



REC'D, KENT ELECTIONS
NOV 10 2021 PM 3:22

**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: 7/21/21 to 10/20/21

1. Committee I.D. Number
129220

2. Committee Name
Committee to Keep Joe Jones

4. Candidate Last Name Jones First Name Joe M.I. _____

4a. Office Sought Including District # or Community Served (If applicable)
Board Member - Local

4b. County of Residence **KENT**

5. Committee's Mailing Address
**2528 Orchard View Dr NE
Grand Rapids, MI 49505**

Area Code and Phone 616-340-1014

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
**Tanya Powell-May
5790 Sable Ridge SE
Grand Rapids, MI 49508**

Area Code & Phone 616-308-3556

7. Treasurer's Business Address

Area Code and Phone _____

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

Area Code and Phone _____

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:

Primary
 General
 Convention
 Special
 School
 Caucus

Date of Election, Convention or Caucus _____

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 outstanding assets, owes no lates fees or has any outstanding debt.

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

Effective date of dissolution _____

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

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

Current Treasurer or Designated Record keeper Tanya Powell-May / Tanya Powell-May Signature Date 11/9/21

Candidate Joe Jones / Joe Jones Signature Date 11/9/21



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee to Keep Joe Jones

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/21/21</u> Name & Address: <u>Brian Britton</u> <u>719 Saddlebrook</u> <u>Ada, MI 49301</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>NHA</u> Business Address <u>3850 Broadmoor SE, Grand Rapids, MI 49512</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/21/21</u> Name & Address: <u>Kalli Britton</u> <u>719 Saddlebrook</u> <u>Ada, MI 49301</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Corporate Developer</u> Employer <u>Express Employment Professionals</u> Business Address <u>9701 Boardwalk Blvd., Oklahoma City, OK 73162</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/26/21</u> Name & Address: <u>Darryl Elmouchi</u> <u>3810 Lake Birch St NE</u> <u>Grand Rapids, MI 49525</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Spectrum Health</u> Business Address <u>100 Michigan St NE, Grand Rapids, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/27/21</u> Name & Address: <u>Rosalynn Bliss</u> <u>21 Holmdene Blve NE</u> <u>Grand Rapids, MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Mayor</u> Employer <u>City of Grand Rapids</u> Business Address <u>300 Monroe NW, Grand Rapids, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |

Page Subtotal **4000.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee To Keep Joe Jones

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/28/21</u> Name & Address: <u>Mark Murray</u> <u>649 Cambridge SE</u> <u>Grand Rapids, MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/3/21</u> Name & Address: <u>Michael VanGessel</u> <u>254 Hollister SE</u> <u>Grand Rapids, MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Rockford Construction</u> Business Address <u>601 First St NW, Grand Rapids, MI 49504</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/3/21</u> Name & Address: <u>Gayle VanGessel</u> <u>254 Hollister SE</u> <u>Grand Rapids, MI 49506</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/6/21</u> Name & Address: <u>Christina Freese Decker</u> <u>100 Michigan St NE</u> <u>Grand Rapids, MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Spectrum Health</u> Business Address <u>100 Michigan St NE, Grand Rapids, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee To Keep Joe Jones

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|---------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/9/21</u> Name & Address: <u>Michael Price</u> <u>8175 S. Scenic Dr.</u> <u>Montague, MI 49437</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/11/21</u> Name & Address: <u>David Cassard</u> <u>7870 W Welch Rd #W</u> <u>Empire, MI 49360</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/21/21</u> Name & Address: <u>David Quade</u> <u>3144 Lost Creek Trl NE</u> <u>Grand Rapids, MI 49525</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Regional President</u> Employer <u>Horizon Bank</u> Business Address <u>250 Pearl St NW, Grand Rapids, MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/21/21</u> Name & Address: <u>Daniel Bowen</u> <u>40 Pearl St NW - Suite 1000</u> <u>Grand Rapids, MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Principal Owner</u> Employer <u>Dempsey Ventures</u> Business Address <u>40 Pearl St NW - Suite 1000</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |

Page Subtotal **4000.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee To Keep Joe Jones

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---------------------|---|
| 3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/21/21</u> Name & Address: Sharon Bowen 40 Pearl St NW - Suite 1000 Grand Rapids, MI 49503 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | 1000.00 \$ _____ | 1000.00 \$ _____ Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | \$ _____ | \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | \$ _____ | \$ _____ Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | \$ _____ | \$ _____ Click Here for Memo Itemization |

Page Subtotal **1000.00**

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

13,000.00

Enter this total on
line 3a of Summary
Page.



**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee To Keep Joe Jones

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? <input type="checkbox"/> Yes Owed to or by: Joe Jones 2528 Orchard View Dr NE Grand Rapids, MI 49505 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | 4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>12/1/17</u> 6. <u>Original Amount of Debt:</u> \$ <u>5000.00</u> | _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ | \$ <u>0</u> | \$ <u>5000.00</u> <input type="checkbox"/> FORGIVEN |
| Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Joe Jones 2528 Orchard View Dr NE Grand Rapids, MI 49505 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | 4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>5/23/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>300.00</u> | _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ | \$ <u>0</u> | \$ 5300.00 <u>\$ 300</u> <input type="checkbox"/> FORGIVEN |
| Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Joe Jones 2528 Orchard View Dr NE Grand Rapids, MI 49505 If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | 4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>6/28/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u> | _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____ | \$ <u>0</u> | \$ 5800.00 <u>\$ 500</u> <input type="checkbox"/> FORGIVEN |

Page Subtotal (Outstanding debt) **5800.00**

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.



**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 129220
2. Committee Name Committee To Keep Joe Jones

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? <input type="checkbox"/> Yes Owed to or by: Joe Jones 2528 Orchard View Dr NE Grand Rapids, MI 49505 | 4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>6/4/20</u> 6. <u>Original Amount of Debt:</u> \$ <u>250.00</u> | \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ | \$ <u>0</u> | \$ 6050.00 <u>\$ 250.00</u> <input type="checkbox"/> FORGIVEN |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | |
| Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: | 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____ | \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ | \$ _____ | \$ _____ <input type="checkbox"/> FORGIVEN |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | |
| Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: | 4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____ | \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ | \$ _____ | \$ _____ <input type="checkbox"/> FORGIVEN |
| If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____ | | | | |

Page Subtotal (Outstanding debt) **250.00**
Grand Total of all Schedules 1E **6050.00**

(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.