

OCT 28 2024

AMENDED
CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE	ned by	187			
Report must be legible, typed or printed in ink and sign the treasurer (or designated record keeper) and candi	ned by idate.		01/01/2024	_ 10 _	7/25/2024 M.I.
1. Committee I.D. Number		4. Candidate Last Name		Name	
157659		Villar	Curtis		M
107000		4a. Office Sought Including Distr	rict # or Community	Served (If	
2. Committee Name		Allegan County Prosec	uting Attorney		▼
Committee to Elect Curtis Michael Vi	llar	4b. County of Residence ALLI		V	
5. Committee's Mailing Address		6. Treasurer's Name & Residen	itial Address		
CTE Curtis Michael Villar		Michael Villar			
139 Riverfront Plaza		128 Hill Street			
Allegan, Michigan 49010		Allegan, MI 49010			
Area Code and Phone (269) 673-3292 If the address in this box is different from the committee mailing address on the Statement of Organization, mail be sent to this address by the filing official.	e Il may	Area Code & Phone (616) 29			
7. Treasurer's Business Address		8. Designated Record Keeper's	s Name and Addres	s (If the co	ommittee has a
Michael Villar		Designated Record Keeper)			
128 Hill Street		None			
Allegan, MI 49010					
(0.10) 000 5400					
Area Code and Phone (616) 299-5433	_	Area Code and Phone			1.0
O TYPE OF STATEMENT			9e. Dissolution o	of Candida	ite Committee
	Required Of	NLY if candidate ballot for the	By checking the	his item I/V	Ve certify any outstanding debt
Z Te-Election Six SS.	current year		by the committee t	to the cand	lidate or his or her spouse is here and no longer collectible from
Pre-Election or Post-Election Statement relates to:	July Quar	terly	the committee. The owes no lates fees	e committe or has an	ee has no oustanding assets, y oustanding debt.
X Primary					
General	October 0	Quarterly	Further, if the disso	olution can	not be granted, that this be Reporting Waiver.
Convention					
Special 96	c. Annu	al Statement ()	Effective	e date of di	ssolution
School		Coverage Year			
99	d X Amer	ndment to Campaign Statement	-		
Caucus	(Com	iplete Item 9a, 9b, 9c or 9e to ate which Statement is being	Note: The disposit	tion of resid	dual funds must be reported on
	amen		Schedule 1B and	the Summ	ary Page.
Date of Election, Convention or Caucus	Amo	inded Campaign			
08/06/2024	COMM	ulter Correr Page			
00/00/2024	College	0			
10. Verification: I\We certify that all reasonable diligen	20 1100 11000	I in the preparation of this statem	lent and attached so	chedules (i	f any) and to the best of
10. Verification: I\We certify that all reasonable diligen my\our knowledge and belief the contents are true, ac	curate and c	complete.			
		11/1/	17/11/		10/23/2024
Designated Record keeper	ei villa		/vea_	— Date	10/23/2024
Type or Print Name		Signature	(21 M		
O		A Mal	1 //////		10/23/2024
Candidate Curtis Michael Villar		1 (Mes pugle	def ville	Date	10/23/2024
Type or Print Name		Signature			



CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE	\	Cros ot		
COVER PAGE A legible, typed or printed in ink and signed by	у 3.	This statement dollers From:	to	M.I.
Report must be legible, typed or printed in ink and signed be the treasurer (or designated record keeper) and candidate.	4.	Candidate Last Name	First Name	M
1. Committee I.D. Number		/illar	Curtis Community Served (If applicable)	
157659	4	a. Office Sought Including District	or Community Served (If applicable)	~
2. Committee Name	1	Allegan County Prosecution	O-District Control of the Control of	
Committee to Elect Curtis Michael Villar	4	b. County of Residence ALLEG	AN	
5. Committee's Mailing Address CTE Curtis Michael Villar 139 Riverfront Plaza Allegan, Michigan 49010		6. Treasurer's Name & Residential Michael Villar 128 Hill Street Allegan, MI 49010	Address	
Area Code and Phone (269) 673-3292 If the address in this box is different from the committee mailing address on the Statement of Organization, mail m be sent to this address by the filing official. 7. Treasurer's Business Address	ay	Area Code & Phone (616) 299 8. Designated Record Keeper's Notes Designated Record Keeper)	-5433Name and Address (If the committee ha	s a
7. Treasurer's Business Address Michael Villar 128 Hill Street Allegan, MI 49010		None		
(616) 299-5433		Area Code and Phone	9e. Dissolution of Candidate Commi	ttee
9a. X Pre-Election OR 9b. Post-Election is	equired C not on th urrent yea	ır:	By checking this item I/We certify a by the committee to the candidate or his by discharged and forgiven, and no lon the committee. The committee has no owes no lates fees or has any oustanding.	iny outstanding debt s or her spouse is here ger collectible from oustanding assets,
⊠Primary □	_	Quarterly	Further, if the dissolution cannot be gra considered a request for the Reporting	inted, that this be Waiver.
General Convention Special	cAnr	nual Statement() Coverage Year	Effective date of dissolution	
School 96	u. — (Co	nendment to Campaign Statement omplete Item 9a, 9b, 9c or 9e to licate which Statement is being ended.)	Note: The disposition of residual fund Schedule 1B and the Summary Page	s must be reported on
Date of Election, Convention or Caucus 816124				
		and in the preparation of this state	ment and attached schedules (if any) ar	nd to the best of
10. Verification: I\We certify that all reasonable diliger myour knowledge and belief the contents are true, a Current Treasurer or	nce was u ccurate a	Man Custo Male	Date	125/24
Designated Record keeper Type or Print Name	Now	Signature /	Date 7	125/24
Candidate Type or Print Name		Signature		

1. Committee I.D. Number 157659

2. Committee Name Committee to Elect Curtis Michael Villar

SUMMARY PAGE	2. Committee Name Committee to Elec	. Odrtio imerce
SUIVIVANT TAGE		
CANDIDATE COMMITTEE	Column I This Period	Cumulative this election cycle
RECEIPTS	This i said	
3. Contributions	(3a.) \$	
a. Itemized (Schedule 1A - Column 6)	(3b.) \$NOT APPLICABLE	
b. Unitemized (less than \$20.01 each - no Schedule)	(3c.) \$	(18.) \$
c. Subtotal of "Contributions"	Col	(19.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(20.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)		
IN-KIND CONTRIBUTIONS & EXPENDITURES	27.015.82 5	(21.) \$
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>27,015,82</u> 5 (7.) \$	(22.) \$
6. In-Kind Contributions (25 to tale 4.8 IK. Column 6)	(7.) \$	(22)
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)		
EXPENDITURES	115 117	
8. Expenditures	(8a.) \$ 6,740.43	
a. Itemized (Schedule 1B, Column 6)		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
b. Itemized Get-Oditalis Vol. ((8c.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(9.) \$ 6790,43	(23.) \$
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (9.) φ	
9. TOTAL EXILENCE DISPURSEMENTS		
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
	(10a.) \$	
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
b. Unitemized (less than \$50.01 each	(106.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(11.) \$	(24.) \$
(Add Line 10a + Line 10b)	(11.) \$	
DEBTS AND OBLIGATIONS		1
12. Debts and Obligations	(12a.) \$	-
a. Owed by the Committee (Schedule 1E)	(124) +	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
b. Owed to the Committee (Concession)	BALANCE STATEMENT	- 19
	0,06	£ 1,50'
13. Ending Balance of last report filed	(13.) \$	V
	(14.) + \$	10/01/
(Enter zero if no previous reporting period 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(15.) = \$ 6980,00	01 (11) 22
	6790,43	260812,51
16 Amount expended during reporting porting	(10.) 4	a Delot 2
(Add lines 9 and 11)	(17.) \$ 189 • 57	Dec.
(Subtract line 16 from line 15)	,	



Page _____of ____

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

Page.

SCHEDULE 1A	1. Committee I.D. Number	mmittee to	Elect Gutis Michael V
CANDIDATE COMMITTEE	ter lest name first name.	6. Amount	Flection Cycle for Each
Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	nittee or an Independent		Contributor (Through date of receipt)
Committee (PAC) Report sin	eipt 31.6/24	- 150 CC	\$ (00°C
City (1000) City	,		for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Employer		Click Hero	
Business Address	Fund Raiser		
Type of Contribution. PAG Receipt? YES 4. Date of Re		_	
3. Contribution #2 Name & Address Brenda Hombin, 2555 Haas Dr.	, Allegan, MI	49010 \$ 100°	\$ 200 00
			e for Memo Itemization
5. If over \$100.00 cumulative, please provide: Employer			
Occupation			
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Name & Address: Steve & Kristen Gumpert, 3005 Old MI 4940 &	Receipt 3/6/24 Allegan Ed, Fewer	Click He	\$ 300 °C
5. If over \$100.00 cumulative, please provide:			
Occupation Employer		_	
Business Address	Fund Raiser		
Type of Contribution: Direct Laboratory A. Date	of Receipt		
3. Contribution #4 Name & Address Ron Dolowgo wski, 4332 Alpine 7	Dr., Don, MI 4932	3 \$ 100	\$ 400 60
			ere for Memo Itemization
5. If over \$100.00 cumulative, please provide: Employer			
Occupation		_	
Business Address Loan from a person	n Fund Raiser Page	Subtotal 400	90
	Grand Total of All Sche (Complete on last page of S	dules 1A Schedule) Enter this line 3a of 5	otal on Summary



Committee ID No. 157659

Page.

BUREAU OF ELECTIONS	Commi	LLEC ID ITTO	
ITEMIZED CONTRIBUTIONS	1. Complex (4) Thanker	t- Floot Cu	rtis Michael Villar
SCHEDULE 1A	2. Committee Name Com	mittee to Elect Ou	
inter contributor's name and address. If contribution is from an individual, ended initial. Check box to indicate if contribution is from a Political Comminidate initial. Check box to indicate if contribution is from a Political Comminicate in the contributions regardless of amount.	-ter lest name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
iddle initial. Check box to indicate it contribution is normalized initial. Check box to indicate it contribution is normalized initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Showing the contribution is normalized in initial. Showing the contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contribution is normalized in initial. Check box to indicate it contributions regardless of amount. Contribution # 1	pt 31624	\$ 300°	\$ 70000
		Click Here	for Memo Itemization
Direct Loan from a person	11 49423 Fund Raiser		
PAC Receipt? YES 4. Date of Re	sego MI 49078		
		Click Here	e for Memo Itemization
5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Rusiness Address	Fund Raiser		
Two of Contribution: Direct Loan from a person			
PAC Receipt? YES 4. Date of F	Receipt 316124		
Name & Address: Brett De Mond, 2218 Gleth St., Fennuill	49408	\$_100C	\$ 175000
		Click He	re for Memo Itemization
Occupation Couter St. Douglas, W	DeMonds Super T 49406	Valu	
Type of Contribution: Direct Loan from a person PAC Receipt? YES 4. Date of	of Receipt 3/6/24		
3. Contribution # 4 Name & Address Holly Verde, 231 N. 120th Ave, Ho	Ibud, MI	\$ 100	\$ 1850
t des places provide:		Click H	ere for Memo Itemization
If over \$100.00 cumulative, please provide: Occupation Employer			
Business Address Loan from a person	Fund Raiser		(20)
Type of Contribution: Direct Loan Horr a possess	Page	Subtotal 1450	0=
	Grand Total of All Sched (Complete on last page of S	chedule) Enter this line 3a of	total on Summary

Page 2 of 8



Committee ID No. 157659

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	Commit	tee ID No. 15	57659
ITEMIZED CONTRIBUTIONS			urtis Michael Villar
SCHEDULE 1A	2. Committee Name	Tillee to Lieur	7. Cumulative for
Enter contributor's name and address. If contribution is from an individual, entended initial. Check box to indicate if contribution is from a Political Committee (20.2) Report all contributions regardless of amount.	er last name, first name, e or an Independent	6. Amount	Election Cycle for Each Contributor (Through date of receipt)
middle initial. Check box to indicate if contribution in indicate in contribution in indicate in contribution in indicate if contribution in indicate in i	316/24	\$ 60 SE	
Business Address Loan from a person	Fund Raiser		
Type of Contribution. Direct Luce 4 Date of Recei	ot 217124		¥
3. Contribution #2 PAC Receipt? YES 4. Date of Manne & Address Janis De Haan, 1577 Larry St., Allegan,		\$ 500	\$ 1960
		Click Her	e for Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Employer			
Business Address	Fund Raiser		
Turns of Contribution: Direct Loan from a person L			
3. Contribution #3 PAC Receipt? YES 4. Date of Re Name & Address: William A. Baillargeon, 64444 Ototeman Tr	1, Sangatuck MI	\$ 250 Click He	\$ 22 10 ere for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation	County MI 49010		
3. Contribution # 4 PAC Receipt? YES 4. Date of Name & Address Robert and Melanie White, 1109 Re Grand Rapids, MI 49	salie Lue., NW,	s 100	<u>\$ 2310°0</u>
Grand Rapids, MI 49	504		
5. If over \$100.00 cumulative, please provide:		Click I	Here for Memo Itemization
Occupation Employer		_	
Business Address Loan from a person	Fund Raiser	Subtotal 111	0 =0
Type of continue	Page S Grand Total of All Sched (Complete on last page of Sc	ules 1A chedule)	

Page 3 of 8



Page 4 of 8

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

Committee ID No. 157659

SCHEDULE 1A	1. Com	mittee to Elect Ci	urtis Michael Villar
CANDIDATE COMMITTEE	2. Committee Name	6. Amount	7 Cumulative for
Enter contributor's name and address. If contribution is from an individual, and the initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	enter last name, first name, ttee or an Independent	6, Amount	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipte ame & Address: Vevde Law Offices, 281 N. 120th Ave., t	pt 3119124	\$ 100°C	s 2410°°
5. If over \$100.00 cumulative, please provide: Occupation Employer		Click Here	for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Direct YES 4. Date of Receipt?	Fund Raiser seipt 3/19/24		
Name & Address Wind Dancer Properties, 281 N. 120th All,	Holland, MI 494	\$ 100°°	\$ 251000
		Click Her	e for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of F. Name & Address: Michael and Marlene Borro, 2309 Tea	cumsel Dr.	\$SClick He	\$ 2810°° ere for Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
2 Contribution # 4	Fund Raiser of Receipt 3 29 24		
Name & Address Wike Watsh, 1190 Edin borough Dr. MI 49441	, Norton Shoves,	\$ 115	<u>2925</u>
5. If over \$100.00 cumulative, please provide:	T.	Click H	lere for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Atty Employer School Schoo	f-employed orton Shoves, M	49441	
Business Address Trype of Contribution: Direct Loan from a person	Fund Raiser Page	Subtotal 015	20
	Grand Total of All Sched (Complete on last page of S	ules 1A chedule) Enter this line 3a of Page.	total on Summary



Page <u>5</u> of <u>8</u>

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

Committee ID No. 157659

ITEMIZED CONTRIBUTIONS	1. Springting LU Nut	1105	t Curtin Mich	nael Villar
SCHEDULE 1A	2. Committee Name	Committee to El		
inter contributor's name and address. If contribution is from an individual, ended initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	enter last name, first nar		Electio	ulative for n Cycle for Each outor (Through receipt)
Committee (PAC) Report an obtained	pt 5724	9 Mt 8 40	Here for Mem	2965 500
5. If over \$100.00 cumulative, please provide: Occupation Employer		——————————————————————————————————————	Here for Men	o itemization
Type of Contribution: Direct Loan from a person A. Date of Receipt? Name & Address				•0
James Holmes, 864 19th St., Otsego, N	7 101	\$ <u>55</u>		3015 °C mo Itemization
5. If over \$100.00 cumulative, please provide:				
Occupation Employer				
Business Address	Fund Raiser			
Type of Contribution: Direct Loan from a person		ď		
3. Contribution # 3 PAC Receipt? YES 4. Date of R				
Name & Address: Brondan Mur, 4401 Sunsit Walk,	Holland, MI	\$	0	\$ 3115
		Clic	ck Here for Me	emo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Project Manage Employer 40 Bro		uct Devolop	ment	
Business Address Type of Contribution: Direct Loan from a person	Fund Raiser			
3. Contribution # 4 PAC Receipt? YES 4. Date of Name & Address Tim & Sandy Miller, 1914 Arrowhead to	Receipt al, Allegan M	L 4900	LDC-OC	\$ 3215°°
TIM & Sandy Miller,		\$	100	\$
5. If over \$100.00 cumulative, please provide:			lick Here for N	1emo Itemizatior
Occupation Employer				
Business Address Loan from a person	Fund Raiser		mt?	
Type of Contribution: Direct Loan from a person		Page Subtotal	29000	
	Grand Total of All (Complete on last pag	e of Schedule) Fnte	er this total on 3a of Summary ge.	

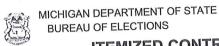


Page of 8

ITEMIZED CONTRIBUTIONS

Committee ID N	o. 157659
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SCHEDULE 1A CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, er middle initial. Check box to indicate if contribution is from a Political Committee (DAC) Percent all contributions regardless of amount.	2. Committee Name	6. Amount	rtis Michael Villar
Enter contributor's name and address. If contribution is from an individual, or		1	Election Cycle for Each
niddle initial. Office box to a contributions regardless of amount.	ee or an Independent		Contributor (Through date of receipt)
middle initial. Check box to indicate it contribution is normalized in the model of the committee (PAC) Report all contributions regardless of amount. 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt alme & Address: Kent Sally Bryen, 3238 Wildwood Drive.	617/24	-	s 3415 °C
5. If over \$100.00 cumulative, please provide: Occupation Purcher Employer Clog Source Business Address 378 144th Ave Ham ton Type of Contribution: Direct Loan from a person	MT 49419 Fund Raiser	Click Here	for Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Andrews 402 E. Main St., April 49328	+ BZ, Hapkins,	\$ 75 °C	\$ 3490 °C for Memo Itemization
If over \$100.00 cumulative, please provide: Occupation Employer Occupation		Click Here	IOI MOITO ROTT
Type of Contribution: Direct Loan from a person 3. Contribution # 3 Name & Address: Sandy Dalton, 332 Herking, Alleg		\$ 50 Click Her	\$ 3540°°° e for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person 3. Contribution # 4 Name & Address Christian Madwork, 170 fank Avenu ### 49010		\$ 200	\$ 35 60 ere for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Employer		Click He	TE TOT METHO ROTHERS
Business Address Loan from a person	Fund Raiser Page S Grand Total of All Schedu (Complete on last page of Sch	les 1A	

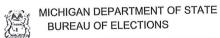


ITEMIZED CONTRIBUTIONS

Committee ID No. 157659

Enter this total on line 3a of Summary

ITEMIZED CONTRIBUTIONS	1 Countries (D. merche)		
SCHEDULE 1A	Com	mittee to Elect Cu	rtis Michael Villar
CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	2. Committee Name enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Address: 3. Secondary Hamby 2555 Hass Dr., Alleger Address Prenda Hamby 2555 Hass Dr., Alleger Address Prenda Hamby 2555 Hass Dr., Alleger Address Prenda Hamby 2555 Hass Dr., Alleger Page 1968 Prenda Hamby 2555 P		\$ 2000	\$ 35 %0 ***
5. If over \$100.00 cumulative, please provide:		Click Here for	or Memo Itemization
Occupation Employer			
Business Address	7		
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	eipt 6121 24 m, MI 49010	\$ 50°	\$ 3630 °°
5. If over \$100.00 cumulative, please provide:		Click Here f	for Memo Itemization
Occupation Employer			
Business Address	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Research & Address: Jason & Jolene Apol, 2498 15th St., Hopk	0/00/0	_	.1.0 89
Jason & Jolene Apol, 2116 15 12 019	11/20	\$ 600	\$4230
		Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:	- C+ Tadusti	O Systems	
5. If over \$100.00 cumulative, please provide: Occupation CEO Employer Logic Business Address 1580 125th Ave Hopkins	MT 49328 Fund Raiser	4	
Type of Contribution: Direct Loan from a person			
3. Contribution # 4 PAC Receipt? YES 4. Date of Name & Address Marice German - Bush 3474			
Allegan, MI 49010		\$ 200	\$ 4430
5. If over \$100.00 cumulative, please provide:		Click Here	for Memo Itemization
Occupation Employer Employer	None	_	
Business Address	Fund Raiser		
Type of Contribution: Direct Loan from a person	Page Sub	total 870 ºº	2
-			
((Grand Total of All Schedules Complete on last page of Sched	dule) Enter this total	 on



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

_		ID NI -	1 5 7 6 5 0
α r	mmittee	ID NO.	157659
	111111111111111111111111111111111111111	10 110.	

CANDIDATE COMMITTEE 2. Committee Name Committee	mittee to Elect Curtis Michael Villar
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 6 27 24 Name & Address: Robin Evan Coe, 126 Eastern Dr., South Lyon, MI 48178.	s 50° s 4480°°
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	Click Hold for memoritation
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/2/2Y	
Garald Perriquey, 4730 Weth St., Holland, MI 49423.	\$2500° \$ 6980°
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	
	\$
	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Employer	
Occupation	
Type of Contribution: Direct Loan from a person Fund Raiser	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	
	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	25 50 00

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

25,50°° Le,980°°

Enter this total on line 3a of Summary Page.

Page <u>8</u> of <u>8</u>



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 157659

SCHEDULE 1-IN		o elect Curtis Michael Villar
CANDIDATE COMM	ITTEE 2. Committee Name	7. Amount or 8. Cumulative
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or servic purchased	Fair Market Value for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address: M. chad Villar 128 Itil St. Allegan, MT 49010	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others 	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: VILLAN OFFICES 134 Riverfront Plaza Allegan MI 4000 Fund Raiser Contribution	5. Date Of Receipt: 517/24 6. Vendor Name & Address: The Graphics 10700 Chicago Dr. Zeeland M. 4914	Click Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address Michael Villar 128 Hill Street Allegan, MI 49010	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Othe Goods or Services Purchased by Candidate or Othe	ers \$ 932.90 \$ 3499 ers- LOAN
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	5. Date Of Receipt: 710124 6. Vendor Name & Address: 2 R Graphics	Click Here for Memo Itemization
Fund Raiser Contribution Contribution #3 PAC Receipt? You have & Address: Michael Villar 128 Hill Street Allegan, MI 49010	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Oth Goods or Services Purchased by Candidate or Oth	\$ 450 ° \$ 3948 ° ers
If over \$100.00 cumulative, please provide: Occupation: SELF Employer Name & Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	5. Date Of Receipt: 6. Vendor Name & Address: Jason Baker St. NE Coland Rapids, MT 495	Click Here for Memo Itemization
Fund Raiser Contribution	Grand Total of all (Complete on last pag	Page Subtotal Schedules 1-IK ge of Schedule) Enter this total on line 6 of Summary Page

Page _____ of _____



ITEMIZED IN-KIND CONTRIBUTIONS

ITEMIZED IN-KIND CONTR	IBUTIONS 1. Committee I. D. Number 157659		
SCHEDULE 1-IK	Committee to 6	elect Curtis Michae	el Villar
CANDIDATE COMM	ITTEE 2. Committee Name	7. Amount or	8. Cumulative
B. Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services vertices of vendor from whom goods or services vendor from the first from the from the first from the	Fair Market Value	for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	98,400	
Name & Address: Michael Villar 128 Hill Street Allegan, MI 49010	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LO	\$ <u>350°</u> \$	4298=
If over \$100.00 cumulative, please provide: Occupation: SELF	Description T- Shuts	_	
Employer Name & Business Address:	5. Date Of Receipt: 5/14/24 6. Vendor Name & Address:	Click Here for Memo Ite	emization
Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	Scott chenard 3404 Tannery Caker. Allegan, MI 49010	Click Here to Memorite	mization
Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan		
Contribution # 2 PAC Receipt? Yes Name & Address Michael Villar 128 Hill Street Allegan, MI 49010 If over \$100.00 cumulative, please provide:	Goods Onated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Description Consulting Services direct	\$ 9,435,000 \$ LOAN Wail/emails	13,733
Occupation:	5. Date Of Receipt: 6 28 24		
Employer Name & Address:	6. Vendor Name & Address: Charlie Kolean	Click Here for Memo I	temization -
Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010 Fund Raiser Contribution	2355 Thomas Ave #1711 Dallas, TX 75201	Click Here for McMo	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	\$ 4,500	s 18,233 E
Michael Villar 128 Hill Street Allegan, MI 49010	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-	LOAN	
If over \$100.00 cumulative, please provide:	Description Consulting Survices duect	way terret	
Occupation:	5. Date Of Receipt: 7/29 129		_
Employer Name & Address:	6. Vendor Name & Address:	Click Here for Memo	Itemization
Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	Charlie Kolean 2355 Thomas Ave #1711		_
Fund Raiser Contribution	Dallas, TX 75201	Outstall 1	D
	Pag	le Subtotal	
	Grand Total of all Sch (Complete on last page of	edules 1-IK (Schedule)	

Enter this total on line 6 of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 157659

SCHEDULE 1-IK	Committee to elect Cu	urtis Michael Villar
CANDIDATE COMM	TTEE 2. Committee Name	Amount or 8, Cumulative
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box) Date of Receipt Name & Address of Vendor from whom goods or services were purchased	dir Market for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ 13	\$75 ²⁰ \$20,108 ²⁰
Michael Villar 128 Hill Street Allegan, MI 49010	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide: Occupation:	Description Consulting Surces email	O
Employer Name & Business Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	5. Date Of Receipt: 5 13 29 6. Vendor Name & Address: Click F Charlie Kolean 2355 Thomas Ave, #1711 Dallas, Texas 75201	Here for Memo Itemization
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Michael Villar 128 Hill Street Allegan, MI 49010 If over \$100.00 cumulative, please provide:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description	\$ 21,983
Occupation: Employer Name & Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010 Fund Raiser Contribution	5. Date Of Receipt:	Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: Michael Villar 128 Hill Street Allegan, MI 49010	4.	550°° \$ 23,533°°
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	5. Date Of Receipt:	L. Have for Mome Itomization
Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	Charlie Kolean 2355 Thomas Ave, #1711 Dallas, Texas 75201	k Here for Memo Itemization
Fund Raiser Contribution	Page Subtotal	5,300=
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	·

Enter this total on line 6 of Summary Page

Page 3 of 5



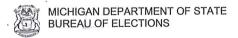
ITEMIZED IN-KIND CONTRIBUTIONS **SCHEDULE 1-IK**

1. Committee I. D. Number 157659

CAN	DIDA	TE	COM	M	ITT	EE
-----	------	----	-----	---	-----	----

2. Committee Name Committee to elect Curtis Michael Villar

CANDIDATE COMIN		2 2 1 11
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Michael Villar 128 Hill Street Allegan, MI 49010	Goods or Services Purchased by Candidate or Others	26,717.70
If over \$100.00 cumulative, please provide: Occupation:	Description Yard Signs Description	61
Employer Name & Business Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010 Fund Raiser Contribution	5. Date Of Receipt: 4116 124 6. Vendor Name & Address: VistaPrint Vistaprint.com	1.61
Contribution # 2 PAC Receipt? Yes Name & Address Michael Villar 128 Hill Street Allegan, MI 49010	Goods or Services Purchased by Candidate or Others- LOAN	24,874.98
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	5. Date Of Receipt: 131 29 6. Vendor Name & Address: VistaPrint Vistaprint.com Click Here for Memo Ite	emization
Fund Raiser Contribution Contribution #3 PAC Receipt? Ye Name & Address: Michael Villar 128 Hill Street Allegan, MI 49010	Goods Donated or Loaned Services Donated \$\$ \$\$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	27, 015,8 <u>2</u>
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Villar Law Offices 139 Riverfront Plaza Allegan, MI 49010	5. Date Of Receipt: 119 24 6. Vendor Name & Address: Click Here for Memo Italy VistaPrint Vistaprint.com	emization ▼
Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule) Enter this total on line 6 of Sum Page	I



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

Campaian ID Number 157659

Committee Name Committee to Elect Curtis Michael Villar

	4 Durages (Poquired Information)	5 Date 6 Amount
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Paypal		2/7/24 \$ 1.94
	C C D IT	
Address Internet	Purpose: fee for Paypal Dunatur	
		ere for Memo Itemization Type
İ		
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous	
	statement	
Expenditure #2		
Name Pay Da		2115/24 \$ 7,72
Name Paypal Address internet		Date
Address Instruct	Purpose: Fee for PayPal Donator	
And the lines	•	oro for Mome Hamile II
**	Click H	ere for Memo Itemization Type
4	Check box if this expenditure is payment of	
	debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #3		
Name Paypel		21,1-11
	Purpose: fee for Paypal Dmoto	316/24 \$ 6.96
Address Internet	Purpose: tee tor Payon Direction	Date ———
	The state of the s	The second secon
		ere for Memo Itemization Type
	Check box if this expenditure is payment of	
	debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #4		
Name Charlie Kolean		210/20
		3/11/24 \$ 625 €
Address 7366 TH. The Ale High	Purpose: email campaign	Date
2000 Inomas MVR. 47/11	ruipose:	
Name Charlie Kolean Address 2355 Thomas Ave., #1711 Dallas, Texas 75201	Click H	ere for Memo Itemization Type
,		2.3 for monto nomization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
	Statement	
Expenditure #5		
Name Pay pal Address Inlevnet		3/20/24
	Purpose: for Pay Pal Dinate	3/24/24 \$ 3,81
Address Inlevnet	Purpose: The tor Toy fal Jimath	Date
	OBSEL1	ere for Memo Itemization Tuna
	Click I	lere for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
		tal this page
	Subtol	tal this page 645,43
	Grand Total of all S	
	(Complete on last page	of Schedule)
		Enter this total

on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

157659

1. Committee I. D. Number

Committee to Elect Curtis Michael Villar

C	ANDIDATE COMMINITTEE 2. C	Committee Name		
3. Name and	address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure Name Ny Address		Purpose: News parter (digital) Click H Check box if this expenditure is payment of	Date Here for Memo I	\$ <u>4,00</u> temization Type
Fund Ra	iser	debt or obligation reported on previous statement		
	Charlie Kolean	Purpose: Consulting Fees leman	<u>4 9 24</u> Date	\$ 1875-00
Address	2355 Thomas Ave #1711 Dallas, TX 75201	Purpose: Consulting fees leman Click F	lere for Memo I	temization Type
Fund Ra	niser	statement		
Expenditure Name			7/19/24	\$ 4000
Address	Charlie Kolean 2355 Thomas Ave #1711 Dallas, TX 75201	Check box if this expenditure is payment of debt or obligation reported on previous	Date Here for Memo I	temization Type
Fund Ra		statement		
Name Ny Address	Times uternet	Purpose: News paper	<u>4/24/24</u> Date	
Fund Ra	aiser	Click In Check box if this expenditure is payment of debt or obligation reported on previous statement		Itemization Type
Expenditure : Name // Address	#5 Y Times Internet	Purpose: New spaper	5/22/24 Date	\$4,00
Fund Ra	aiser	Click Check box if this expenditure is payment of debt or obligation reported on previous statement		Itemization Type
		Subte	otal this page	588700
		Grand Total of all (Complete on last pag		
		, , , ,		Enter this total



ITEMIZED EXPENDITURES **SCHEDULE 1B**

Campaign ID Number 157659

Committee to Elect Curtis Michael Villar CANDIDATE COMMITTEE 2. Committee Name 5. Date 4. Purpose (Required Information) 6. Amount 3. Name and address of person or vendor to whom paid Expenditure #1 Name NY Times Address Thernot - NYTIMES . COM Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name D&S 6/28/24 \$ ZOO Purpose: Shirts Allagan, MI 4900 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name NY Times Address NY TIMES, COM Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Address Purpose: _ Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous **Fund Raiser** statement Subtotal this page

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

Enter this total on line 8a of **Summary Page**



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

Campaign ID Number 157659

	2. Committee to Elect Curtis Michael Villa
Name & Address From Whom Received A. Date of Receipt	5. Type of Receipt 6. Amount
Receipt #1 Date of Receipt	Loan from a Lending Institution
Name & Address:	
NONE	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #2 Date of Receipt Name & Address:	Loan from a Lending Institution
	Interest \$
	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #3 Date of Receipt	Loan from a Lending Institution
	Interest
	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #4 Date of Receipt Name & Address:	Loan from a Lending Institution
, name 3.7 (23.3.3.)	\$
	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #5 Date of Receipt	Loan from a Lending Institution
	Interest \$
	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #6 Date of Receipt Name & Address:	Loan from a Lending Institution
	Interest \$
	Refund \Rebate Click for Memo Itemization Type
Fund Raiser	Other (Specify)
Receipt #7 Date of Receipt Name & Address:	Loan from a Lending Institution
	Interest \$
	Click for Memo Itemization Type
Fund Raiser	Other (Specify)
	Page Subtotal
	Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)
	,

Enter this total on line 4 of Summary Page

Page ____ of ___



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

157659

Floot Curtic Michael Villar

OOIILDOLL IL	Committe	ee to Elect Gu	ILIS MICHAE	a villar
CANDIDATE COMMITTEE	2. Committee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the	(Check either a or b. Use only for the pur			
Name and Mailing Address of person, vendor of 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, ple provide information regarding the endorsers or guarantors, if any.	(Description) 5. Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type:	\$		
Male	5. Date Debt Was Incurred:	\$		
10100		\$	_	œ.
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
	6. <u>Original Amount of Debt</u> :	\$	\$	\$
	\$	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		Aı	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
Owed to or by:	5. Date Debt Was Incurred:	\$		
		\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
		Page Subtota	al (Outstanding debt)	Ø
	(Complete on last page of Schedule	Grand Tota showing amounts owed by	of all Schedules 1E or to the committee)	D .
A debt or obligation must be shown on this S		amount owed on it at the		Enter this total on line 12a "ower by"" or line 12b "owed to" of the

this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Summary Page

Page _____ of ____



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Curtis Michael Villar

	2. 0011		
	- USE A SEPARATE SH	EET FOR EACH EVENT	
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
3/6/24	25	Meet & Great	Holland, MI 494:
7. Total Contributions	* 1,610°	20	
8. Other Receipts	B		8
9. Gross Receipts (Add lines 7	and 8)	00	
10. Total Cost of Event	* 50		
(Total Cost includes In-Kind Co	ontributions and All Expenditures	s Made For the Event)	
11. Check if event was a jo	oint fund raiser and complete the	e following:	
Co-Sponsor(s)	Contribution § (%)	Split	Expenditure Split (%)
	(**)		, ,
	_	-	
	_		
	_		
	_		
-			
The committee is required covered by the	iired to file a separate Fund Rais Campaign Statement.	ser Schedule for each fund rais	sing event held during the
 Receipts and expendit 	tures listed on a Fund Raiser Sc ed In-Kind Contributions Schedu	hedule must also be reported ule (1-IK). Itemized Expenditure	on the Itemized Contributions es Schedule (1B) and the
Summary Page.			
 Each committee that p 	participated in a joint fund raiser	must file a Fund Kalser Sched	ule for the event.
Page of			



3. Date Event Was Held

Page _ _ _ of _ _ _

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

157659 1. Committee I.D. Number

5. Type of Fund Raising Activity

- USE A SEPARATE SHEET FOR EACH EVENT -

4. Number of Individuals Attending

or Participating (whichever is

2. Committee Name Committee to Elect Curtis Michael Villar

6. Address and Name (If any) of the

place where the activity was held.

618124	greater)	30	Meet of Great	Allegan, MI 490
7. Total Contributions		#619	5	
8. Other Receipts			5	
9. Gross Receipts (Add lines 7	and 8)	事 605	500	
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	and All Expenditure	s Made For the Event)	
11. Check if event was a jo	int fund rai	ser and complete th	e following:	
Co-Sponsor(s)		Contribution (%)	Split	Expenditure Split (%)
	-			
	-			
	•			
	_			
	_			
	_			
			ser Schedule for each fund	raising event held during the
 period covered by the 0 Receipts and expenditus Schedule (1A), Itemize Summary Page. 	ures listed	on a Fund Raiser Sc	chedule must also be reportule (1-IK), Itemized Expend	ted on the Itemized Contributions itures Schedule (1B) and the
	articipated	in a joint fund raiser	must file a Fund Raiser Sc	hedule for the event.

MI Allegan Villar, Michael EY 2024

The remainder of the documents may be obtained at the following address:

https://app.box.com/s/idz9p1r03917ybk080ymma6tzsk7mqlt