL CLARK
6728 RADCLIFFE CT
SAN DIEGO, CA 92122

$ 2.50 $ 2.50

5. If over $100.00 cumulative, please provide:

Occupation ASSET MANAGER Employer EDF

Business Address INNOVATION PKWY, SAN DIEGO, CA 92108

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

---

Page Subtotal 75.63

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
ANTHONY DELLICOLLI
224 N ALTADENA AVE
ROYAL OAK, MI 48067

$100.00 $150.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer NISSAN

Business Address 39001 SUNRISE DR, FARMINGTON HILLS, MI 48331

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/21/2026

Name & Address
DAVID PURUCKER
1955 SE MORRISON ST
PORTLAND, OR 97214

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/22/2026

Name & Address:
ANTHONY CHICKO
4565 WOODLAND AVE
NEWTON FALLS, OH 44444

$10.00 $10.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/23/2026

Name & Address
JAMES KALAN
547 STONETOWN RD
RINGWOOD, NJ 07456

$10.00 $10.00

5. If over $100.00 cumulative, please provide:

Occupation ANALYST Employer NEW YORK POWER AUTHORITY

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/23/2026

Name & Address:
WILLIAM STROEBEL
1315 HUTCHINS AVE
ANN ARBOR, MI 48103

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation EDUCATOR Employer UNIVERSITY OF MICHIGAN

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$ 10.00 $ 105.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 10390 WILSON RD, MONTROSE, MI 48457

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:
AMELIA SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT INSTRUCTOR Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 05/24/2026

Name & Address
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$ 25.00 $ 175.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING RD, ANN ARBOR, MI 48103

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

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Page Subtotal 95.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/24/2026

Name & Address:
LAUREN SARGENT
2815 EMBER WAY
ANN ARBOR, MI 48104

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
AIDAN LAVIS
395 INLET LN
GREENPORT, NY 11944

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer KICKSTARTER

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:
TANYA LOUGHEAD
285 NORWOOD AVE
BUFFALO, NY 14222

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Occupation PROFESSOR Employer CANISIUS COLLEGE

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
COLIN MCGURK
289 3RD AVE
GOWANUS, NY 11215

$ 6.00 $ 6.00

5. If over $100.00 cumulative, please provide:

Occupation SET DESIGNER Employer EXTRA DIMENSIONAL STUDIOS

Business Address _____

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

---

Page Subtotal 66.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/24/2026

Name & Address:
RUAIRI WILLIAMSON
233 W BROADWAY
LOUISVILLE, KY 40202

$ 3.50 $ 3.50

5. If over $100.00 cumulative, please provide:

Occupation WAREHOUSE ASSOCIATE Employer EXPEDITORS

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
AVI BAGLA
910 PARK PL
CROWN HEIGHTS, NY 11216

$ 2.50 $ 2.50

5. If over $100.00 cumulative, please provide:

Occupation CEO Employer SELF

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:
ALAN GAMBOA
35 LINDEN ST
BUSHWICK, NY 11221

$ 6.00 $ 6.00

5. If over $100.00 cumulative, please provide:

Occupation PAYROLL MANAGER Employer MNC GENERAL CONTRACTORS

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
BYRON KIMBALL
1000 SW VISTA AVE
PORTLAND, OR 97205

$ 1.00 $ 1.00

5. If over $100.00 cumulative, please provide:

Occupation PUBLIC RELATIONS Employer MIXTE COMMUNICATIONS

Business Address _____

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

---

Page Subtotal 13.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/24/2026

Name & Address:
JOSEPH LAWLOR
110 GREEN ST
GREENPOINT, NY 11222

$6.00 | $6.00

5. If over $100.00 cumulative, please provide:

Occupation LAWYER Employer HAYNES AND BOONE, LLP

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
JAMES KWAN
4198 WATKINS WAY
SAN JOSE, CA 95135

$6.00 | $6.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

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:
PETER TOMASI
967 BERGEN ST
CROWN HEIGHTS, NY 11216

$2.50 | $2.50

5. If over $100.00 cumulative, please provide:

Occupation TUTOR Employer EPIPHANY ACADEMY

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
NICHOLAS CAPASSO
24 ELMWOOD PARK N
TONAWANDA, NY 14150

$10.00 | $10.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer SPARQ

Business Address

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

---

Page Subtotal 24.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/24/2026

Name & Address:
DANIEL BARASCH
5 ESSEX RD
PLAINVIEW, NY 11803

$ 5.00 $ 5.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
JASON WAN
1876 W 5TH ST
GRAVESEND, NY 11223

$ 6.00 $ 6.00

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:
KYLE DEVASIER
6901 E LAKE MEAD BLVD
LAS VEGAS, NV 89156

$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2026

Name & Address
ADAM LIGHT
37-17 34TH AVE
LIC, NY 11101

$ 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 17.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/24/2026

Name & Address:
SUZANNE MILLER
103 ELM ST
ONEONTA, NY 13820

$ 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 05/24/2026

Name & Address
LUKE HAYES
610 10TH ST
2B
PARK SLOPE, NY 11215

$ 7.00 $ 7.00

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:
LINDA WAN
1202 EDGEWOOD 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 05/25/2026

Name & Address
MINNIE WOOD
6728 YELLOWWOOD COVE ST
NORTH LAS VEGAS, NV 89084

$ 2.77 $ 2.77

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 84.77

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
ERIN E COLEMAN
127 SOUTH HARNER BOULEVARD
COATESVILLE, PA 19320

$ 2.77 | $ 2.77

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 05/26/2026

Name & Address
LINDA DABROWSKI
1202 BROOKLYN AVE
ANN ARBOR, MI 48104

$ 50.00 | $ 175.00

5. If over $100.00 cumulative, please provide:

Occupation HUMAN RESOURCES Employer THE UNIVERSITY OF MICHIGAN

Business Address 345 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 05/26/2026

Name & Address:
MATTHEW DRAKE-BROCKMAN
642 DRIGGS AVE
WILLIAMSBURG, NY 11211

$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/26/2026

Name & Address
DENNIS SHEIL
2125 SOUTHEND DR
APT 115
CHARLOTTE, NC 28203

$ 5.56 | $ 5.56

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 59.33

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/26/2026

Name & Address:
SIRIDATAR KHALSA
3975 SEDGWICK AVE
WEST BRONX, NY 10463

$1.22 $1.22

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 05/26/2026

Name & Address
COLIN VETTIER
53 WEST STREET
PORTLAND, ME 4102

$11.11 $11.11

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:
ROBERT ROSE
1508 MONTCLAIR PL
ANN ARBOR, MI 48104

$100.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 1508 MONTCLAIR PL, ANN ARBOR, MI 48104

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/26/2026

Name & Address
GAYLE NIELSEN
23597 165TH AVE
FORT RIPLEY, MN 56449

$5.56 $5.56

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 117.89

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
ANNE KEMPER
201 W 70TH ST
10K
NEW YORK, NY 10023

$2.78 | $2.78

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 05/26/2026

Name & Address
ANDY COREN
233 OAK KNOLL ROAD
UKIAH, CA 95482

$2.77 | $2.77

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:
NEVYN LANGLINAIS
1308 PALO DURO RD
AUSTIN, TX 78757

$1.11 | $1.11

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 05/26/2026

Name & Address
WILL HATHAWAY
3424 STOWE ST
ANN ARBOR, MI 48103

$100.00 | $600.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 600 W ST JOSEPH ST, LANSING, MI 48933

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

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Page Subtotal 106.66

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
NOAH PURCELL
1220 NE 102ND ST
SEATTLE, WA 98125

$ 22.22 $ 22.22

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 05/26/2026

Name & Address
BRIAN HARVEY
954 TULARE AVE
BERKELEY, CA 94707

$ 11.11 $ 11.11

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:
ALBERT KENNEKE
3031 BORGE ST
OAKTON, VA 22124

$ 11.11 $ 11.11

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 05/26/2026

Name & Address
RYAN MCINTYRE
655 W IRVING PARK RD
CHICAGO, IL 60613

$ 1.11 $ 1.11

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 45.55

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
WESLEY HARRIS
171 TOWN PARK DR
APT 2218
CONROE, TX 77304

$ 5.49 $ 5.49

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
PATRICK NAFARRETE
14 GAY ST
PHOENIXVILLE, PA 19460

$ 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 05/27/2026

Name & Address:
JOHNNY TOWNSEND
10020 59TH AVE S
SEATTLE, WA 98178

$ 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 05/27/2026

Name & Address
ERIC BLANC
839 WEST END AVE
NEW YORK, NY 10025

$ 6.25 $ 6.25

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 46.74

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/28/2026

Name & Address:
PORTIA JUAREZ
4266 LILAC LN
YPSILANTI, MI 48197

$ 35.00 | $ 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 05/28/2026

Name & Address
CHARLES MCVAY
636 HIDDEN VALLEY RD
SHAFTSBURY, VT 05262

$ 8.34 | $ 8.34

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 05/28/2026

Name & Address:
TOBI TELLA
9231 BLUE GRASS RD
PHILADELPHIA, PA 19114

$ 3.83 | $ 3.83

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
LAUREN GABOURY
229 OAKLAWN AVE
YPSILANTI, MI 48198

$ 25.00 | $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation CONSULTANT Employer EAGLE ASSOCIATES

Business Address 229 OAKLAWN AVE, YPSILANTI, MI 48198

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

---

Page Subtotal 72.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/29/2026

Name & Address:
THOMAS LEE
1252 CREEK DR
ANNAPOLIS, MD 21403

$ 4.17 $ 4.17

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 05/29/2026

Name & Address
PETER NELSON
1319 ARDMOOR AVE
ANN ARBOR, MI 48103

$ 150.00 $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer FORD MOTOR COMPANY

Business Address 1319 ARDMOOR AVE, ANN ARBOR, MI 48103

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:
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$ 60.00 $ 235.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING RD, ANN ARBOR, MI 48103

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
CALLUM HOLLEY
230 W WILLIAMS ST
OVID, MI 48866

$ 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 234.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/29/2026

Name & Address:
MATT A.
6938 SADIE LN
VAN BUREN CHARTER TOWNSHIP, MI 48111

$ 8.75 | $ 8.75

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 05/29/2026

Name & Address
EMILY WOODCOCK
216 E AINSWORTH ST
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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/29/2026

Name & Address:
JENNIFER SCHLICHT
612 CONGRESS ST
#1
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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/29/2026

Name & Address
AMANDA HILL
18075 APPOLINE ST
DETROIT, MI 48235

$ 2.50 | $ 2.50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 41.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/29/2026

Name & Address:
OLIVER STROUD
1030 S HOLMES ST
APT210
LANSING, MI 48912

$ 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 05/30/2026

Name & Address
DANIEL BERLAND
1312 CAMBRIDGE RD
ANN ARBOR, MI 48104

$ 1,200.00 $ 1,200.00

5. If over $100.00 cumulative, please provide:

Occupation PHYSICIAN Employer THE UNIVERSITY OF MICHIGAN

Business Address 3305 TAUBMAN CENTER, ANN ARBOR, MI 48103

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/30/2026

Name & Address:
SUSAN STEIGERWALT
16551 WARWICK ST
DETROIT, MI 48219

$ 25.00 $ 175.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/30/2026

Name & Address
SUSAN STEIGERWALT
16551 WARWICK ST
DETROIT, MI 48219

$ 25.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 16551 WARWICK ST, DETROIT, MI 48219

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

---

Page Subtotal 1,255.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/30/2026

Name & Address:
MIA NEUSTEIN
4949 BALTIMORE DR
LA MESA, CA 91942

$16.67 $16.67

5. If over $100.00 cumulative, please provide:

Occupation NURSE PRACTITIONER Employer SAN DIEGO SEXUAL MEDICINE

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/30/2026

Name & Address
ROBINSON BLOCK
4315 DARTER ST
HOUSTON, TX 77009

$5.67 $10.53

5. If over $100.00 cumulative, please provide:

Occupation FIREFIGHTER Employer HOUSTON FIRE DEPARTMENT

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/30/2026

Name & Address:
MALLORY HARRIS
5215A GUADALUPE ST
AUSTIN, TX 78751

$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 05/30/2026

Name & Address
ALLEGRA SILCOX
3451 24TH AVE W
SEATTLE, WA 98199

$16.67 $16.67

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 42.01

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/30/2026

Name & Address:
MOLLY KLUCK
321 MISTFIELD ST
HUNTSVILLE, AL 35811

$4.17 $4.17

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 05/30/2026

Name & Address
LISA HANSEN
4520 N AVE DE PAZ
TUCSON, AZ 85718

$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 05/31/2026

Name & Address:
JAY POPHAM
4802 FLICKER LN
AUSTIN, TX 78744

$4.16 $4.16

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 05/31/2026

Name & Address
JASON SCHULMAN
111-02 111TH ST
SOUTH OZONE PARK, NY 11420

$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 19.33

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/31/2026

Name & Address:
CONNELL HEADY
280 ELM ST
APT1
YPSILANTI, MI 48197

$ 3.34 | $ 3.34

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 05/31/2026

Name & Address
AMY TARANGELO
6703 SW TAYLORS FERRY RD
PORTLAND, OR 97223

$ 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 05/31/2026

Name & Address:
PAUL RIPPEY
9207 N MOHAWK AVE
PORTLAND, OR 97203

$ 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 05/31/2026

Name & Address
THOMAS BOLANOS
2600 CLEARLAKE RD
COCOA, FL 32922

$ 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 28.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/31/2026

Name & Address:
DANIEL KOHN
82 PRINCE ST
KINGSTON, NY 12401

$ 83.33 $ 83.33

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 05/31/2026

Name & Address
JOHN YOUNG
104 RAMBLEWOOD DR
PALM COAST, FL 32164

$ 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 05/31/2026

Name & Address:
ADAIRE SALOME-KEATING
4075 AERIAL WAY
APT114
EUGENE, OR 97402

$ 1.66 $ 1.66

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 05/31/2026

Name & Address
ROBERT BELL
1240 S JACKSON ST
LOUISVILLE, KY 40203

$ 4.16 $ 4.16

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 99.15

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/31/2026

Name & Address:
LIAM CARBALLAL
80 LAFAYETTE AVE
SEA CLIFF, NY 11579

$ 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 05/31/2026

Name & Address
RIGEL WISE
80 NE 14TH AVE
PORTLAND, OR 97232

$ 4.17 $ 4.17

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 05/31/2026

Name & Address:
RICHMOND FLOYD
3452 10TH AVE N
ST. PETERSBURG, FL 33713

$ 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 05/31/2026

Name & Address
HANNAH RODGERS
188 MONTMULLIN ST
LEXINGTON, KY 40508

$ 1.66 $ 1.66

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 20.83

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/31/2026

Name & Address:
NOAH GELL
7 BENNETT AVE
BINGHAMTON, NY 13905

$ 3.33 $ 3.33

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 05/31/2026

Name & Address
GREGG WOODRING
1012 W CROSS ST
YPSILANTI, MI 48197

$ 10.00 $ 60.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer PROPIO LANGUAGE SERVICES

Business Address 10801 MASTIN ST, OVERLAND PARK, KS 66210

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2026

Name & Address:
NATHAN SITARAMAN
606 MADISON ST
ITHACA, NY 14850

$ 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 05/31/2026

Name & Address
LOGAN ROBINETTE
18175 WEBSTER RD
GLADSTONE, OR 97027

$ 2.50 $ 2.50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 25.83

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 05/31/2026

Name & Address:
NICHOLAS PETTROSS
1213 WILLOW BRANCH AVE
JACKSONVILLE, FL 32205

$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 05/31/2026

Name & Address
STEPHANIE BOHR
720 KIRSCH WY
LOUISVILLE, KY 40118

$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 05/31/2026

Name & Address:
JIM OXYER
1365 TYLER PARK DR
LOUISVILLE, KY 40204

$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 05/31/2026

Name & Address
JASON LIANG
4846 KILAUEA AVE
APT1
HONOLULU, HI 96816

$4.17 $4.17

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 29.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/01/2026

Name & Address:
TYLER SHEPPEARD
13581 VIA VARRA
BROOMFIELD, CO 80020

$4.17 $4.17

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/01/2026

Name & Address
DEVIREN ATAKAN
964 CENTRAL AVE
ITHACA, NY 14850

$4.17 $4.17

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/01/2026

Name & Address:
MARY VALERIE RICHTER
1937 CORONADA DR
ANN ARBOR, MI 48103

$50.00 $50.00

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 06/02/2026

Name & Address
DAKOTA HEROLD
256 TITUS AVE
ROCHESTER, NY 14617

$5.00 $5.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer SECRET DIMENSION

Business Address _____

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

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Page Subtotal 63.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
ABIGAIL CORFMAN
331 THURSTON RD
ROCHESTER, NY 14619

$16.67 $16.67

5. If over $100.00 cumulative, please provide:

Occupation GAME DESIGNER Employer

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/02/2026

Name & Address
DAVID BLIVEN
3850 HUDSON MNR TER
RIVERDALE, NY 10463

$166.67 $166.67

5. If over $100.00 cumulative, please provide:

Occupation ATTONERY Employer LAW OFFICES OF DAVID BLIVEN

Business Address 140 GRAND ST, WHITE PLAINS, NY 10601

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/02/2026

Name & Address:
CHUKWUKA IBEH
6310 CHADFORD DR
RALEIGH, NC 27612

$16.67 $16.67

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER IN TEST Employer

Business Address

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/02/2026

Name & Address
CHANPREET SINGH
845 NE 66TH ST
APT 201
SEATTLE, WA 98115

$8.33 $8.33

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer

Business Address

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

Page Subtotal 208.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
EMILY ROGERS-DRISKILL
1726 PALOMAR DR
ANN ARBOR, MI 48103

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR LIVING Employer

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/02/2026

Name & Address
KATIE DORMAN
8 COLUMBUS
DENVER, CO 80216

$ 4.17 $ 4.17

5. If over $100.00 cumulative, please provide:

Occupation SPECIALIST Employer

Business Address

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:
GABRIELLE BOWYER
1721 NEWPORT RD
ANN ARBOR, MI 48103

$ 150.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer ANN ARBOR BEHAVIORAL SERVICES

Business Address 3200 W LIBERTY RD, ANN ARBOR, MI 48103

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
JAVANNI WAUGH
1809 ALBEMARLE RD
FLATBUSH, NY 11226

$ 10.00 $ 10.00

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 189.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
BENJAMIN LENZ
1154 MYRTLE AVE
2R
BROOKLYN, NY 11233

$16.66 | $16.66

5. If over $100.00 cumulative, please provide:

Occupation DATA SCIENTIST Employer

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/04/2026

Name & Address
CATHERINE STANLEY
3321 HYDE PARK AVE
CLEVELAND HEIGHTS, OH 44118

$1.00 | $1.00

5. If over $100.00 cumulative, please provide:

Occupation UNEMPLOYED Employer

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/04/2026

Name & Address:
KEVIN HARRISON
927 SKINNER AVE
PAINESVILLE, OH 44077

$5.00 | $5.00

5. If over $100.00 cumulative, please provide:

Occupation SUSTAINABILITY SPECIALIST Employer

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/05/2026

Name & Address
SUSAN STEIGERWALT
16551 WARWICK ST
DETROIT, MI 48219

$35.00 | $235.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

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Page Subtotal 57.66

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/05/2026

Name & Address:
ZACHARY KNOWLES
2526 17TH ST NW
WASHINGTON, DC 20009

$4.17 | $4.17

5. If over $100.00 cumulative, please provide:

Occupation FUNDRAISER 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
BENJAMIN WOLCOTT
147 O'NEIL ST
KINGSTON, NY 12401

$16.67 | $16.67

5. If over $100.00 cumulative, please provide:

Occupation GOVERNMENTAL AIDE Employer

Business Address

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/05/2026

Name & Address:
GENEVIEVE R CROMWELL
110 WESTMINSTER RD
ROCHESTER, NY 14607

$2.50 | $2.50

5. If over $100.00 cumulative, please provide:

Occupation MAIL CARRIER Employer

Business Address

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
GRETCHEN MCGOWAN
13 TOWN WELL RD
ALEXANDRIA, NH 03222

$1.66 | $1.66

5. If over $100.00 cumulative, please provide:

Occupation ASSISTANT TOWN CLERK Employer

Business Address

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

Page Subtotal 25.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/06/2026

Name & Address:
BRITNEY SMITH
28908 BARTON ST
GARDEN CITY, MI 48135

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER 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
SETH MANGOLD
3422 NORTHWEST AVENUE 37
BELLINGHAM, WA 98225

$ 2.77 $ 5.54

5. If over $100.00 cumulative, please provide:

Occupation COMMUNITY ENGAGEMENT Employer RE SOURCES

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:
IRENE AMETRANO
1513 MONTCLAIR PL
ANN ARBOR, MI 48104

$ 75.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation UNEMPLOYED 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
SANDRA SCHROEDER
412 ROCK CREEK PARK AVE NE
ALBUQUERQUE, NM 87123

$ 1.11 $ 11.11

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

Page Subtotal 103.88

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
JAMES CAPIK
425 TASKER ST
PHILADELPHIA, PA 19148

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation GRAD STUDENT 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
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

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:
TEAMSTERS LOCAL 243 PAC
39420 SCHOOLCRAFT
PLYMOUTH, MI 48170

$ 500.00 $ 500.00

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 06/11/2026

Name & Address
NOLAN WHITNEY
4171 O RD
BELLWOOD, NE 68624

$ 4.17 $ 4.17

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 534.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
BRIAN MCCUE
41 GRANDVIEW AVE
APT 1
CATSKILL, NY 12414

$ 4.17 $ 4.17

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
DAVID BEAUBIEN
1527 WALTHAM 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/14/2026

Name & Address:
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/15/2026

Name & Address
JOE BAUER
1456 WOODLAND 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 129.17

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
CHARLES G SIPPERLEY
10421 BARBARA DR
PINCKNEY, MI 48169

$ 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 06/16/2026

Name & Address
MICHAEL SANDERS
1499 WISTERIA DR
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 06/16/2026

Name & Address:
CELINE LOC
8338 REIFER ST
ROSEMEAD, CA 91770

$ 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 06/16/2026

Name & Address
MALCOLM BARNES
1021 E PLATTE AVE
COLORADO SPRINGS, CO 80903

$ 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 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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
SARAH POLLOCK
5421 HANGING CLIFF COVE
AUSTIN, TX 78759

$ 6.00 $ 6.00

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 06/17/2026

Name & Address
ZAKARYA BENTAMEUR
11060 WOMENS BAY DR
KODIAK, AK 99615

$ 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 06/17/2026

Name & Address:
AMY TURNER
2874 SORRENTO AVE
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation RN Employer MICHIGAN MEDICINE

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

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/18/2026

Name & Address
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$ 50.00 $ 90.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, ANN ARBOR, MI 48104

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

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Page Subtotal 161.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/18/2026

Name & Address:
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 112 SOMERSET DR NE, GRAND RAPIDS, MI 49503

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/19/2026

Name & Address
JOSHUA YAGLEY
951 BRIGHTON LAKE RD
BRIGHTON, MI 48116

$ 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 06/19/2026

Name & Address:
JANET WANG
544 S 5TH AVE
APT 4
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 06/19/2026

Name & Address
FRANCESCO RIZZO
112 W HEMAN ST
EAST SYRACUSE, NY 13057

$ 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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/19/2026

Name & Address:
NADIA DEHKORDI
6198 ORCHARD WOODS DR
WEST BLOOMFIELD, MI 48324

$ 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 06/20/2026

Name & Address
KATHERINE BRADLEY
544 3RD 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 06/20/2026

Name & Address:
IAN ROBINSON
3435 BRENTWOOD CT
ANN ARBOR, MI 48108

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation FACULTY Employer UNIVERSITY OF MICHIGAN

Business Address 435 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 06/20/2026

Name & Address
SHARI THOMPSON
312 WESTWOOD 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

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/20/2026

Name & Address:
MOE FITZSIMONS
300 S REVENA BLVD
ANN ARBOR, MI 48103

$125.00 $925.00

5. If over $100.00 cumulative, please provide:

Occupation ORGANIZER Employer SEIU

Business Address 300 S REVENA BLVD, ANN ARBOR, MI 48103

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
NOA KNOERL-MORRILL
9688 TIMBER HILL CT
DEXTER, MI 48130

$125.00 $125.00

5. If over $100.00 cumulative, please provide:

Occupation TEACHER Employer ANN ARBOR PUBLIC SCHOOLS

Business Address 3116 WILLIAMSBURG RD, ANN ARBOR, MI 48108

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:
MARGARET PERRETT
1719 ABBOTT AVE
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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address
RITA MITCHELL
621 N 5TH AVE
ANN ARBOR, MI 48104

$125.00 $125.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMLOYED

Business Address 621 N 5TH AVE, ANN ARBOR, MI 48104

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

Page Subtotal 395.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address:
ROBERT GLASSMAN
3138 RUMSEY 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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address
STEVEN ARBAUGH
1915 AUSTIN AVE
ANN ARBOR, MI 48104

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation CEO Employer ATTAC CONSULTING

Business Address 315 E EISENHOWER PKWY, ANN ARBOR, MI 48108

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:
TRACY SWINBURN
511 POTTER 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 06/23/2026

Name & Address
DOMENICA TREVOR
1303 E STADIUM 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

---

Page Subtotal 625.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/23/2026

Name & Address:
AARON FOSTER
423 DEDHAM ST
NEWTON, MA 02459

$13.34 $13.34

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 06/23/2026

Name & Address
STEVEN ORTEGA
3526 CHEASTY BLVD S
SEATTLE, WA 98144

$16.66 $16.66

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 06/23/2026

Name & Address:
SANJAY PARKASH
612 7TH AVENUE
SAN BRUNO, CA 94066

$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 06/23/2026

Name & Address
MARK COOK
8 E 9TH ST
2402
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

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/24/2026

Name & Address:
BARRETT KELLER
2027 MOTOR AVE
KINGMAN, AZ 86401

$ 8.33 | $ 8.33

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 06/24/2026

Name & Address
KAI SOLTER
849 W CONIFER CT
LOUISVILLE, CO 80027

$ 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 06/24/2026

Name & Address:
DYLAN MURRAY
825 S QUEBEC ST
APT 309
DENVER, CO 80247

$ 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 06/24/2026

Name & Address
AMELIA SIMPSON
1260 BARRISTER RD
ANN ARBOR, MI 48105

$ 50.00 | $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation GRADUATE STUDENT INSTRUCTOR Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 S STATE ST, ANN ARBOR, MI 48109

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

Page Subtotal 68.33

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/24/2026

Name & Address:
GREG MONROE
1726 PARKER ST
DETROIT, MI 48214

$ 25.00 $ 260.00

5. If over $100.00 cumulative, please provide:

Occupation IT Employer RKT

Business Address 1261 BENDING RD, ANN ARBOR, MI 48103

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
SEAN SHELBROCK
10390 WILSON RD
MONTROSE, MI 48457

$ 10.00 $ 115.00

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 06/24/2026

Name & Address:
MICHAEL DAURIO
1201 S HOPE ST
APT 2611
LOS ANGELES, CA 90015

$ 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 06/24/2026

Name & Address
DANIEL ATKINS
2003 MARRA DR
ANN ARBOR, MI 48103

$ 200.00 $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2003 MARRA DR, ANN ARBOR, MI 48103

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/24/2026

Name & Address:
BENJAMIN LASKI
7426 NW 113TH AVE
PARKLAND, FL 33076

$ 3.75 | $ 3.75

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
ANNIE WOOD
14 SUMMER ST
NORTHAMPTON, MA 01060

$ 6.25 | $ 6.25

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 06/24/2026

Name & Address:
DEREK LIPKIN
325 SIERRA VISTA AVE
MOUNTAIN VIEW, CA 94043

$ 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 06/24/2026

Name & Address
JAKE TURNER
6986 DUSTY MILLER WAY
COLORADO SPRINGS, CO 80908

$ 6.25 | $ 6.25

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 41.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/24/2026

Name & Address:
JACOB CHRASTINA
557 S TRENTON AVE
PITTSBURGH, PA 15221

$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 06/24/2026

Name & Address
PETER MOODY
419 GROVE AVENUE
BOUND BROOK, NJ 08805

$6.25 $6.25

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 06/24/2026

Name & Address:
ELIZABETH GROVER
152 WASHINGTON STREET
BREWER, ME 04412

$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 06/24/2026

Name & Address
JEREMY VARGAS
650 PALISADE AVE
YONKERS, NY 10703

$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 41.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/24/2026

Name & Address:
JACOB WILKS
1032 PIONEER RD
DRAPER, UT 84020

$ 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 06/24/2026

Name & Address
ELYSE LANCE
11201 LOST MAPLES TRAIL
AUSTIN, TX 78748

$ 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 06/25/2026

Name & Address:
ROBIN BECK
1307 PACIFIC ST
APT 3B
CROWN HEIGHTS, NY 11216

$ 6.25 $ 6.25

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 06/25/2026

Name & Address
SINCERE KELSAW
7574 STREAMWOOD 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 56.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/25/2026

Name & Address:
ROBERT WANZEK
6201 JOHNSON DR
214
MISSION, KS 66202

$ 6.25 | $ 6.25

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 06/26/2026

Name & Address
WESLEY HARRIS
171 TOWN PARK DR
APT 2218
CONROE, TX 77304

$ 4.16 | $ 9.65

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 06/26/2026

Name & Address:
NOLAN WHITNEY
4171 O RD
BELLWOOD, NE 68624

$ 6.25 | $ 10.42

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 06/27/2026

Name & Address
ADAM FLANERY
3501 CHAUNCEY RD
TALLAHASSEE, FL 32305

$ 6.25 | $ 6.25

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 22.91

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/27/2026

Name & Address:
MARLEY PRICE
5034 32ND AVE N
SAINT PETERSBURG, FL 33710

$ 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 06/27/2026

Name & Address
ALYSHIA DYER
220 OPFER
WHITMORE LAKE, MI 48189

$ 125.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation SHERIFF Employer WASHTENAW SHERIFF

Business Address 2201 HOGBACK RD, ANN ARBOR, MI 48105

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/27/2026

Name & Address:
CAROLINE MOHAI
1331 MARLBOROUGH DR
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/27/2026

Name & Address
SONJA PAGE
1354 ARDMOOR AVE
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer RETIRED

Business Address 1354 ARDMOOR AVE, ANN ARBOR, MI 48103

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/27/2026

Name & Address:
WILL HATHAWAY
3424 STOWE ST
ANN ARBOR, MI 48103

$ 500.00 $ 1,100.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 600 W ST JOSEPH ST, LANSING, MI 48933

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
JOHN FASTOFF
1222 VERMONT VIEW DR
WATERVLIET, NY 12189

$ 6.25 $ 6.25

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 06/28/2026

Name & Address:
BENJAMIN GRATZ
3104 WESTERN AVE
SEATTLE, WA 98121

$ 1.25 $ 1.25

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 06/28/2026

Name & Address
MICHAEL DIANA
21340 GREENBRIER RD
BOONSBORO, MD 21713

$ 62.50 $ 62.50

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 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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/28/2026

Name & Address:
CHARLES MCVAY
636 HIDDEN VALLEY RD
SHAFTSBURY, VT 05262

$27.00 $35.34

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
NICK CONDER
1240 MORGAN AVE
LOUISVILLE, KY 40213

$12.50 $32.50

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address:
GREG WOODRING
1201 CORNELL RD
YPSILANTI, MI 48197

$50.00 $110.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer PROPIO LANGUAGE SERVICES

Business Address 1012 W CROSS ST, YPSILANTI, MI 48197

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address
NOA KNOERL-MORRILL
9688 TIMBER HILL CT
DEXTER, MI 48130

$500.00 $625.00

5. If over $100.00 cumulative, please provide:

Occupation TEACHER Employer ANN ARBOR PUBLIC SCHOOLS

Business Address 3116 WILLIAMSBURG RD, ANN ARBOR, MI 48108

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

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Page Subtotal 589.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address:
DOMINYKAS SIAUDVYTIS
823 ADDINGTON LN
ANN ARBOR, MI 48108

$ 20.00 $ 120.00

5. If over $100.00 cumulative, please provide:

Occupation WEB DEVELOPER Employer LIMINAL ARC

Business Address 2180 SATELLITE BLVD NW, DULUTH, GA 30097

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
NICHOLAS CAPASSO
24 ELMWOOD PARK N
TONAWANDA, NY 14150

$ 10.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer SPARQ

Business Address

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address:
LAUREN SARGENT
2815 EMBER WAY
ANN ARBOR, MI 48104

$ 50.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/28/2026

Name & Address
NATHANIAL IBRAHIM
207 S 7TH ST
ANN ARBOR, MI 48103

$ 100.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation UNION ORGANIZER Employer SEIU HCMI

Business Address 21700 NORTHWESTERN HWY, SOUTHFIELD, MI 48075

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

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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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 06/28/2026

Name & Address:
OZZIE ZERBST
17170 EVANS ST
ATLANTIC MINE, MI 49905

$ 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 06/29/2026

Name & Address
JAY POPHAM
4802 FLICKER LN
AUSTIN, TX 78744

$ 6.25 $ 10.41

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:
KATHERINE ADAMS
800 W BROADWAY
MONONA, WI 53713

$ 6.25 $ 6.25

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
GARY COZETTE
3100 N LAKE SHORE DR
APT 1910
CHICAGO, IL 60657

$ 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 67.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
MARGOT FINKEL
220 CONGRESS
1D
BROOKLYN, NY 11201

$6.25 | $6.25

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
ASHLEY WINES
22329 MILL RD
NOVI, MI 48375

$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 06/30/2026

Name & Address:
RICHMOND FLOYD
3452 10TH AVE N
ST. PETERSBURG, FL 33713

$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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/30/2026

Name & Address
PATRICK NAFARRETE
14 GAY ST
PHOENIXVILLE, PA 19460

$75.00 | $100.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR SOFTWARE ENGINEER Employer ETSY

Business Address 117 ADAMS ST, BROOKLYN, NY 11201

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

Page Subtotal 106.25

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
DAMIEN BOBREK
9930 PINEAPPLE TREE DR
APT 210
BOYNTON BEACH, FL 33436

$ 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 07/01/2026

Name & Address
SHANE MCCARTHY
14714 BRENLY DR
CYPRESS, TX 77429

$ 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 07/01/2026

Name & Address:
RICHARD CHRISTOPHER
24473 ROSE TERRACE
WILLITS, CA 95490

$ 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 07/01/2026

Name & Address
JAMIE CROM
171 HIGHFIELD DR
COLUMBUS, OH 43214

$ 4.00 $ 4.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 64.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/01/2026

Name & Address:
MICHAEL GROCHOWSKI
2650 S SHORE DR UPPR
MILWAUKEE, WI 53212

$ 8.33 | $ 8.33

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 07/01/2026

Name & Address
PETER R LOVITO
90 MAIN STREET
APT D4
MATAWAN, NJ 07747

$ 8.33 | $ 8.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/01/2026

Name & Address:
ALBERT KENNEKE
3031 BORGE ST
OAKTON, VA 22124

$ 20.00 | $ 31.11

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
CHRISTOPHER LEARY
28 CENTRAL ST.
WOODSVILLE, NH 03785

$ 83.33 | $ 83.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 119.99

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/01/2026

Name & Address:
NOLAN SURMA
113 RIVER ST
APT 1
CAMBRIDGE, MA 02139

$ 8.33 | $ 8.33

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 07/01/2026

Name & Address
CRAIG REGESTER
3125 OAKSHIRE AVE
BERKLEY, MI 48072

$ 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 07/01/2026

Name & Address:
AMBER HARRINGTON
761 SW 134TH WAY
DAVIE, FL 33325

$ 16.50 | $ 16.50

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
KEVIN GRIFFIN
39768 GREENVIEW PL
PLYMOUTH, MI 48170

$ 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 94.83

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
INEZ HEDGES
14 PARK AVE
SOMERVILLE, MA 02144

$ 12.50 $ 12.50

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 07/02/2026

Name & Address
JEFFREY BECK
15 WALNUT ST
APT 2
SOMERVILLE, MA 02143

$ 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 07/02/2026

Name & Address:
VALERIE BISHOP
50 PAMELA DR
PETALUMA, CA 94954

$ 12.50 $ 12.50

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 07/03/2026

Name & Address
GABRIELLE BOWYER
1721 NEWPORT RD
ANN ARBOR, MI 48103

$ 150.00 $ 750.00

5. If over $100.00 cumulative, please provide:

Occupation PSYCHOTHERAPIST Employer ANN ARBOR BEHAVIORAL SERVICES

Business Address 3200 W LIBERTY RD, ANN ARBOR, MI 48103

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/03/2026

Name & Address:
BOB KING
300 S REVENA BLVD
ANN ARBOR, MI 48103

$500.00 $500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMLOYED Employer NOT EMPLOYED

Business Address 300 S REVENA BLVD, ANN ARBOR, MI 48103

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
DRAKE ASHFORD
1200 NW 10TH STREET
BATTLE GROUND, WA 98604

$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 07/03/2026

Name & Address:
ETHAN BARNES
1159 PACIFIC POINTE WAY
ARROYO GRANDE, CA 93420

$4.00 $4.00

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 07/03/2026

Name & Address
ANDREA SIMONS
10350 MACEDONIA 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 555.00

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-2026-001

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report 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 07/04/2026

Name & Address:
AIDAN LAVIS
395 INLET LN
GREENPORT, NY 11944

$ 20.00 $ 45.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer KICKSTARTER

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/05/2026

Name & Address
SUSAN STEIGERWALT
16551 WARWICK ST
DETROIT, MI 48219

$ 35.00 $ 270.00

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 07/05/2026

Name & Address:
DANNY SOLORZANO
115 STONERIDGE DR
WARNER ROBINS, GA 31088

$ 1.50 $ 1.50

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 07/05/2026

Name & Address
ADAM CUSTER
1201 LINCOLNWAY
LA PORTE, IN 46350

$ 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 106.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/05/2026

Name & Address:
EMELINE KANNOW
504 COPPICE COURT
PIEDMONT, SC 29673

$ 7.50 $ 7.50

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 07/06/2026

Name & Address
GRETCHEN MCGOWAN
13 TOWN WELL RD
ALEXANDRIA, NH 03222

$ 2.00 $ 3.66

5. If over $100.00 cumulative, please provide:

Occupation ASSISTANT TOWN CLERK Employer _____

Business Address _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/06/2026

Name & Address:
JUSTIN YUAN
125 S GROVE ST
APT 4F
YPSILANTI, MI 48198

$ 200.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation CUSTODIAN Employer THE UNIVERSITY OF MICHIGAN

Business Address 435 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 07/07/2026

Name & Address
BLAISE MALCZEWSKI
1837 PATTERSON ST
#206
EUGENE, OR 97401

$ 12.50 $ 12.50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 222.00

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/07/2026

Name & Address:
SETH MANGOLD
3422 NORTHWEST AVENUE 37
BELLINGHAM, WA 98225

$ 2.77 | $ 8.31

5. If over $100.00 cumulative, please provide:

Occupation COMMUNITY ENGAGEMENT Employer RE SOURCES

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/07/2026

Name & Address
NOA KNOERL-MORRILL
9688 TIMBER HILL CT
DEXTER, MI 48130

$ 125.00 | $ 750.00

5. If over $100.00 cumulative, please provide:

Occupation TEACHER Employer ANN ARBOR PUBLIC SCHOOLS

Business Address 3116 WILLIAMSBURG RD, ANN ARBOR, MI 48108

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/07/2026

Name & Address:
LORI ARMSTRONG
3430 SUSSEX CT
ANN ARBOR, MI 48108

$ 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 07/08/2026

Name & Address
SANDRA SCHROEDER
17300 QUAKER LN
D-6
ASHTON-SANDY SPRING, MD 20860

$ 1.11 | $ 12.22

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address

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

---

Page Subtotal 168.88

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/08/2026

Name & Address:
ANDREW KIRK
3208 JAMES DR
DALLAS, TX 75227

$ 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 07/08/2026

Name & Address
WENDY CARMAN
2340 GEORGETOWN BLVD
ANN ARBOR, MI 48105

$ 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/09/2026

Name & Address:
JASON BUSSE
1810 MERSHON DR
ANN ARBOR, MI 48103

$ 5.00 $ 30.00

5. If over $100.00 cumulative, please provide:

Occupation FINANCIAL ANALYST Employer DTE ENERGY

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/09/2026

Name & Address
BRENNAN SUMNER
322 HAMILTON ST
APT 3
HARRISON, NJ 07029

$ 2.50 $ 2.50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 97.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/10/2026

Name & Address:
DOMENICA TREVOR
1303 E STADIUM BLVD
ANN ARBOR, MI 48104

$ 50.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation EDITOR Employer DOMENICA TREVOR

Business Address 1303 E STADIUM 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 07/10/2026

Name & Address
LEWIS KUHLMAN
222 JAY ST
LA CROSSE, WI 54601

$ 2.50 $ 2.50

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 07/10/2026

Name & Address:
LINDA WAN
1202 EDGEWOOD AVE
ANN ARBOR, MI 48103

$ 75.00 $ 125.00

5. If over $100.00 cumulative, please provide:

Occupation BAKER Employer THE BREADHEAD COTTAGE BAKERY

Business Address 1202 EDGEWOOD AVE, ANN ARBOR, MI 48103

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

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/10/2026

Name & Address
PAUL TOREK
2035 SUFFOLK AVE
ANN ARBOR, MI 48103

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation INDEPENDENT RESEARCHER Employer SELF

Business Address 2035 SUFFOLK AVE, ANN ARBOR, MI 48103

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

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Page Subtotal 327.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/11/2026

Name & Address:
NICOLE CORPORON
412 OAK ST N
ROCKWELL, IA 50469

$6.25 $6.25

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 07/11/2026

Name & Address
LIBERTY AND JUSTICE FOR ALL PAC
1143 BICENTENNIAL PKWY
ANN ARBOR, MI 48108

$1,000.00 $1,000.00

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 07/12/2026

Name & Address:
ALEXANDER BOOTH
2310 RED SLATE DR
ARCOLA, TX 77583

$2.50 $2.50

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 07/12/2026

Name & Address
LINDA WAN
1202 EDGEWOOD AVE
ANN ARBOR, MI 48103

$100.00 $225.00

5. If over $100.00 cumulative, please provide:

Occupation BREAD BAKER Employer THE BREADHEAD COTTAGE BAKERY

Business Address 1202 EDGEWOOD AVE, ANN ARBOR, MI 48103

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

Page Subtotal 1,108.75

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/13/2026

Name & Address:
LINDSEY SHAMPOE
302 STONEHAVEN DR
EDINBORO, PA 16412

$ 6.50 $ 6.50

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 07/13/2026

Name & Address
CHRISTIAN RATCLIFF
W ROUTH CREEK PKWY
#4207
RICHARDSON, TX 75082

$ 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 07/13/2026

Name & Address:
CHARLES MITCHELL
177 SHERMAN ST
CAMBRIDGE, MA 02140

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation SCIENTIST Employer VISTERRA, INC

Business Address 177 SHERMAN ST, CAMBRIDGE, MA 02140

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/14/2026

Name & Address
CHAI MONTGOMERY
1435 ROSEWOOD ST
ANN ARBOR, MI 48104

$ 25.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation MCO Employer AAATA

Business Address 2700 S INDUSTRIAL HWY, ANN ARBOR, MI 48104

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

Page Subtotal 156.50

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/14/2026

Name & Address:
AMY TURNER
2874 SORRENTO AVE
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation RN Employer MICHIGAN MEDICINE

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

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

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/14/2026

Name & Address
JAN MATTHEW KAGAOAN
614 HAMAKER RD
MANHEIM, PA 17545

$ 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 07/15/2026

Name & Address:
DONNA AINSWORTH
1435 SOUTH BLVD
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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/15/2026

Name & Address
JOHN MACIEJEWSKI
1445 NORTHBROOK DR
ANN ARBOR, MI 48103

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation PHYSICIAN Employer THE UNIVERSITY OF MICHIGAN

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

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

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Page Subtotal 240.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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:
PETER ECKSTEIN
2551 LONDONDERRY RD
ANN ARBOR, MI 48104

$ 350.00 $ 800.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 2551 LONDONDERRY ROAD,

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
JOSEPH LALONDE
1434 KINGWOOD ST
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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/16/2026

Name & Address:
M TROLAN
11150 CLOW CORNER RD
DALLAS, OR 97338

$ 3.34 $ 3.34

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 07/16/2026

Name & Address
RONALD BLIZ
100 MINGES CREEK PL
BATTLE CREEK, MI 49015

$ 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

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Page Subtotal 380.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/16/2026

Name & Address:
SHAHZAD BHATTI
192 NILE PL NE
RENTON, WA 98059

$ 3.34 $ 3.34

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
ANNE DEMUTH
833 SANDHURST DR W
ROSEVILLE, MN 55113

$ 16.67 $ 16.67

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 07/16/2026

Name & Address:
LISA ORRELL
1992 RIDGEVIEW LOOP SW
TUMWATER, WA 98512

$ 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 07/16/2026

Name & Address
SUSAN SHIELDKRET
4140 PARVA AVE
LOS ANGELES, CA 90027

$ 8.34 $ 8.34

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 78.35

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/16/2026

Name & Address:
SHARON MINSUK
2301 CARLMONT DR
BELMONT, CA 94002

$ 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 07/16/2026

Name & Address
IRMA MAJER
2809 BROCKMAN BLVD
ANN ARBOR, MI 48104

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer RETIRED

Business Address 2809 BROCKMAN BLVD, ANN ARBOR, MI 48104

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:
LAMEES ALSHAWKANI
125 W 31ST ST
APT26
NEW YORK, NY 10001

$ 3.34 $ 3.34

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 07/17/2026

Name & Address
LON HERMAN
348 ALBANY ST
FERNDALE, MI 48220

$ 6.67 $ 6.67

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 520.01

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/17/2026

Name & Address:
KASPAR KASPARIAN
221 MICHAWANIC RD
UNIT9-B
WAKEFIELD, NH 03872

$ 1.67 | $ 1.67

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 07/17/2026

Name & Address
VIRGINIA MILLER
440 THOMAR DR
WEBSTER, NY 14580

$ 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 07/17/2026

Name & Address:
RICHARD WADKINS
5415 LAKE HOWELL RD
WINTER PARK, FL 32792

$ 6.67 | $ 6.67

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 07/17/2026

Name & Address
JOAN WOODWARD
13457 N HERITAGE GATEWAY AVE
MARANA, AZ 85658

$ 11.67 | $ 11.67

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 40.01

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/17/2026

Name & Address:
BENJAMIN LIU
1 STATION SQUARE
FLUSHING, NY 11375

$ 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 07/17/2026

Name & Address
TARIK HUSSEINI
2336 N COMMONWEALTH AVE
CHICAGO, IL 60614

$ 16.67 $ 16.67

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:
DONALD DANYKO
3582 GREEN BRIER BLVD
APT404C
ANN ARBOR, MI 48105

$ 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 07/17/2026

Name & Address
SARAH LAVERTUE
6531 SE FEDERAL HWY
STUART, FL 34997

$ 1.67 $ 1.67

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 43.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/17/2026

Name & Address:
LTNN KALFAS
397 FLOODS DR
SPRING GROVE, VA 23881

$ 4.00 $ 4.00

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 07/17/2026

Name & Address
JOSEPHINE COFFEY
248 DUBLIN ST
SF, CA 94112

$ 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 07/17/2026

Name & Address:
WALTER MCMILLAN
21 W GOLF PL
UNIT 7
PAGOSA SPRINGS, CO 81147

$ 3.34 $ 3.34

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 07/17/2026

Name & Address
KEVIN O'TOOLE
6109 ESTUARY CT
FORT COLLINS, CO 80528

$ 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 17.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/17/2026

Name & Address:
EDWARD DE BOO
64 EAGLE ST
PROVIDENCE, RI 02909

$ 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 07/17/2026

Name & Address
DAVID BROWN
11047 MARTINDALE DR W
WESTCHESTER, IL 60154

$ 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/17/2026

Name & Address:
JOHN SINGER
7923 RIDGE AVE
#44
PHILADELPHIA, PA 19128

$ 3.33 $ 3.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/17/2026

Name & Address
WENDY J WILLIS
1615 STRONG RD
VICTOR, NY 14564

$ 8.33 $ 8.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 59.99

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/17/2026

Name & Address:
HOWELL LANKFORD
PO BOX 22331
PORTLAND, OR 97269

$ 8.00 | $ 8.00

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 07/17/2026

Name & Address
M.JANE ROBERTS
29393 LAUREL WOODS DR
#206
SOUTHFIELD, MI 48034

$ 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 07/17/2026

Name & Address:
SANDRA SHUPTRINE
P.O. BOX 1954
JACKSON, WY 83001

$ 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 07/17/2026

Name & Address
BARBRA SOBOL
42 BUGS CT
RANSON, WV 25438

$ 6.34 | $ 6.34

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 69.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/17/2026

Name & Address:
MERCY GRIECO
1692 E RICHMOND AVE
FRESNO, CA 93720

$4.00 $4.00

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 07/17/2026

Name & Address
GERMAINE GOGEL
15 BERKLEY DR
CLINTON, NY 13323

$16.67 $16.67

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:
JAMES STAPLETON
2999 BROWN RD
WATERFORD, PA 16441

$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 07/18/2026

Name & Address
MIKE NOWAK
1394 COLER RD
ANN ARBOR, MI 48104

$10.00 $100.00

5. If over $100.00 cumulative, please provide:

Occupation RESEARCH PROGRAMMER Employer THE UNIVERSITY OF MICHIGAN

Business Address 1394 COLER RD, ANN ARBOR, MI 48104

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

Page Subtotal 55.67

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/18/2026

Name & Address:
TIMOTHY ZEDDIES
112 SOMERSET DR NE
GRAND RAPIDS, MI 49503

$ 50.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer NOT EMPLOYED

Business Address 112 SOMERSET DR NE, GRAND RAPIDS, MI 49503

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/18/2026

Name & Address
ELLEN MASS
104A INMAN ST
CAMBRIDGE, MA 02139

$ 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 07/18/2026

Name & Address:
FATMA ELASHMAWY
488 HEWES CT
SAN JOSE, CA 95138

$ 5.33 $ 5.33

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/18/2026

Name & Address
JUNE VILLECO
1465 GUITERAS DR
BLUE BELL, PA 19422

$ 8.33 $ 8.33

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 68.66

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/19/2026

Name & Address:
CONNOR O'BRIEN
914 MOUNTAIN VIEW AVE
MOUNTAIN VIEW, CA 94040

$ 25.00 $ 41.67

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer CROWDSTRIKE

Business Address

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/19/2026

Name & Address
SCOTT KELLEY
3521 HERMAN AVE
SAN DIEGO, CA 92104

$ 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 07/19/2026

Name & Address:
MOHAMMAD ELAHI
49428 COOKE AVE
PLYMOUTH, MI 48170

$ 33.34 $ 33.34

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 07/19/2026

Name & Address
ANTHONY DELLICOLLI
224 N ALTADENA AVE
ROYAL OAK, MI 48067

$ 100.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation ENGINEER Employer NISSAN

Business Address 39001 SUNRISE DR, FARMINGTON HILLS, MI 48331

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

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Page Subtotal 183.34

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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 07/19/2026

Name & Address:
LUC WETHERBEE
2929 UNIVERSITY AVE SE
APT813
MINNEAPOLIS, MN 55414

$ 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 _____

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

$ _____ $ _____

Click Here for Memo Itemization

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 _____

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

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Page Subtotal 25.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 26,457.75

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: NANCY LEFF 1512 MONTCLAIR PL ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: NOT EMLOYED Employer Name & Business Address: NOT EMPLOYED 1512 MONTCLAIR PL, ANN ARBOR, MI 48104 ☐ 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 CLIPBOARDS 5. Date Of Receipt: 01/15/2026 6. **Vendor Name & Address:**	$ 20.00	$ 520.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address NANCY LEFF 1512 MONTCLAIR PL ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: NOT EMLOYED Employer Name & Address: NOT EMPLOYED 1512 MONTCLAIR PL, ANN ARBOR, MI 48104 ☐ 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 RENTAL OF ANN ARBOR SENIOR CENTER 5. Date Of Receipt: 01/15/2026 6. **Vendor Name & Address:**	$ 144.00	$ 664.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ANDREW THOMPSON 1130 VINEWOOD ST DETROIT, MI 48216 **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 WEBSITE DESIGN 5. Date Of Receipt: 01/16/2026 6. **Vendor Name & Address:**	$ 100.00	$ 100.00
	Page Subtotal	264.00	100.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: ANITA ABBASI 1150 BD REN??-L??VESQUE E MONTREAL, QC H2L 0J6 **If over $100.00 cumulative, please provide:** Occupation: BUSINESS AFFAIRS MANAGER Employer Name & Business Address: INNOCEAN CANADA 720 KING ST W, TORONTO, ON M5V 2T3 ☐ 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 SOCIAL MEDIA 5. Date Of Receipt: 02/17/2026 6. **Vendor Name & Address:**	$ 100.00	$ 100.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address ADA NELSON 1319 ARDMOOR AVE ANN ARBOR, MI 48103 **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 PHOTOGRAPHY 5. Date Of Receipt: 02/23/2026 6. **Vendor Name & Address:**	$ 50.00	$ 50.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LECTURER Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 TRIVIA PRIZE (GROWLER) 5. Date Of Receipt: 02/23/2026 6. **Vendor Name & Address:**	$ 30.00	$ 30.00
	Page Subtotal	180.00	50.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: ELIZABETH NELSON 1319 ARDMOOR AVE 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 TRIVIA PRIZES 5. Date Of Receipt: 02/23/2026 6. **Vendor Name & Address:**	$ 20.00	$ 20.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address NATALIE FULKERSON 559 GALEN CIR ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LIBRARIAN Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 BUTTONMAKING SUPPLIES 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 40.00	$ 190.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: NATALIE FULKERSON 559 GALEN CIR ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LIBRARIAN Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 BEVERAGES 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 50.00	$ 240.00
	Page Subtotal	110.00	20.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: NATALIE FULKERSON 559 GALEN CIR ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LIBRARIAN Employer Name & Business Address: THE UNIVERSITY OF MICHGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 ICE 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 20.00	$ 260.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address SARAH KEELER 23849 LLOYD CT DEARBORN, MI 48124 **If over $100.00 cumulative, please provide:** Occupation: ORGANIZER Employer Name & Address: LECTURERS' EMPLOYEE ORGANIZATION 150 S 5TH AVE, ANN ARBOR, MI 48104 ☐ 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 BEVERAGES 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 50.00	$ 150.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LECTURER Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 PRINTING SUPPLIES 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 25.00	$ 55.00
	Page Subtotal	95.00	150.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: HENRY NELSON 1319 ARDMOOR AVE 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 PHOTOGRAPHY 5. Date Of Receipt: 03/29/2026 6. **Vendor Name & Address:**	$ 50.00	$ 50.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address TODD LEFF 1512 MONTCLAIR PL ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: NOT EMPLOYED Employer Name & Address: NOT EMPLOYED 1512 MONTCLAIR PL, ANN ARBOR, MI 48104 ☐ 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 PRINTING 5. Date Of Receipt: 03/31/2026 6. **Vendor Name & Address:**	$ 260.00	$ 260.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: ANITA ABBASI 1150 BD REN??-L??VESQUE E MONTR??AL, QC H2L 0J6 **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 SOCIAL MEDIA 5. Date Of Receipt: 04/01/2026 6. **Vendor Name & Address:**	$ 250.00	$ 350.00
	Page Subtotal	560.00	660.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: NANCY LEFF 1512 MONTCLAIR PL ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: NOT EMLOYED Employer Name & Business Address: NOT EMPLOYED 1512 MONTCLAIR PL, ANN ARBOR, MI 48104 ☐ 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 ROOM RENTAL 5. Date Of Receipt: 04/21/2026 6. **Vendor Name & Address:**	$ 200.00	$ 889.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LECTURER Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 SOLIDARITY SOFTWARE INC 5. Date Of Receipt: 04/27/2026 6. **Vendor Name & Address:**	$ 199.00	$ 254.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: NATALIE FULKERSON 559 GALEN CIR ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LIBRARIAN Employer Name & Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 MISC ITEMS FROM COSTCO 5. Date Of Receipt: 05/29/2026 6. **Vendor Name & Address:**	$ 94.14	$ 354.14
	Page Subtotal	493.14	1,143.00
	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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

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: NATALIE FULKERSON 559 GALEN CIR ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: LIBRARIAN Employer Name & Business Address: THE UNIVERSITY OF MICHIGAN 435 S STATE ST, ANN ARBOR, MI 48109 ☐ 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 MISC ITEMS FROM TARGET 5. Date Of Receipt: 05/29/2026 6. **Vendor Name & Address:**	$ 23.59	$ 377.73
Contribution # 2 PAC Receipt? ☐ Yes Name & Address ALI RAMLAWI 314 E LIBERTY ST ANN ARBOR, MI 48104 **If over $100.00 cumulative, please provide:** Occupation: RESTURANT OWNER Employer Name & Address: JERUSALEM GARDEN 314 E LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 JERUSALEM GARDEN 5. Date Of Receipt: 05/29/2026 6. **Vendor Name & Address:**	$ 178.80	$ 178.80
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	202.39	556.53
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	1,904.53	

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name BL??M MEAD + CIDER - ANN ARBOR Address 100 S 4TH AVE ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: RENTAL OF BLOM FOR FUNDRAISER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/24/2026 Date	$ 200.00
Expenditure #2 Name SANDWICHES Address ☐ Fund Raiser	Purpose: FOOD FOR FUNDRAISER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/24/2026 Date	$ 182.29
Expenditure #3 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/16/2026 Date	$ 100.70
Expenditure #4 Name LAUREN TRENDLER Address 23831 SHERMAN ST OAK PARK, MI 48237 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/20/2026 Date	$ 570.00
Expenditure #5 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/25/2026 Date	$ 231.08

Subtotal this page	1,284.07
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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ESPY CAF?? Address 404 W HURON ST ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: FUNDRAISER SPACE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/29/2026	$ 120.00
Expenditure #2 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/05/2026	$ 90.00
Expenditure #3 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/12/2026	$ 120.00
Expenditure #4 Name SAWICKI & SON 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	04/14/2026	$ 816.20
Expenditure #5 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/19/2026	$ 240.00

Subtotal this page 1,386.20

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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SAWICKI & SON 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	04/23/2026 Date	$ 816.20
Expenditure #2 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/25/2026 Date	$ 402.80
Expenditure #3 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/26/2026 Date	$ 30.00
Expenditure #4 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/26/2026 Date	$ 90.00
Expenditure #5 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/03/2026 Date	$ 30.00

Subtotal this page	1,369.00
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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/03/2026 Date	$ 270.00
Expenditure #2 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/10/2026 Date	$ 270.00
Expenditure #3 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/17/2026 Date	$ 270.00
Expenditure #4 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/20/2026 Date	$ 556.50
Expenditure #5 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/24/2026 Date	$ 180.00

Subtotal this page	1,546.50
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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: PRINTING CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/27/2026 Date	$ 828.92
Expenditure #2 Name SAWICKI & SON 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	05/29/2026 Date	$ 816.20
Expenditure #3 Name JOSH GRANT Address 18650 GILCHRIST ST DETROIT, MI 48235 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/31/2026 Date	$ 240.00
Expenditure #4 Name UNIT PACKAGING CORP Address 19 W ENTERPRISE DR ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: MAILERS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/02/2026 Date	$ 1,391.47
Expenditure #5 Name NATALIE FULKERSON Address 559 GALEN CIR ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: BUTTON MAKING SUPPLIES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2026 Date	$ 28.61

Subtotal this page	3,305.20
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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name NATALIE FULKERSON Address 559 GALEN CIR ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: CLUBHOUSE RENTAL ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2026 Date	$ 240.00
Expenditure #2 Name NATALIE FULKERSON Address 559 GALEN CIR ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: FOOD FROM JERUSALEM GARDEN ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2026 Date	$ 227.90
Expenditure #3 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/24/2026 Date	$ 296.80
Expenditure #4 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: CARDS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/13/2026 Date	$ 212.00
Expenditure #5 Name CITY PRINTING COMPANY, INC. Address 411 W CROSS ST YPSILANTI, MI 48197 ☐ Fund Raiser	Purpose: MAILERS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/15/2026 Date	$ 1,250.80

Subtotal this page	2,227.50
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-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACTBLUE TECHNICAL SERVICES Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/19/2026 Date	$ 867.72
Expenditure #2 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	$ _____
Expenditure #3 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	$ _____
Expenditure #4 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	$ _____
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	867.72
Grand Total of all Schedules 1B (Complete on last page of Schedule)	11,986.19

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

This Schedule itemizes:

a. ☑ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: WEBSITE DOMAIN REGISTRATION 5. **Date Debt Was Incurred**: 01/05/2026 6. **Original Amount of Debt**: $ 14.00	$ $ $ $ $	$ 0.00	$ 14.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: VAN ACCESS 5. **Date Debt Was Incurred**: 01/08/2026 6. **Original Amount of Debt**: $ 150.00	$ $ $ $ $	$ 0.00	$ 150.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: INITIAL CAMPAIGN BANK ACCOUN 5. **Date Debt Was Incurred**: 01/09/2026 6. **Original Amount of Debt**: $ 5.00	$ $ $ $ $	$ 0.00	$ 5.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 169.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

This Schedule itemizes:

a. ☑ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: TRIVIA NIGHT FUNDRAISER PRIZE 5. **Date Debt Was Incurred**: 02/17/2026 6. **Original Amount of Debt**: $ 30.00	$ $ $ $ $	$ 0.00	$ 30.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: ACTION NETWORK 5. **Date Debt Was Incurred**: 03/21/2026 6. **Original Amount of Debt**: $ 15.00	$ $ $ $ $	$ 0.00	$ 15.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: ACTION NETWORK 5. **Date Debt Was Incurred**: 04/21/2026 6. **Original Amount of Debt**: $ 15.00	$ $ $ $ $	$ 0.00	$ 15.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 60.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number: C-2026-001

2. Committee Name: DAVE ZEGLEN FOR THE PEOPLE

This Schedule itemizes:

a. ☑ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: ACTION NETWORK 5. **Date Debt Was Incurred**: 05/21/2026 6. **Original Amount of Debt**: $ 15.00	$ ____ $ ____ $ ____ $ ____ $ ____	$ 0.00	$ 15.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #2 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: SOLIDARITY TECH 5. **Date Debt Was Incurred**: 05/27/2026 6. **Original Amount of Debt**: $ 201.26	$ ____ $ ____ $ ____ $ ____ $ ____	$ 0.00	$ 201.26 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #3 Corp? ☐ Yes Owed to or by: DAVE ZELGEN 376 HARBOR WAY ANN ARBOR, MI 48103	4. Type: SOLIDARITY TECH 5. **Date Debt Was Incurred**: 06/27/2026 6. **Original Amount of Debt**: $ 217.81	$ ____ $ ____ $ ____ $ ____ $ ____	$ 0.00	$ 217.81 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				

Page Subtotal (Outstanding debt): 434.07

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee): 663.07

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

- 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.
02/24/2026	60	TRIVIA	BLOM 100 S 4TH AVE ANN ARBOR, MI 48104 ☐ Private Residence

7. Total Contributions 1,170.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 1,170.00

10. Total Cost of Event 382.91
(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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

- 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.
03/29/2026	40	BOARD GAMES	ESPY CAFE 404 W HURON ST ANN ARBOR, MI 48103 ☐ Private Residence

7. Total Contributions 457.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 457.00

10. Total Cost of Event 120.00
(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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2026-001

2. Committee Name DAVE ZEGLEN FOR THE PEOPLE

- 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.
05/29/2026	20	SOCIAL EVENT Q&A	GEORGETOWN COUNTRY CLUB 1365 KING GEORGE BLVD ANN ARBOR, MI 48108 ☐ Private Residence

7. Total Contributions 305.42

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) 305.42

10. Total Cost of Event 496.51
(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.