

CANDIDATE COMMITTEE COVER PAGE

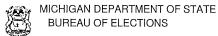
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	l signed by andidate.	3. This Statement covers From	^{1:} 01/01/2022 _{to} 10)/23/2022
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
2021005		HOSKINS	KENNETH	W
		4a. Office Sought Including Dis	strict # or Community Served (If	applicable)
2. Committee Name		CITY COMMISSIONER	, WARD 3, GRAND RAP	IDS
COMMITTEE TO ELECT KENNETH W.	HOSKINS	4b. County of Residence KEI	NT COUNTY	
5. Committee's Mailing Address PO BOX 7212		6. Treasurer's Name & Reside		
GRAND RAPIDS, MI 49510		KATHY L HOSKINS 1758 BLAINE AVE SE		
		GRAND RAPIDS, M		
		GIV (145 TV (156, 141	1 40007	
(616) 291-5631				
Area Code and Phone (616) 291-5631 If the address in this box is different from the comm	ittee			
mailing address on the Statement of Organization, I be sent to this address by the filing official.	mail may	Area Code & Phone (616)	308-8606	
7. Treasurer's Business Address			's Name and Mailing Address (If	the committee has a
1758 BLAINE AVE SE		Designated Record keeper)		
GRAND RAPIDS, MI 49507				
Area Code and Phone (616) 308-8606		Area Code and Phone		
9. TYPE OF STATEMENT		The dead and Thene	9e. Dissolution of Candidate	e Committee
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		1 — · ·	e certify any outstanding debt date or his or her spouse is here
Pre-Election or Post-Election Statement relates to:			by discharged and forgiven, ar	nd no longer collectible from
Primary	July Quart	erly	the committee. The committee owes no lates fees or has any	
— ∫	October Q	uarterly		J
Convention			Further, if the dissolution cannot considered a request for the Ro	
Special	9c. Annua	al Statement (.)	Effective date of diss	solution
School		Coverage Year		
Caucus	(Comp	dment to Campaign Statement lete Item 9a, 9b , 9c or 9e to		
	indicate amend	e which Statement is being ed.)	Note: The disposition of residu Schedule 1B and the Summar	
Date of Floring Companion or Course		,		
Date of Election, Convention or Caucus				
11/08/2022				
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a	L ence was used accurate and co	in the preparation of this statemorphism.	I ent and attached schedules (if a	ny) and to the best of
Current Treasurer or Kathy I Hock	inc		Submitted electronically,	10/00/0000
Designated Record keeper Kathy L. Hosk	1115	/ Clanature	signature on file ———————————————————————————————————	10/28/2022
Type or Print Name		Signature		
Candidate Kenneth W. Hoskins		1	Submitted electronically, signature on file Date	10/28/2022
Type or Print Name		Signature		

1. Committee I.D. Number 2021005

SUMMARY PAGE CANDIDATE COMMITTEE

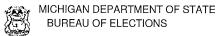
CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Camalatvo tino ologicii oyolo
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 49,305.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 49,305.00	(18.) \$ 53,380.00
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.) \$ 49,305.00	(20.) \$ 53,380.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>125.00</u>	(21.) \$ 379.12
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.) \$ 17,372.11	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 17,372.11	(23.) \$ 18,927.50
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)	(10b.) \$ 0.00	(24.) \$ 0.00
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$ 0.00
12. Debts and Obligations	0.00	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	BALANCE STATEMENT (13.) \$ 2,519.61 (14.) + \$ 49,305.00 (15.) = \$ 51,824.61 (16.) - \$ 17,372.11 (17.) \$ 34,452.50 *	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

Enter contributor's name and address. If contribution is from middle initial. Check box to indicate if contribution is from a Committee (PAC) Report all contributions regardless of amount of the contributions regardless of an order to the contribution of the contributions regardless of a contribution of the contribution of t	Political Commit		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: OLIVIA ANDERSON 2264 SAGINAW RD SE GRAND RAPIDS, MI 49506	I. Date of Receip	ot 12/30/2021	\$ 100.00	
5. If over \$100.00 cumulative, please provide:				
Occupation RETIRED Employer		_		
Business Address		<u> </u>		
Type of Contribution:		Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4 Name & Address SHIRLEY A FOX 6941 S WENTWORTH AVE CHICAGO, IL 60621	. Date of Receip	ot <u>02/18/2022</u>	§ 200.00	_{\$} _200.00
5. If over \$100.00 cumulative, please provide:				
Occupation RETIRED Employer				
Business Address				
Type of Contribution: Direct Loan from a p	person 🗸	Fund Raiser		
3. Contribution #3 PAC Receipt? YES ANAME & Address: LEE ROACH 882 BELFIELD ST SW WYOMING, MI 49509	4. Date of Recei	pt <u>02/18/2022</u>	§25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:				
Occupation RETIRED Employer		-		
Business Address				
Type of Contribution: V Direct Loan from a	person 🗸	Fund Raiser	_	
3. Contribution # 4 PAC Receipt? YES Name & Address JESSIE WALKER 1908 KREISER ST SE GRAND RAPIDS, MI 49506	4. Date of Rece	ipt <u>02/18/2022</u>	_{\$} 50.00	_{\$} _50.00
5. If over \$100.00 cumulative, please provide:				
Occupation RETIRED Employer				
Business Address				
Type of Contribution: Direct Loan from a	person 🗸	Fund Raiser		
		Page Subtotal	375.00	
1 04		and Total of All Schedules 1A ete on last page of Schedule)	Enter this total on	
Page 1 of 24			line 3a of Summary Page.	



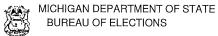
CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

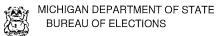
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/18/2022 Name & Address: JOYCE WALKER		
1908 KREISER ST SE	EO 00	E0 00
GRAND RAPIDS, MI 49506	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 02/18/2022 Name & Address	,	
CARMELITA N YOUNG		
410 60TH ST SE	_{\$} 100.00	_{\$} 125.00
KENTWOOD, MI 49548		
5. If over \$100.00 cumulative, please provide:		
Occupation COUNSELOR Employer COUNSELING CENTER OF WEST MICHIGAN		
Business Address 360 E BELTLINE AVE NE, GRAND RAPIDS, MI 49506		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 02/19/2022 Name & Address: OSBE HOSKINS, SR 1330 BALLARD ST SE	_{\$} 50.00	F0 00
GRAND RAPIDS, MI 49507	\$ 30.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 02/22/2022 Name & Address ANTHONY BAKER		
455 MADISON AVE SE	200.00	000.00
GRAND RAPIDS, MI 49503	_{\$} 200.00	_{\$_} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROFESSOR OF SOCIOLOGY Employer FERRIS STATE UNIVERSITY		
Business Address 1201 S STATE ST, BIG RAPIDS, MI 49307		
Type of Contribution:		
Page Subtotal	400.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 2 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

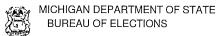
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 02/22/2022 Name & Address: KATHY L HOSKINS 1758 BLAINE AVE SE GRAND RAPIDS, MI 49507 5. If over \$100.00 cumulative, please provide:	_{\$} 150.00	_{\$} 250.00
Occupation RETIRED Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 03/05/2022		
Name & Address TERRENCE DUDLEY 3462 COPPER RIVER AVE SW WYOMING, MI 49418	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR FEDERAL PROJECT MANAGER Employer CERNER CORPORATION		
Business Address 2800 ROCK CREEK PKWY, KCMO, MO 64117		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: SHAQUANDA GORDON 6437 VANTAGE DR SE CALEDONIA, MI 49316	\$ 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation VP HUMAN RESOURCES TALENT & DIVERSITY Employer SPARTANNASH		
Business Address 850 76TH ST SW, BYRON CENTER, MI 49315		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 04/19/2022 Name & Address BRIAN CLOYD 1413 SIGSBEE ST SE GRAND RAPIDS, MI 49506	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Page Subtotal	950.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Following	
Page_3_of_24_	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/02/2022 Name & Address: SAM CUMMINGS 605 ABERDEEN ST NE		
GRAND RAPIDS, MI 49505	_{\$} 1,000.00	_s 1,000.00
5. If over \$100.00 cumulative, please provide:	Ψ	Ψ
Occupation REALTOR Employer CWD REAL ESTATE INVESTMENT		
Business Address 50 LOUIS ST NW, STE 400, GRAND RAPIDS, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/05/2022		
Name & Address		
ELLEN M JAMES 1244 TRAVIS ST NE	100.00	100.00
GRAND RAPIDS, MI 49505	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		r
Type of Contribution:		·
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/08/2022 Name & Address: THOMAS M BRANN 4157 DIVISION AVE S GRAND RAPIDS, MI 49548	_{\$} 250.00	\$ 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation RESTRURANT OWNER Employer BRANNS STEAKHOUSE AND GRILL		
Business Address 4157 DIVISION AVE S, GRAND RAPIDS, MI 49548		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/12/2022 VERUNYCA WILLIAMS 4864 32ND ST SE KENTWOOD, MI 49512	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer	•	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1,400.00	
Grand Total of All Schedules 1A	, , , , , , , , , , , , , , , , , , , ,	
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Page 4 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

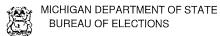
1. Committee I.D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 05/30/2022 Name & Address: JOHNNY BRANN, JR 5057 GRAND RIVER DR NE GRAND RAPIDS, MI 49525	_{\$_} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT/OWNER Employer INTERPHASE INTERIORS		
Business Address 415 LEONARD ST NW, SUITE 110, GRAND RAPIDS, MI 49504 Type of Contribution: Direct Loan from a person Fund Raiser	()	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/31/2022 Name & Address DAN MEYERING 4823 SPRING RIDGE DR NE ADA, MI 49301	_{\$} _1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation CEO TRILLIUM INVESTMENTS Employer TRILLIUM INVESTMENTS Business Address 25 COMMERCE AVE SW, SUITE 100, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/31/2022 Name & Address: HERMAN FACESON 1905 DAWSON AVE NE GRAND RAPIDS, MI 49505	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/04/2022 VENESSA JONES 425 GILBERT ST SE GRAND RAPIDS, MI 49507	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address Type of Contribution: ✓ Direct		·
Page Subtotal	2,135.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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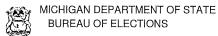
line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/08/2022 Name & Address: VITO P LOMONACO 6152 W FIELDSTONE HILLS DR APT 12 CALEDONIA, MI 49316 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer	_{\$} 100.00	_{\$} 100.00
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/13/2022 Name & Address MARK A MURRAY 649 CAMBRIDGE BLVD SE GRAND RAPIDS, MI 49506	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation VICE CHAIRMAN Employer MEIJER INC		
Business Address 2929 WALKER AVE NW, GRAND RAPIDS, MI 49544 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/18/2022 Name & Address: JOHN KENNEDY 4152 E PARIS AVE SE KENTWOOD, MI 49512	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer AUTOCAM MEDICAL Business Address 4152 E PARIS AVE SE, KENTWOOD, MI 49512 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/20/2022 Name & Address RICK BAKER 335 BRIDGE ST NW SUITE 1600 GRAND RAPIDS, MI 49504 5. If over \$100.00 cumulative, please provide:	_{\$} 500.00	_{\$} 500.00
Occupation PRESDENT Employer GRAND RAPIDS AREA CHAMBER OF COMMERCE		
Business Address 250 MONROE AVE NW, STE 150, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page6 of24	2,100.00 Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

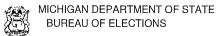
1. Committee I.D. Number 2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 06/22/2022 Name & Address: CHARLIE SECCHIA 5101 SPRING RIDGE DR NE ADA, MI 49301	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer ATTICO VENTURES, LLC Business Address 220 LYON ST NW, GRAND RAPIDS, MI 49503		,
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/23/2022 Name & Address DAVID G FREY 2011 SAN LU RAE DR SE GRAND RAPIDS, MI 49506	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer BANK PRESIDENT		
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/28/2022 Name & Address: MICHAEL J JANDERNOA TRUST 171 MONROE AVE NW STE 410 GRAND RAPIDS, MI 49503	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation FOUNDING PARTNER Employer 42 NORTH PARTNERS		
Business Address 171 MONROE AVE NW STE 410, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/28/2022 Name & Address SUSAN M JANDERNOA TRUST 171 MONROE AVE NW STE 410 GRAND RAPIDS, MI 49503	\$1,000.00	_{\$_} 1,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation FOUNDING PARTNER Employer 42 NORTH PARTNERS		
Business Address 171 MONROE AVE NW STE 410, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	2,750.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

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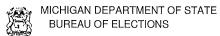
CANDIDATE COMMITTEE

1. Committee I.D. Number ___2021005

2. Committee Name

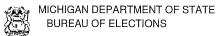
COMMITTEE TO ELECT KENNETH W. HOSKINS

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/29/2022 Name & Address: GRAND RAPIDS CHAMBER PAC 250 MONROE AVE NW STE 150 GRAND RAPIDS, MI 49503	\$5,000.00	_{\$} 5,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/30/2022 Name & Address LYDIA R LEAK 3607 MCCUISTON RD UNIT 4 GREENSBORO, NC 27407 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation RETIRED - COLLEGE ADMINISTRATOR Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: NICHOLAS S AYOUB 1251 M.L.K. JR ST SE GRAND RAPIDS, MI 49506 5. If over \$100.00 cumulative, please provide:	\$ 100.00	_{\$} 100.00
Occupation DISTRICT JUDGE Employer KENT COUNTY MICHIGAN 61ST DISTRICT		
Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/11/2022 Name & Address MARK D MEIJER P.O. BOX 25284 GRAND RAPIDS, MI 49501	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT & CEO Employer LIFE EMS		
Business Address 1275 CEDAR ST NE, GRAND RAPIDS, MI 49503 Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	6,200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 8 of 24	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 07/18/2022 Name & Address: DANIEL HIBMA 1701 PORTER ST SW WYOMING, MI 49519 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer LAND& COMPANY Business Address 1701 PORTER ST SW, WYOMING, MI 49519	_{\$} 500.00	_{\$} 500.00
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/20/2022 Name & Address JAMES CUTTS 7277 MISTY MORNING DR SE CALEDONIA, MI 49316	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:		
Occupation COUNSELOR Employer SELF-EMPLOYED		
Business Address 7277 MISTY MORNING DR SE, CALEDONIA, MI 49316		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/22/2022 Name & Address: ROBERT HUGHES 635 PINE MEADOW LN NE ADA, MI 49301	§300.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER / PRESIDENT Employer ADVANTAGE BENEFITS GROUP		
Business Address 1 IONIA AVE SW, SUITE 300, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/2022 Name & Address RICHARD A WINN P.O. BOX 230036 GRAND RAPIDS, MI 49523	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT Employer AHC HOSPITALITY		
Business Address 187 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal	1,075.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 9 of 24	Enter this total on line 3a of Summary	
Page 9 of 27	Page.	



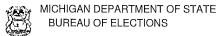
CANDIDATE COMMITTEE

1. Committee I.D. Number 2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

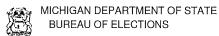
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/25/2022 Name & Address: THOMAS BYLENGA		
1537 HAWTHORNE HILLS DR SE	250.00	250.00
ADA, MI 49301	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT Employer STAR TRUCK RENTALS		
Business Address 3940 EASTERN AVE SE, WYOMING, MI 49508		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/26/2022		
Name & Address KENNETH JAMES		
6472 GRENELEFE DR SE	_{\$} 50.00	_{\$} 50.00
GRAND RAPIDS, MI 49546	\$	\$ 30.00
5. If over \$100.00 cumulative, please provide:		
Occupation CHIEF DIVERSITY OFFICER Employer MUSKEGON COMMUNITY COLLEGE		
Business Address 221 QUARTERLINE RD, MUSKEGON, MI 49442		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/26/2022 Name & Address:	77.00	
JOHNNY BRANN, SR. 7779 TIMBER CANYON DR SE	_{\$} 1,000.00	_{\$} 1,000.00
ADA, MI 49301	* <u></u>	\$ 1,0000
5. If over \$100.00 cumulative, please provide:		
Occupation RESTAURANT OWNER Employer BRANN'S RESTAURANT & GRILL LEONARD ST		
Business Address 401 LEONARD ST NW, GRAND RAPIDS, MI 49504		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/27/2022		
JANIECE DANCE		
1025 TOREN ST SE	50.00	50.00
GRAND RAPIDS, MI 49507	§50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER/PARTNER Employer WILL N' ENTERPRISES		
Business Address		
Type of Contribution: Virect Loan from a person Fund Raiser		
Page Subtotal	1,350.00	
Grand Total of All Schedules 1A		
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Page 10 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

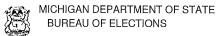
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 08/08/2022 Name & Address: BERNITA K FRIERSON		
	_{\$} 20.00	_{\$} 20.00
5. If over \$100.00 cumulative, please provide: Occupation UNKNOWN Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/08/2022 Name & Address		
JAMES P HACKETT		
1547 BRIARCLIFF DR SE	_{\$} 750.00	_{\$} 750.00
GRAND RAPIDS, MI 49546	Ψ	Ψ
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/10/2022 Name & Address: DOUGLAS A DOZEMAN 1313 TRILLIUM TRAIL NE GRAND RAPIDS TWP, MI 49525	\$ 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer WARNER-NORCROSS & JUDD		
Business Address 150 OTTAWA AVE NW, 1500 WARNER BLDG, GRAND RAPIDS, MI 49503		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/12/2022 Name & Address MATT MISSAD 4182 BAY BEACH LN FORT MYERS BEACH, FL 33931	_{\$} 500.00	_{\$} _500.00_
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer CEO UNIVERSAL FOREST PRODUCTS		
Business Address 2801 E BELTLINE AVE NE, GRAND RAPIDS, MI 49525		
Type of Contribution:		
Page Subtotal	1,770.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) ¹	Enter this total on	.I
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CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/24/2022 Name & Address: DENIS BENNETT 3887 CRYSTAL WATERS LN NE GRAND RAPIDS, MI 49525	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED POLICE OFFICER Employer		
Business Address Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/24/2022 Name & Address TERRI L LAND 7955 BYRON STATION CT SW BYRON CENTER, MI 49315	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation PROPERTY MANAGEMENT Employer SELF EMPLOYED		
Business Address 7955 BYRON STATION CT SW, BYRON CENTER, MI 49315 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/31/2022 Name & Address: TIMOTHY R SCHOWALTER 220 TAOS AVE NE ADA, MI 49301	\$500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT AND CEO Employer PIONEER CONSTRUCTION Business Address 550 KIRTLAND ST SW, GRAND RAPIDS, MI 49507 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/31/2022 Name & Address MIKE VANGESSEL 7740 CARY ST NE ROCKFORD, MI 49341	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation FOUNDER/CEO Employer ROCKFORD CONSTRUCTION		
Business Address 601 FIRST ST NW, GRAND RAPIDS, MI 49504 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	2,150.00 Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

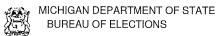
1. Committee I.D. Number __2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/31/2022 Name & Address: GAYLE VANGESSEL 7740 CARY ST NE ROCKFORD, MI 49341	_{\$} 500.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation HOMEMAKER Employer		
Business Address Type of Contribution:		
A. Contribution #2 PAC Receipt? YES A. Date of Receipt 09/06/2022 Name & Address WILLIAM J BRENNAN 4120 E GABLES CT NE GRAND RAPIDS, MI 49525	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY BRENNAN LEGAL CONSULTING Business Address 29 PEARL ST NW, GRAND RAPIDS, MI 49503		
Type of Contribution: 🗸 Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/08/2022 Name & Address: DAVID ECHELBARGER 2382 OTTAWA TRAIL HASTINGS, MI 49058	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation CPA/CGMA/MANAGING PARTNER Employer ECHELBARGER-HIMEBAUGH-TAMM CO Business Address 2301 E PARIS AVE SE, GRAND RAPIDS, MI 49546 Type of Contribution: Loan from a person Fund Raiser		
R. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/12/2022 Name & Address LAURA HUGHES 635 PINE MEADOW LN NE ADA, MI 49301	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation REALTOR/FOUNDING CEO Employer FLEUR DIS LIS DEVELOPMENT GROUP		
Business Address 1519 TOWER GROVE AVE, ST. LOUIS, MO 63110		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)		

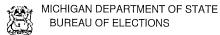
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CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

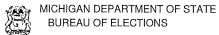
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: DANNY E HICKS 561 HICKORY LANE HOWARD CITY, MI 49329 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$} 150.00
Occupation HI-LO DRIVER Employer BLUE TRITON BRANDS Business Address 19275 8 MILE RD, STANWOOD, MI 49346 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address BRADFORD MATHIS 65 WHITE HILLS AVE NE GRAND RAPIDS, MI 49546	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation VP HUMAN DEVELOPMENT & INCLUSION Employer ROCKFORD CONSTRUCTION		
Business Address 601 FIRST ST NW, GRAND RAPIDS, MI 49504 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: AARON PHELPS 12700 MYERS LAKE AVE NE CEDAR SPRINGS, MI 49319	<u>\$ 100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY / LITIGATION Employer VARNUM LAW, LLP Business Address 333 BRIDGE ST NW, STE 1700, GRAND RAPIDS, MI 49504 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address CHARLES M FRANTZ 645 BATES ST SE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation CHIEF FINANCIAL OFFICER/COMPTROLLER Employer CITY OF GRAND RAPIDS, MICHIGAN Business Address 300 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

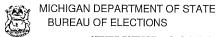
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: JAMES BYL 1965 WALDORF ST NW		
WALKER, MI 49544	_{\$} 250.00	_s 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation FOUNDER/OWNER Employer MULTI-AUTOMATIC TOOL & SUPPLY		
Business Address 1965 WALDORF ST NW, WALKER, MI 49544		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/2022		
Name & Address MONICA STEIMLE-APP		
344 MADISON AVE SE	_s 100.00	_{\$} 100.00
GRAND RAPIDS, MI 49503	Ф	\$ 100100
5. If over \$100.00 cumulative, please provide:		
Occupation SENIOR VP PROPERTY MANAGEMENT Employer ROCKFORD CONSTRUCTION		
Business Address 601 FIRST ST NW, GRAND RAPIDS, MI 49504		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: RICHARD APP 344 MADISON AVE SE GRAND RAPIDS, MI 49503	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation RETENTION AND ATTRACTION SPECIALIST Employer GRAND RAPIDS CHAMBER OF COMMERCE		
Business Address 250 MONROE AVE NW, STE 150, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address MICHAEL HOUSEMAN 3045 RIDGE PORT DR NW GRAND RAPIDS, MI 49544	_{\$} 500.00	. 500.00
·		Ψ
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT WOLVERINE NA Employer WOLVERINE BUILDING GROUP NA		
Business Address 9341 COURTLAND DR NE, ROCKFORD, MI 49351		
Type of Contribution:		
Page Subtotal	950.00	
Grand Total of All Schedules 1A	AND AND DESCRIPTION OF THE PARTY OF THE PART	
(Complete on last page of Schedule)	Enter this total on	J
Page 15 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ____2021005

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 09/14/2022 Name & Address: TIMOTHY STREIT 11160 ANCHOR COVE DR SHELBYVILLE, MI 49344 5. If over \$100.00 cumulative, please provide: Occupation CO-FOUNDER/MANAGING PARTNER Employer GRAND VENTURES, LLC	_{\$} 100.00	_{\$} 100.00
Business Address 99 MONROE AVE NW, STE 502, GRAND RAPIDS, MI 49503 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address M D BUTLER 2999 OVERLOOK SUMMIT DR GRAND RAPIDS, MI 49546 5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	_{\$_} 75.00
Occupation RETIRED Employer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person 🚺 Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: PRIORITY HEALTH PAC - 519252 201 TOWNSEND ST, STE 900 LANSING, MI 48933	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address NICHOLAS S AYOUB 1251 M.L.K. JR ST SE GRAND RAPIDS, MI 49506	_{\$} 100.00	\$ 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation DISTRICT JUDGE Employer KENT COUNTY MICHIGAN 61ST DISTRICT		
Business Address 180 OTTAWA AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
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CANDIDATE COMMITTEE

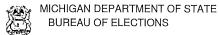
1. Committee I.D. Number 2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: GEORGE K HEARTWELL 8928 S PARSONS AVE NEWAYGO, MI 49337	_{\$} 100.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address VITO P LOMONACO 6152 W FIELDSTONE HILLS DR APT 12 CALEDONIA, MI 49316	_{\$_} 150.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	-	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: JAMES B WHITE 2115 MAUMEE DR SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$_} 100.00_
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED - CITY COMMISSIONER Employer		~
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address CHARLES A BASSETT II 2609 N SOUTHPORT AVE CHICAGO, IL 60614	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation CFO Employer BAMF HEALTH		
Business Address 109 MICHIGAN ST NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	

Page 17 of 24



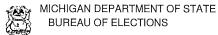
CANDIDATE COMMITTEE

1. Committee I.D. Number 2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 09/14/2022 Name & Address: TERESA NEAL 4766 CHALET LN SW WYOMING, MI 49519	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation		
Business Address 4766 CHALET LN SW, WYOMING, MI 49519		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? ✓ YES 4. Date of Receipt 09/14/2022		
Name & Address		
GRAND RAPIDS CHAMBER PAC 250 MONROE AVE NW STE 150	5 500 00	_{\$} 10,500.00
GRAND RAPIDS, MI 49503	\$_0,000.00	\$_10,300.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/14/2022 Name & Address: CARRIE C O'CONNOR 743 COLLINDALE AVE NW GRAND RAPIDS, MI 49504	\$ 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide: Occupation EDUCATOR Employer ALLENDALE PUBLIC SCHOOLS Business Address 10505 LEARNING LN, ALLENDALE TWP, MI 49401 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/16/2022 Name & Address		
JAMES WILLIAMS 3706 BUTTRICK AVE SE ADA, MI 49301	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:		
Occupation CHAIRMAN Employer WILLIAMS DISTRIBUTING		
Business Address 658 RICHMOND ST NW, GRAND RAPIDS, MI 49504 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	5,950.00	
Grand Total of All Schedules 1A		
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Page	line 3a of Summary Page.	



CANDIDATE COMMITTEE

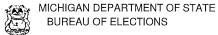
1. Committee I.D. Number __2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

CANDIDATE COMMITTEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 09/19/2022 Name & Address: DANIEL HIBMA 1701 PORTER ST SW WYOMING, MI 49519	_{\$} 550.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer LAND & COMPANY Business Address 1701 PORTER ST SW, WYOMING, MI 49519		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/19/2022 Name & Address GRAND RAPIDS FIOREFIGHTERS UNION LOCAL 366 1930 FULLER AVE NE GRAND RAPIDS, MI 49505	_{\$} 2,000.00	_{\$} 2,000.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/27/2022 Name & Address: RUSSEL RICHTER 4035 CHICAGO DR SW GRANDVILLE, MI 49418	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRINCIPAL REAL ESTATE BROKER Employer RICHTER REALTY		
Business Address 4035 CHICAGO DR SW, GRANDVILLE, MI 49418		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address ROBERT SCHERMER 45 OTTAWA AVE SW STE 600 GRAND RAPIDS, MI 49503	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:		
Occupation CHAIRMAN OF THE BOARD Employer MERITAGE HOSPITALITY GROUP		
Business Address 45 OTTAWA AVE SW STE 600, GRAND RAPIDS, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A		
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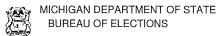
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CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

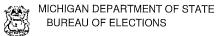
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address: MARIA DEVOS 200 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation BOARDMEMBER Employer RDV CORP Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address		
DOUGLAS L DEVOS 200 MONROE AVE NW GRAND RAPIDS, MI 49503	\$ 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation BOARDMEMBER Employer RDV CORP		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: STEVE EHMANN 200 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation BOARDMEMBER Employer RDV CORP		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address SUZANNE C DEVOS 200 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$_} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation BOARDMEMBER Employer RDV CORP		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	4,200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 20 of 24	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

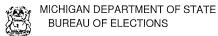
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address: DANIEL DEVOS 200 MONROE AVE NW		
GRAND RAPIDS, MI 49503 5. If over \$100.00 cumulative, please provide: Occupation BOARDMEMBER Employer RDV CORP	\$_1,050.00	_{\$} 1,050.00
Business Address Type of Contribution: 200 MONROE AVE NW, GRAND RAPIDS, MI 49503 Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address PAMELLA DEVOS 200 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation BOARDMEMBER Employer RDV CORP		
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address: BETSY DEVOS 200 MONROE AVE NW GRAND RAPIDS, MI 49503	 _{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation BOARDMEMBER Employer RDV CORP Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/28/2022 Name & Address RICHARD M DEVOS, JR 200 MONROE AVE NW GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$_} 1,050.00
5. If over \$100.00 cumulative, please provide:		
Occupation BOARDMEMBER Employer RDV CORP	-	
Business Address 200 MONROE AVE NW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
TARREST AND COMMING THE LEGISLEY COMMING COMMI		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser Page Subtot	tal 4,200.00	



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 09/28/2022 Name & Address: WILLIAM J BRENNAN 4120 E GABLES CT NE GRAND RAPIDS, MI 49525	_{\$} 250.00	_{\$} 350.00
5. If over \$100.00 cumulative, please provide:		
Occupation GENERAL COUNSEL & VP Employer BRENNAN LEGAL CONSULTING, PLC		
Business Address 4120 E GABLES CT NE, GRAND RAPIDS, MI 49525		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/30/2022 Name & Address		
ROBERT HUGHES 635 PINE MEADOW LN NE ADA, MI 49301	_{\$} 250.00	_{\$} _550.00
5. If over \$100.00 cumulative, please provide: Occupation OWNER/PRESIDENT Employer ADVANTAGE BENEFITS GROUP		
Business Address 1 IONIA AVE SW STE 300, GRAND RAPIDS, MI 49503		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/01/2022 Name & Address: VERNITA M PERRY 1312 FULLER AVE SE GRAND RAPIDS, MI 49506	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation DIRECTOR DINING & RESIDENTIAL CARE Employer CLARK RETIREMENT COMMUNITY		
Business Address 1551 M.L.K. JR ST SE, GRAND RAPIDS, MI 49506		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/01/2022 Name & Address GARY A ROSE 16611 LAKEVIEW ST SPRING LAKE, MI 49456	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:		
Occupation PRESIDENT & COO Employer MERITAGE HOSPITALITY GROUP		
Business Address 45 OTTAWA AVE SW, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	900 00	
	800.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J
Page 22 of 24	line 3a of Summary Page.	



CANDIDATE COMMITTEE

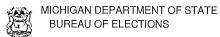
1. Committee I.D. Number 2021005

2. Committee Name

COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or 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 10/05/2022 Name & Address: ANDREW ROBBINS 64 JOHN BALL PARK DR NW GRAND RAPIDS, MI 49504	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide: Occupation HRIS ANALYST Employer GORDON FOOD SERVICE Business Address 4990 CLAY AVE SW, GRAND RAPIDS, MI 49548 Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/07/2022 Name & Address JAMES BOSSENBROEK 38 COMMERCE AVE SW, STE 200 GRAND RAPIDS, MI 49503	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation CHAIRMAN INVESTMENT DEVELOPMENT Employer NORTHGATE HOLDINGS, LLC		
Business Address 38 COMMERCE AVE SW, STE 200, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/07/2022 Name & Address: DAVID O LYNGKLIP 5300 KIES ST NE ROCKFORD, MI 49341	_{\$} 1,050.00	_{\$} 1,050.00
5. If over \$100.00 cumulative, please provide: Occupation RETIRED - SALES Employer		
Business Address Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/13/2022 Name & Address RICK BAKER 335 BRIDGE ST NW, STE 1600 GRAND RAPIDS, MI 49504	_{\$} 500.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please provide: Occupation PRESIDENT Employer GRAND RAPIDS CHAMBER OF COMMERCE		
Business Address 250 MONROE AVE NW, STE, STE 150, GRAND RAPIDS, MI 49503 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	0.050.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	2,650.00 Enter this total on	

Page 23 of 24



CANDIDATE COMMITTEE

1. Committee I.D. Number __2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

Enter contributor's name and address. If comiddle initial. Check box to indicate if cont Committee (PAC) Report all contributions	ribution is from a Political Comi		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: THOMAS E CAMPBELL 7237 MOUNTAIN ASH DR S GRAND RAPIDS, MI 49546	_	eipt <u>10/14/2022</u>	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please pro Occupation SR. STERILIZATION ENGINEE Business Address 520 WATSON	R Employer VIANT-ME			
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address REALTORS POLITICAL ACT 720 N WASHINGTON AVE LANSING, MI 48906	YES 4. Date of Reco	DF MICHIGAN I	_{\$} 1,000.00	_{\$} 1,000.00
5. If over \$100.00 cumulative, please pro	vide:			
Occupation	Employer			
Business Address				•
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address: OPERATING ENGINEERS L 500 HULET DR BLOOMFIELD TWP, MI 4830 5. If over \$100.00 cumulative, please pro Occupation	OCAL 324 STATE C 02 vide:	Peipt 10/19/2022 OF MICHIGAN PAC	_{\$} 250.00	_{\$} 250.00
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Re	ceipt	\$	\$
5. If over \$100.00 cumulative, please pro	vide:			Υ
Occupation			Click Here for	Memo Itemization
Occupation	_ Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Subtotal	1,350.00	
		Grand Total of All Schedules 1A plete on last page of Schedule)	49,305.00]
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Page 24 of 24

line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 2021005

CA	ND	IDA	TF	CON	MMIT.	TFF

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

CANDIDATE COMIN				
Name and Address from whom received If contribution is from an individual, enter last	Type of In-Kind Contribution (Check applicable box) Date of Receipt		7. Amount or Fair Market	8. Cumulative for Election
name first. Check box to indicate if contribution is from a Political Committee or an Independent	5. Date of Receipt6. Name & Address of Vendor from whom goods or services we	are.	Value	Cycle (Through
Committee (Both are commonly called PACs). Report all in-kind contributions.	purchased	316		date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan			
Name & Address: KENNETH W HOSKINS	Goods Donated or Loaned Services Donated	\$	125.00	125.00
1051 EVERGREEN ST SE	✓ Goods or Services Purchased by Candidate or Others	·—		
GRAND RAPIDS, MI 49507	Goods or Services Purchased by Candidate or Others- LOA	AΝ		
If over \$100.00 cumulative, please provide: Occupation: DIRECTOR	Description CAMPAIGN T-SHIRTS	_		
Employer Name & Business Address:	5. Date Of Receipt: <u>07/25/2022</u>			
OAKDALE NEIGHBORS	6. Vendor Name & Address:			
1260 KALAMAZOO AVE SE,	THROUGH THE TREES CRAFTS & DESIGN 1930 ENGLEWOOD DR SE,			
GRAND RAPIDS, MI 49507	GRAND RAPIDS, MI 49506			
Fund Raiser Contribution				
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan			
Name & Address	Goods Donated or Loaned Services Donated			
	Goods or Services Purchased by Candidate or Others	\$		
	Goods or Services Purchased by Candidate or Others- LO	AN		·
If over \$100.00 cumulative, please provide: Occupation:	Description	_		
Employer Name & Address:	5. Date Of Receipt:			
Employer Name a Nau ode.	6. Vendor Name & Address:			
		Clic	k Here for Memo It	emization
Fund Raiser Contribution				
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan			
Name & Address:	Goods Donated or Loaned Services Donated	B	\$	1
	Goods or Services Purchased by Candidate or Others			
	Goods or Services Purchased by Candidate or Others- LOA	ΔN		
If over \$100.00 cumulative, please provide:	Description	_		
Occupation:	5. Date Of Receipt:			
Employer Name & Address:	6. Vendor Name & Address:			
		Clic	k Here for Memo It	emization
	,			
Fund Raiser Contribution			_	
	Page Sub	ototal	125.00	125.00
	Grand Total of all Schedules (Complete on last page of Sche		125.00	



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1	450 450 450 450 450 450 450 450 450 450		
Name THE GRAND RAPIDS TIMES NEWSPAPER		01/12/2022	\$ 372.00
Address 2016 EASTERN AVE SE	Purpose: CAMPAIGN ADVERTISEMENT - INV #	Date	
GRAND RAPIDS, MI 49507			
diandiani, mi 45507			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2	1		
Name LINIC LID COMMUNITY DEVITALIZATION INC		00/00/0000	
Name LINC UP COMMUNITY REVITALIZATION INC		02/03/2022	\$ 250.00
	Purpose: CAMPAIGN FUNDRAISER VENUE	Date	
Address	Purpose:		
1167 MADISON AVE SE			
GRAND RAPIDS, MI 49507			
	Check box if this expenditure is payment of		
П _{с 18} .	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name TIMO ALO O A DOD			
Name TWO A'S & A POD		02/08/2022	\$ 168.75
A 11	CAMPAIGN VIDEO DEPOSIT	Date	₹ 100.73
Address 501 NETHERFIELD ST NW	Purpose: CAMPAIGN VIDEO DEPOSIT	Dato	
COMSTOCK PARK, MI 49321			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement		7
Expenditure #4			
Name COSTCO		02/16/2022	
			\$ 168.62
Address	FUNDRAISER - FOOD PURCHASE FOR 2/18/2022 Purpose:	Date	
5100 28TH ST SE	r dipose.		
GRAND RAPIDS, MI 49512			
annab ma 166, 101 40012			
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
	Statement		
Expenditure #5			
Name PRICE CUTTER		00/4 0/0000	
111100 0011011		02/16/2022	\$ 139.20
Address	FUNDRAISER - FOOD PURCHASE FOR 2/18/2022 Purpose:	Date	100.20
730 28TH ST SE			
GRAND RAPIDS, MI 49548			
·	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous		
Y Tana Halooi	statement		
	Subto	tal this page	1,098.57
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1 16



1. Committee I. D. Number 2021005

Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	Committee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name RJ PRINTING, INC		02/17/2022	\$ 1,327.12
•	RACK CARDS, NOTE PADS, YARD SIGNS	Date	Ψ 1,027.112
Address 1001 2ND ST	Purpose:		
KALAMAZOO, MI 49001			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name GORDON FOOD SERVICE		02/18/2022	
GONDON FOOD SERVICE			\$ <u>93.13</u>
Address	Purpose: FOOD AND CONTAINERS FOR 2/18 FUNDRAISER	Date	
4322 ALPINE AVE NW			
COMSTOCK PARK, MI 49321			
_	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name DOLLAR GENERAL		02/18/2022	
	DALLOONS FOR OAR FUNDRAISER	Date	\$ <u>11.13 </u>
Address 1226 MADISON AVE SE	Purpose: BALLOONS FOR 2/18 FUNDRAISER	Dale	
GRAND RAPIDS, MI 49507			
G. D. W. C. D. C., W. 10007	Check box if this expenditure is payment of		
▼ Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name TWO A'S & A POD		02/22/2022	\$ 506.25
Address	Purpose: CAMPAIGN VIDEO	Date	÷ <u>000.20</u>
501 NETHERFIELD ST NW	Тагрозо.		
COMSTOCK PARK, MI 49321			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name STRIPE.COM			
STRIF L.OOM		02/24/2022	\$ 6.10
Address	Purpose: ELECTRON SVS FEE - CONTRIBUTION 0916P9M2S0E8-1	Date	<u> 0.10</u>
185 BERRY ST STE 550 SF, CA 94107			
01, 0A 34101	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
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1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

E, O	ommittee name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: Check box if this expenditure is payment of	02/24/2022 Date	\$ 3.20
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2 Name LEVEL ONE BANK Address 2355 BURTON ST SE GRAND RAPIDS, MI 49506	Purpose: BANK SERVICE FEE	02/28/2022 ——————————————————————————————————	\$ <u>0.21</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose: ELECTRON SVS FEE - CONTRIBUTION A7V2U1Z0K6M4	03/09/2022 Date	\$ 3.20
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	ELECTRON SVS FEE - CONTRIBUTION Z0W909J1B9G4 Purpose:	03/23/2022 Date	\$ <u>14.80</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name THE MONTGOMERY CODE Address P.O. BOX 69293 GRAND RAPIDS, MI 49516	Purpose: WEBSITE SUBSCRIPTION FEE Check box if this expenditure is payment of	03/29/2022 Date	\$ <u>332.00</u>
Fund Raiser	debt or obligation reported on previous statement	· · · · · · · · · · · · · · · · · · ·	
		tal this page	353.41
	Grand Total of all ((Complete on last page		



1. Committee I. D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

Name and address of person or vendor to whom paid	4 Durage (Deguired Information)	I E Data	C. A
•	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM		04/19/2022	\$ 6.10
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION SSWBJ1J3J2QB	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name STRIPE.COM		05/04/2022	\$ 29.30
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION E8K2O6H8Y917	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3		1110-0446	
Name LINC UP COMMUNITY REVITALIZATION INC	Purpose: CAMPAIGN PROMOTION BOOTH - ROCK THE BLOCK	05/07/2022 ——————————————————————————————————	\$ <u>200.00</u>
Address 1167 MADISON AVE SE GRAND RAPIDS, MI 49507	Purpose:	·	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name KENNETH W HOSKINS		05/07/2022	\$ 525.13
Address	Purpose:	Date	Ψ <u>323.13</u>
1051 EVERGREEN ST SE GRAND RAPIDS, MI 49507	Memo	Itemization Bel	ow
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name RJ PRINTING, INC		05/11/2022	
Address 1001 2ND ST	Purpose: CAMPAIGN PLACARDS	Date	\$ <u>269.24</u>
KALAMAZOO, MI 49001	Check box if this expenditure is payment of debt or obligation reported on previous		
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1. Committee I. D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	ommittee Name		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name ADVANCED CAMPAIGN TECHNOLOGIES		05/27/2022	\$ 400.00
Address 6280 TIMPSON AVE SE	Purpose: GR CITY 3RD WARD VOTER & WALK LIST	Date	
ALTO, MI 49302			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name STRIPE.COM		06/02/2022	\$ 30.75
Address	Purpose:	Date	
185 BERRY ST STE 550			
SF, CA 94107	Memo	Itemization Bel	ow
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name STRIPE.COM		06/02/2022	\$ 29.30
Address	Purpose:	Date	φ <u>23.30</u>
185 BERRY ST STE 550	Purpose:		
SF, CA 94107			
01, 0/10/	Charle have if this grown and it was in normand of		
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name STRIPE.COM		06/03/2022	\$ 1.03
Address	ELECTRON SVS FEE - CONTRIBUTION C5I9U1L7A9W7	Date	Ψ 1.00
185 BERRY ST STE 550	Purpose:		
SF, CA 94107			
31, OA 34107			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
·			
Name STRIPE.COM		06/08/2022	. 0. 00
Address	ELECTRON SVS FEE - CONTRIBUTION ST-R2H104Y9P402 Purpose:	Date	\$ <u>2.00</u>
185 BERRY ST STE 550			
SF, CA 94107			
•	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
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1. Committee I. D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

4. Purpose (Required Information)	5. Date	6. Amount
T		
	06/15/2022	107.10
Purpose: CAMPAIGN PLACARD	Date	\$ <u>137.49</u>
Check box if this expenditure is payment of		
debt or obligation reported on previous statement		
	06/15/2022	\$ 14.80
Purpose: ELECTRON SVS FEE - CONTRIBUTION	Date	
Check box if this expenditure is payment of debt or obligation reported on previous statement		
	06/23/2022	\$ 29.30
Purpose: ELECTRON SVS FEE - CONTRIBUTION G5866778644R3-1	Date	
Check box if this expenditure is payment of debt or obligation reported on previous statement	180011	
	06/23/2022	\$ 14.80
ELECTRON SVS FEE - CONTRIBUTION G586V786V4R3-2 Purpose:	Date	11.00
Check box if this expenditure is payment of debt or obligation reported on previous statement		
	06/24/2022	* 17G OO
Purpose: FUNDRAISER POSTER 36 X 48 INV 1407-8667	Date	\$ <u>176.32</u>
Check box if this expenditure is payment of debt or obligation reported on previous statement		
Subtot	al this page	372.71
	1	
	Purpose: CAMPAIGN PLACARD Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: ELECTRON SVS FEE - CONTRIBUTION Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: ELECTRON SVS FEE - CONTRIBUTION GSB6V7B6V4R3-1 Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: ELECTRON SVS FEE - CONTRIBUTION GSB6V7B6V4R3-2 Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: FUNDRAISER POSTER 36 X 48 INV 1407-8667 Check box if this expenditure is payment of debt or obligation reported on previous statement Subtot Grand Total of all S	Check box if this expenditure is payment of debt or obligation reported on previous statement O6/15/2022 Date



1. Committee I. D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

2,0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	06/24/2022 Date	\$ <u>14.80</u>
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	ELECTRON SVS FEE - CONTRIBUTION R6Y3P805B1Z3	06/27/2022 Date	\$ <u>7.55</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name LEVEL ONE BANK Address 2355 BURTON ST SE	Purpose: BANK SERVICDE FEE	06/30/2022 Date	\$ 0.03
GRAND RAPIDS, MI 49506 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name RJ PRINTING, INC Address 1001 2ND ST KALAMAZOO, MI 49001	Purpose: PLACARD RACK CARDS	07/01/2022 Date	\$ <u>269.24</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	07/05/2022 	\$ <u>1.75</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	293.37
	Grand Total of all S (Complete on last page	1	



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name KENNETH W HOSKINS Address 1051 EVERGREEN ST SE GRAND RAPIDS, MI 49507 Fund Raiser	Purpose:	07/19/2022 Date Itemization Bel	\$ <u>189.95</u>
Expenditure #2 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:ELECTRON SVS FEE - CONTRIBUTION E787Z4N3M5A5	07/22/2022 ———————————————————————————————	\$ <u>9.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION Y1N9T1M7Z5Z5-1	07/26/2022 ——————————————————————————————————	\$ <u>1.75</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	07/26/2022 Date	\$ <u>29.30</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:ELECTRON SVS FEE - CONTRIBUTION C8X5G0P9Q1G5	07/27/2022 Date	\$ <u>1.75</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtol Grand Total of all S (Complete on last page	1	231.75

on line 8a of Summary Page



2021005 1. Committee I. D. Number

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	A Day (Day of the Control of the Con	I F B	
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name LEVEL ONE BANK Address 2355 BURTON ST SE GRAND RAPIDS, MI 49506	Purpose: BANK SERVICE FEE	07/29/2022 Date	\$_0.01_
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name SIGNROCKET CUSTOM SIGNAGE Address 340 BROADWAY AVE	Purpose: YARD SIGNS (200)	08/02/2022 Date	\$ <u>685.00</u>
ST PAUL PARK, MN 55071			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name OHHS TRIFECTA REUNION	Δ,	08/09/2022	\$ 35.00
Address 1130 ALTO AVE SE GRAND RAPIDS, MI 49507	Purpose: Pymt for campaign table at ottawa triffecta reunio	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name THROUGH THE TREES CRAFTS & DESIGNS	·	08/10/2022 —————————————————————————————————	\$ 250.00
Address 1930 ENGLEWOOD DR SE GRAND RAPIDS, MI 49506	Purpose: CAMPAIGN COMMITTEE T-SHIRTS 08102022	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name STRIPE.COM			
Address 185 BERRY ST STE 550	Purpose:	08/22/2022 Date	\$ <u>14.80</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	984.81
			007.01
	Grand Total of all ((Complete on last page		****



2021005 1. Committee I. D. Number

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION Q9P6A1C3J0G0	08/24/2022 Date	\$ 3.20
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name STRIPE.COM		08/31/2022 Date	\$ <u>14.80</u>
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000012997821-1	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	- PAGE ME - 100 -	
Expenditure #3 Name STRIPE.COM		08/31/2022	\$ <u>14.80</u>
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000012997821-2	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	POWER 111111111111111111111111111111111111	
Name STRIPE.COM		08/31/2022 ——————————————————————————————————	\$ 14.80
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name STRIPE.COM		09/06/2022	.0.00
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:ELECTRON SVS FEE - CONTRIBUTION 91000017610921	Date	\$ <u>3.20</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	1	
	Subto	tal this page	50.80
	Grand Total of all S (Complete on last page		



1. Committee I. D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

2.0	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GOTPRINT.COM Address	Purpose: CAMPAIGN LITERATURE	09/06/2022 Date	\$ <u>216.01</u>
N SAN FERNANDO RD BURBANK AIRPORT CENTER BURBANK, CA 91505 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name STRIPE.COM		09/08/2022	\$ 3.20
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	<u></u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name STRIPE.COM Address	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000017968912	09/12/2022 Date	\$ <u>6.10</u>
185 BERRY ST STE 550 SF, CA 94107	Purpose:		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name DERRICK MANNING / MANNING'S HOMETOWN BBQ		09/13/2022 Date	\$ <u>400.00</u>
Address 6130 WOODFIELD DR S.E. APT 9 GRAND RAPIDS, MI 49548	Purpose: FOOD CATERER - 9/12 FUNDRAISER	Dato	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name STRIPE.COM		09/14/2022	4
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	\$ <u>1.75 </u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	627.06
	Grand Total of all ((Complete on last page	I	11,000
		L	



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	ommittee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM		09/14/2022 ——————————————————————————————————	\$ 3.20
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	
√ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name STRIPE.COM		09/14/2022	\$ 3.20
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name STRIPE.COM Address	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000016879800-4	09/14/2022 ——————————————————————————————————	\$ 3.20
185 BERRY ST STE 550 SF, CA 94107			
✓ Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name STRIPE.COM	·	09/14/2022 ——————————————————————————————————	\$ 7.55
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	Date	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name STRIPE.COM	FI FOTFOLIOUS FEET CONTENTS TIGHT ASSOCIATIONS A	09/14/2022	\$ 3.20
Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: Check box if this expenditure is payment of	Date	<u> </u>
✓ Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	20.35
	Grand Total of all \$ (Complete on last page		



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:ELECTRON SVS FEE - CONTRIBUTION 91000016879800-7	09/14/2022 Date	\$ 3.20
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	09/14/2022 Date	\$ <u>3.20</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose:	09/14/2022 Date	\$ <u>14.80</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name KENNETH W HOSKINS Address 1051 EVERGREEN ST SE GRAND RAPIDS, MI 49507	Purpose:CNVING-9/10, WTR/POP/SWEETS/PARKING/SEVWARE-9/12 Memo	09/14/2022 Date	\$ <u>207.18</u>
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name THE GRAND RAPIDS CHAMBER OF COMMERCE Address 250 MONROE AVE NW STE 150	Purpose: 9/12 FUNDRAISER VENUE	09/14/2022 Date	\$ <u>150.00</u>
GRAND RAPIDS, MI 49503 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	378.38
	Grand Total of all ((Complete on last page		



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	09/15/2022 Date	\$ 3.20
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	No. 1 -	
Expenditure #2 Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose:	09/15/2022 ——————————————————————————————————	\$ <u>1.75</u>
SF, CA 94107 Fund Raiser Expenditure #3	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000012175593	09/16/2022 Date	\$ <u>7.55</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name ADVANCE CAMPAIGN TECHNOLOGIES Address 6280 TIMPSON AVE SE ALTO, MI 49302	Purpose: DIRECT MAILING	09/23/2022 	\$ <u>7,880.62</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name KENNETH W HOSKINS Address 1051 EVERGREEN ST SE GRAND RAPIDS, MI 49507	Purpose:	09/27/2022 Date	\$ <u>182.00</u>
Fund Raiser	debt or obligation reported on previous statement	tal this page	0.075.10
	Grand Total of all S (Complete on last page	Schedules 1B	8,075.12



1. Committee I. D. Number 2021005

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

2.0	ommittee (value		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000016775461	09/27/2022 Date	\$ 30.75
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose:ELECTRON SVS FEE - CONTRIBUTION 91000016578544	09/28/2022 Date	\$ <u>14.80</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose: ELECTRON SVS FEE - CONTRIBUTION 91000018049929	09/29/2022 Date	\$ <u>7.55</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name STRIPE.COM Address 185 BERRY ST STE 550 SF, CA 94107	Purpose:	09/30/2022 Date	\$ <u>7.55</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name STRIPE.COM Address 185 BERRY ST STE 550	Purpose:	10/05/2022 Date	\$ <u>1.75</u>
SF, CA 94107 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	62.40
	Grand Total of all S (Complete on last page		
		L	Enter this total



2021005 1. Committee I. D. Number

2. Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name STRIPE.COM		10/13/2022	. 14.00
311 til 2:33 til	ELECTRON CVC FFF CONTRIBUTION OF SECURITIES	Date	\$ <u>14.80</u>
Address 185 BERRY ST STE 550	Purpose:	Date	
SF, CA 94107			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name THE GRAND RAPIDS TIMES		10/18/2022	070.00
THE CHURCH TOUR IDO THINES		Date	\$ <u>372.00</u>
Address	Purpose: CAMPAIGN ADVERTISEMENT - INV #	Date	
2016 EASTERN AVE SE			
GRAND RAPIDS, MI 49507			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
·			
Name LADALL ENTERPRISES		10/20/2022	\$ 1,000.00
Address	Purpose:ADVERTISEMENT / RADIO SCRIPT	Date	φ 1,000.00 ————
13611 SADDLEBRED SPRINGS LN	Purpose:		
CYPRESS, TX 77429			
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	statement		
Name			
Address		Date	\$
Address	Purpose:		
	Cliak L	loro for Momo	Itamization Tuna
		iere ioi ivieriio	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5	\(\frac{1}{2}\)		
Name			
			\$
Address	Purpose:	Date	
	Olista	lava fau Maura	la - main-ali - m Toma -
	Click F Check box if this expenditure is payment of	icie ioi ivieiilo	Itemization Type
П _{т. 15} .	debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	1,386.80
	Grand Total of all S	Schedules 1B	17 372 11

(Complete on last page of Schedule)



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 2021005

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

	- USE A	SEPARATE SH	EET FOR EACH I	EVENT -	200
3. Date Event Was Held		of Individuals Attending ating (whichever is	5. Type of Fund Raising	Activity	6. Address and Name (If any) of th place where the activity was held. LINC COMMUNITY CENT
02/18/2022	,	25	CAMPAIGN ANNOUNCEMEN	NT & KICKOFF	1167 MADISON AVE SE GRAND RAPIDS, MI 4950 Private Residence
7. Total Contributions		475.00			
8. Other Receipts		0.00			
9. Gross Receipts (Add lines 7	and 8)	475.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	662.08 and All Expenditures	Made For the Event)		
11. Check if event was a jo	int fund ra	iser and complete the	following:		
Co-Sponsor(s)		Contribution S (%)	plit		Expenditure Split (%)
	_				
	-				
	-				
	-				
The committee is require period covered by the Committee.			er Schedule for each	fund raisinç	g event held during the

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.

	4	2
Page		of <u></u>



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2021005 1. Committee I.D. Number

2 Committee Name COMMITTEE TO ELECT KENNETH W. HOSKINS

			militee Name	
	- USE A	SEPARATE SH	EET FOR EACH EVENT -	•
3. Date Event Was Held	4. Number or Participa greater)	of Individuals Attending tting (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. GR CHAMBER OF COMMERC
09/12/2022		55	FUNDRAISER	250 MONROE AVE NW, STE 250 GRAND RAPIDS, MI 49503 Private Residence
'. Total Contributions		8,400.00		
3. Other Receipts		0.00		
9. Gross Receipts (Add lines 7	and 8)	8,400.00		
0. Total Cost of Event Total Cost includes In-Kind Cor	ntributions	757.18 and All Expenditures	Made For the Event)	
1. Check if event was a joi		•	·	
Co-Sponsor(s)		Contribution S (%)	plit	Expenditure Split
		(76)		(%)
				(%)
	-			(%)
			·	(%)
				(%)
		(76)		(%)
		(76)		(%)
		(76)		(%)

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.

Page 2 of 2