

FEB 01 2024

# Precinct Delegate Affidavit of Identity and Receipt of Filing

KRISTEN MILLARD  
MONTGALM COUNTY CLERK

SECTION 1 Candidate information	First name <u>Matthew</u>	Middle name <u>L.</u>	Last name <u>Murray</u>	
	Year of birth <u>1975</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____		
	Residential address <u>2320 Eileen Rd.</u>		City <u>Six Lakes</u>	ZIP <u>48886 MI</u>
	Mailing address, if different than above		City	ZIP
	Phone number <u>616-516-6384</u>	Email <u>matth875murray@gmail.com</u>	Campaign website, if applicable	

SECTION 2 Office & ballot information	Office name Precinct Delegate <u>Matthew Murray</u>	Jurisdiction <u>Belvidere Twp</u>	Precinct number <u>1</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> DATE (MM/DD/YYYY)		
	Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>Matthew Murray</u>		

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>[Signature]</u> Candidate signature	<u>2/1/2024</u> Date
	Notary signature <u>Kennedy Kohler</u>	Notary name <u>Kennedy Kohler</u>
	County of commission <u>Montcalm County</u>	Acting in the County of _____
	My commission expires DATE (MM/DD/YYYY) <u>May 5, 2028</u>	Date of notarization DATE (MM/DD/YYYY) <u>2/1/2024</u>

Office use only	Date of filing <u>2/1/2024</u>	Received by <u>K.K.</u>
	Reviewed by	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Judy	Middle name	K	Last name	Emmons
	Year of birth	1951	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____			
	Residential address			City	ZIP	
	504 E. Carson City Rd.			SHERIDAN	48884	
	Mailing address, if different than above			City	ZIP	
Phone number	517 896 7638		Email	judy.emmons@gmail.com		
			Campaign website, if applicable			

SECTION 2 Office & ballot information	Office name	Precinct Delegate	Jurisdiction	Bushnell Twp	Precinct number	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>					
	<input checked="" type="checkbox"/> Primary election <u>Aug 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>					
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)						
Judy K. Emmons						

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.					
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.					
	Candidate signature: <u>Judy K. Emmons</u>				Date: <u>4-30-24</u>	
	Notary signature: <u>Mary E. Peterson</u>			Notary name: <u>Mary E. Peterson</u>		
	County of commission: <u>Montcalm</u>			Acting in the County of: <u>Montcalm</u>		
My commission expires: <u>07/03/2024</u> <small>DATE (MM/DD/YYYY)</small>			Date of notarization: <u>04/30/2024</u> <small>DATE (MM/DD/YYYY)</small>			

Office use only	Date of filing	4-30-2024	Received by	Cammy Doty
	Reviewed by			

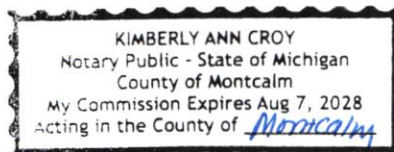
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address	City	ZIP
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	Coleen	Dawn	Stevens
	1963		
	8908 Cutler rd	Lakeview	48850
	989-287-2426	cdstevens@gmail.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Cato	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u> <input type="checkbox"/> Primary election <u>Aug 6, 24</u> DATE (MM/DD/YYYY) Republican		
	Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters) <u>Coleen Stevens</u>		

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Coleen Stevens</u> Candidate signature	<u>4/13/24</u> Date
	Notary signature <u>Kimberly Ann Croy</u>	Notary name <u>Kimberly Ann Croy</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
	My commission expires DATE (MM/DD/YYYY) <u>8-7-2028</u>	Date of notarization DATE (MM/DD/YYYY) <u>4-13-2024</u>

Office use only	Date of filing	Received by
	<u>5/1/2024</u> Reviewed by <u>Stephanie Bracey</u>	<u>Stephanie Bracey</u>



# Precinct Delegate Affidavit of Identity and Receipt of Filing

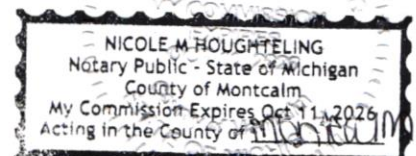
**CLEAR FORM**

<b>SECTION 1</b> Candidate information	First name Ronald	Middle name Douglas	Last name Arnesen	
	Year of birth 1961	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____		
	Residential address 1965 Strait Tow Blvd.		City Crystal	ZIP 48818
	Mailing address, if different than above		City	ZIP
	Phone number (586)767-9761	Email ronarnesen@msn.com	Campaign website, if applicable	

<b>SECTION 2</b> Office & ballot information	Office name Precinct Delegate	Jurisdiction Crystal Township, MI	Precinct number Precinct 1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input type="checkbox"/> Primary election _____ DATE (MM/DD/YYYY)		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Ronald Arnesen</u>			

<b>SECTION 3</b> Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>[Signature]</u> Candidate signature	<u>APRIL 2, 2024</u> Date
	Notary signature <u>[Signature]</u>	Notary name <u>Nicole M Houghteling</u>
	County of commission <u>montcalm</u>	Acting in the County of <u>montcalm</u>
My commission expires DATE (MM/DD/YYYY) <u>10/11/2026</u>		Date of notarization DATE (MM/DD/YYYY) <u>04/02/2024</u>

<b>Office use only</b>	Date of filing <u>4-3-2024</u>	Received by <u>Cammy Groby</u>
	Reviewed by	

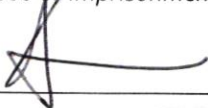



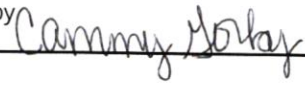
# Precinct Delegate Affidavit of Identity and Receipt of Filing

**CLEAR FORM**

<b>SECTION 1</b> Candidate information	First name Anna		Middle name	Last name O'Rourke		
	Year of birth 1969	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____				
	Residential address 1190 Shepard St			City Crystal	ZIP 48818	
	Mailing address, if different than above			City	ZIP	
	Phone number 301-401-3763		Email 1217anna@gmail.com	Campaign website, if applicable		

<b>SECTION 2</b> Office & ballot information	Office name Precinct Delegate		Jurisdiction Crystal Township	Precinct number 1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>			
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> <small>DATE (MM/DD/YYYY)</small>			
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)				
Anna O'Rourke				

<b>SECTION 3</b> Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
		<u>3/13/2024</u> Date
	Notary signature 	Notary name PATRICIA BAKER-MAREK
	County of commission MONTCALM	Acting in the County of MONTCALM
My commission expires <small>DATE (MM/DD/YYYY)</small> April 27, 2024		Date of notarization <small>DATE (MM/DD/YYYY)</small> March 13, 2024

<b>Office use only</b>	Date of filing <u>3-18-2024</u>	Received by 
	Reviewed by	

**RECEIVED**  
MAR 18 2024

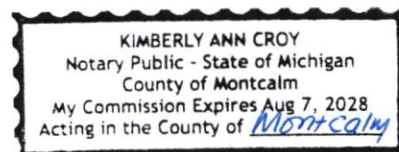
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Michelle	Rene	Jorgensen
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1960		
	Residential address	City	ZIP
	1598 N. Neff Rd.	Stanton	48888
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	989-506-0203	momlovespugs@gmail.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Day Township	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican party</u>		
	<input checked="" type="checkbox"/> Primary election <u>08/6/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Michelle Jorgensen</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Michelle Jorgensen</u> Candidate signature	<u>4-13-24</u> Date
	Notary signature	Notary name
	<u>Kimberly Ann Croy</u>	<u>Kimberly Ann Croy</u>
	County of commission	Acting in the County of
<u>Montcalm</u>	<u>Montcalm</u>	
My commission expires	Date of notarization	
<u>8-7-2028</u> <small>DATE (MM/DD/YYYY)</small>	<u>4-13-2024</u> <small>DATE (MM/DD/YYYY)</small>	

Office use only	Date of filing	Received by
	<u>4-30-2024</u>	<u>Cammy Gorky</u>
Reviewed by		



# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address	City	ZIP
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	Maxine	Mary	Nauta
	1956		
	4599 E Kendaxville Rd	Edmore	48829
	989-565-4044	tmnauta@1791.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Day	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8/6/2024</u> DATE (MM/DD/YYYY)		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
Maxine Mary Nauta			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Maxine Nauta</u> Candidate signature	<u>4/13/2024</u> Date
	Notary signature <u>Barbara J. Prah</u>	Notary name <u>Barbara J. Prah</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
	My commission expires DATE (MM/DD/YYYY) <u>10/06/2029</u>	Date of notarization DATE (MM/DD/YYYY) <u>4/13/2024</u>

Office use only	Date of filing	Received by
	<u>04/29/2024</u> Reviewed by	<u>Stephanie Bracey</u>

# Precinct Delegate Affidavit of Identity and Receipt of Filing

CLEAR FORM

SECTION 1 Candidate information	First name	Middle name	Last name
	Lisa	Ann	Coughlin
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1967		
	Residential address	City	ZIP
	217 Woodlawn	Stanton	48888
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	734-748-6862	lcoughlin50@yahoo.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Douglas Township	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>August 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Lisa A. Coughlin</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Lisa A. Coughlin</u> Candidate signature	<u>April 13, 2024</u> Date
	Notary signature	Notary name
	<u>Kimberly Croy</u>	<u>Kimberly Croy</u>
	County of commission	Acting in the County of
	<u>Montcalm</u>	<u>Montcalm</u>
My commission expires	Date of notarization	
<small>DATE (MM/DD/YYYY)</small> <u>8-7-2028</u>	<small>DATE (MM/DD/YYYY)</small> <u>4-13-2024</u>	

Office use only	Date of filing	Received by
	<u>4-19-2024</u>	<u>Gammy York</u>
Reviewed by		

KIMBERLY ANN CROY  
 Notary Public - State of Michigan  
 County of Montcalm  
 My Commission Expires Aug 7, 2028  
 Acting in the County of Montcalm

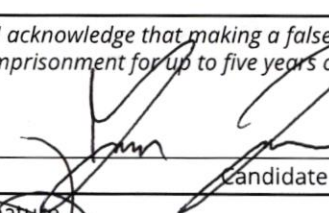
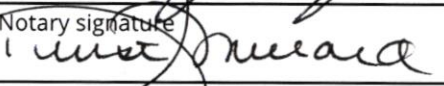
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name <u>James</u>	Middle name <u>Aaron</u>	Last name <u>Lower</u>	
	Year of birth <u>1989</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____		
	Residential address <u>9743 Baker Rd.</u>		City <u>Greenville</u>	ZIP <u>45838</u>
	Mailing address, if different than above		City	ZIP
	Phone number <u>616-902-4946</u>	Email <u>lowerja@gmail.com</u>	Campaign website, if applicable	

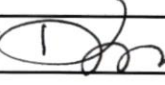

  

SECTION 2 Office & ballot information	Office name Precinct Delegate	Jurisdiction <u>Eureka</u>	Precinct number <u>2</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8/06/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>James A. Lower</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	 Candidate signature	<u>03/1/24</u> Date
	Notary signature 	Notary name <u>Kristen Millard</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
My commission expires <small>DATE (MM/DD/YYYY)</small> <u>11/17/2025</u>		Date of notarization <small>DATE (MM/DD/YYYY)</small> <u>03/01/2024</u>

Office use only	Date of filing <u>03/01/2024</u>	Received by 
	Reviewed by 	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name	
	Stephanie	Ann	Bracey	
	Year of birth	My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____		
	1988			
	Residential address	City	ZIP	
	3888 Pine Trail DR.	Sheridan	48884	
	Mailing address, if different than above	City	ZIP	
	Phone number	Email	Campaign website, if applicable	
	989-400-8868	hustedstephanie12@gmail.com		

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Evergreen	
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Stephanie A. Bracey</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Stephanie Bracey</u> Candidate signature	<u>4/24/2024</u> Date
	Notary signature	Notary name
	<u>Candy Smith</u>	CANDY SMITH
	County of commission	Acting in the County of
	Gratiot	Montcalm
My commission expires	Date of notarization	
<u>4/1/2024</u> <small>DATE (MM/DD/YYYY)</small>	<u>5/7/2024</u> <small>DATE (MM/DD/YYYY)</small>	

Office use only	Date of filing	Received by
	<u>5/7/24</u>	<u>[Signature]</u>
	Reviewed by	
	<u>[Signature]</u>	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name <u>Andy</u>	Middle name <u>Ker</u>	Last name <u>Ross</u>
	Year of birth <u>1975</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address <u>2284 E. Holland Ln Rd</u>		City <u>Sherridon</u>
	Mailing address, if different than above		ZIP <u>48884</u>
	Phone number <u>984-291-3630</u>	Email <u>ARossConstruction@gmail.com</u>	Campaign website, if applicable

SECTION 2 Office & ballot information	Office name Precinct Delegate	Jurisdiction <u>Evergreen</u>	Precinct number <u>1</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input type="checkbox"/> Primary election <u>8-6-2024</u> DATE (MM/DD/YYYY)		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>Andy K. Ross</u>			


SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury – a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Andy Ross</u> Candidate signature	<u>4-28-24</u> Date
	Notary signature <u>Kristen Millard</u>	Notary name <u>Kristen Millard</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
My commission expires DATE (MM/DD/YYYY) <u>11/17/2025</u>		Date of notarization DATE (MM/DD/YYYY) <u>04/24/2024</u>

Office use only	Date of filing <u>4/24/2024</u>	Received by <u>[Signature]</u>
	Reviewed by <u>[Signature]</u>	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Bonnie	Belle	Sutton
	Year of birth 1968	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address	City	ZIP
	5725 N Caris Rd	Edmore	48829
Mailing address, if different than above	City	ZIP	
Phone number	Email	Campaign website, if applicable	
989 304 1123	herbon89@icloud.com	N/A	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Ferris	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8-6-24</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Bonnie Sutton</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	 Candidate signature	<u>4/18/24</u> Date
	Notary signature	Notary name
	<u>Barbara J. Prah</u> County of commission <u>Montcalm</u>	<u>Barbara J. Prah</u> Acting in the County of <u>Montcalm</u>
My commission expires <small>DATE (MM/DD/YYYY)</small>	Date of notarization <small>DATE (MM/DD/YYYY)</small>	
<u>10/06/2029</u>	<u>4/18/2024</u>	

Office use only	Date of filing	Received by
	<u>5-3-2024</u> Reviewed by	<u>Cammy Goley</u>

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name <u>Herbert</u>	Middle name <u>Ronie</u>	Last name <u>Sutton</u>
	Year of birth <u>1966</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address <u>5725 N. CARIS Rd</u>		City <u>Edmore</u> ZIP <u>48829</u>
	Mailing address, if different than above		City  ZIP 
	Phone number <u>989-304-1122</u>	Email <u>Herbnsn@icloud.com</u>	Campaign website, if applicable

SECTION 2 Office & ballot information	Office name <u>Precinct Delegate</u>	Jurisdiction <u>Ferris</u>	Precinct number <u>1</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8-6-24</u> <small>DATE (MM/DD/YYYY)</small>		
	Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>Herb Sutton</u>		

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Herb Sutton</u> <u>4-18-24</u> <small>Candidate signature Date</small>	
	Notary signature <u>Barbara J. Prah</u>	Notary name <u>Barbara J. Prah</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
	My commission expires <u>10/06/2029</u> <small>DATE (MM/DD/YYYY)</small>	Date of notarization <u>4/18/2024</u> <small>DATE (MM/DD/YYYY)</small>

Office use only	Date of filing <u>5-3-2024</u>	Received by <u>Cammy Gokey</u>
	Reviewed by	

BARBARA J. PRAHL  
 NOTARY PUBLIC, STATE OF MI  
 COUNTY OF MONTCALM  
 MY COMMISSION EXPIRES Oct 6, 2029  
 ACTING IN COUNTY OF Montcalm

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Valerie	Sue	Gates
	Year of birth	My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	06/20/1965		
	Residential address	City	ZIP
	2196 N Black Rd	Trufant	49347
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	416 984-7264	kvgates83@yahoo.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Maple Valley	1
	I am running for a partisan office, and my political party is: Republican		
	Primary election 8-6-24 DATE (MM/DD/YYYY)		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
Valerie S. Gates			

SECTION 3 Certification & acknowledgment	I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	Valerie S. Gates 3-29-24 Candidate signature Date	
	Notary signature	Notary name
	Lindsay P Christensen	Lindsay P Christensen
	County of commission	Acting in the County of
Montcalm	Montcalm	
My commission expires	Date of notarization	
DATE (MM/DD/YYYY) 12/05/2025	DATE (MM/DD/YYYY) 03/29/2024	

Office use only	Date of filing	Received by
	4-11-2024	Cammy Gorby
	Reviewed by	

LINDSAY P CHRISTENSEN  
Notary Public, Montcalm Co., MI  
My Commission Expires Dec. 5, 2025 2

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name <u>Susan</u>	Middle name <u>Leeann</u>	Last name <u>DeVries</u>
	Year of birth <u>1966</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address <u>9358 Helen St</u>		City <u>Greenville</u> ZIP <u>48838</u>
	Mailing address, if different than above		City _____ ZIP _____
	Phone number <u>616-498-2622</u>	Email <u>KENVCAPPY4@gmail</u>	Campaign website, if applicable

SECTION 2 Office & ballot information	Office name Precinct Delegate	Jurisdiction <u>Montcalm Township</u>	Precinct number <u>1</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8-6-2024</u> <small>DATE (MM/DD/YYYY)</small>		
	Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>Susan DeVries</u>		

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Susan DeVries</u> <u>4-18-24</u> Candidate signature Date	
	Notary signature <u>Barbara J. Prah</u>	Notary name <u>Barbara J. Prah</u>
	County of commission <u>Montcalm</u>	Acting in the County of
	My commission expires <small>DATE (MM/DD/YYYY)</small> <u>10/06/2029</u>	Date of notarization <small>DATE (MM/DD/YYYY)</small> <u>4/18/2024</u>

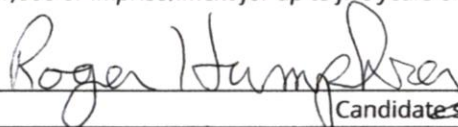
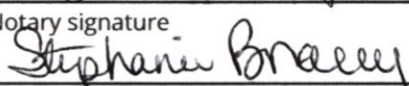
Office use only	Date of filing <u>4-25-2024</u>	Received by <u>Cammy Gorky</u>
	Reviewed by	

BARBARA J. PRAHL  
 NOTARY PUBLIC, STATE OF MI  
 COUNTY OF MONTCALM  
 MY COMMISSION EXPIRES Oct 6, 2029  
 ACTING IN COUNTY OF Montcalm

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name Roger		Middle name Len		Last name Humphrey	
	Year of birth 1958	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____				
	Residential address 11947 W Muskrat Road				City Greenville	ZIP 48838
	Mailing address, if different than above				City	ZIP
	Phone number 6162552405		Email humpy001@hotmail.com		Campaign website, if applicable	

SECTION 2 Office & ballot information	Office name Precinct Delegate		Jurisdiction Montcalm township	Precinct number
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: Republican			
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> <small>DATE (MM/DD/YYYY)</small>			
Indicate exactly how you want your name to be printed on the ballot <b>(use upper and lowercase letters)</b>  Roger Humphrey				

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	<i>By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.</i>	
	 Candidate signature	<u>4-11-2024</u> Date
	Notary signature 	Notary name Stephanie Bracey
	County of commission May 12, 2027 Montcalm	Acting in the County of Montcalm
My commission expires <small>DATE (MM/DD/YYYY)</small> May 12, 2027		Date of notarization <small>DATE (MM/DD/YYYY)</small> 04/11/2024

Office use only	Date of filing <u>04/11/2024</u>	Received by <u>Stephanie Bracey</u>
	Reviewed by <u>Stephanie Bracey</u>	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address	City	ZIP
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	fern	frances	Jessop
	10-12-42		
	3500 Morgan Drive	Breenville	48838
	616-232-1421	fernje@charter	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Montcalm	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>Aug 6 '2024</u> DATE (MM/DD/YYYY)		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Fern Jessop</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Fern A. Jessop</u> Candidate signature	<u>4-13-24</u> Date
	Notary signature	Notary name
	County of commission	Acting in the County of
	My commission expires	Date of notarization
	<u>Kimberly Ann Croy</u>	<u>Kimberly Ann Croy</u>
	<u>Montcalm</u>	<u>Montcalm</u>
	<u>8-7-2028</u>	<u>4-13-2024</u>

Office use only	Date of filing	Received by
	<u>04/29/2024</u>	<u>Stephanie Bracey</u>
	Reviewed by	

KIMBERLY ANN CROY  
Notary Public - State of Michigan  
County of Montcalm  
My Commission Expires Aug 7, 2028  
Acting in the County of Montcalm

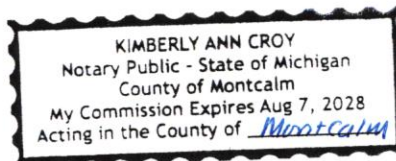
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Shannon	S.	Lowry
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1974		
	Residential address	City	ZIP
	2445 S. Greenville Rd	Greenville	48838
	Mailing address, if different than above	City	ZIP
	Same		
	Phone number	Email	Campaign website, if applicable
	616 835 6993	Skyblue.graphix@yahoo.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Montcalm Twp.	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>August 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Shannon S. Lowry</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Shannon S. Lowry</u> <small>Candidate signature</small>	<u>April 13, 2024</u> <small>Date</small>
	Notary signature <u>Kimberly Croy</u>	Notary name <u>Kimberly Croy</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
	My commission expires <small>DATE (MM/DD/YYYY)</small> <u>8-7-2028</u>	Date of notarization <small>DATE (MM/DD/YYYY)</small> <u>4-13-2024</u>

Office use only	Date of filing	Received by
	4-18-2024	Cammy Gorbey
Reviewed by		



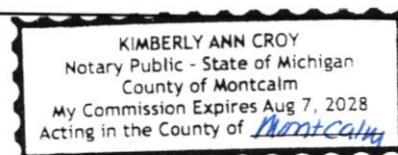
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Barbara	Jean	Prahl
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1963		
	Residential address	City	ZIP
6807 Peck Road	Greenville	48838	
Mailing address, if different than above	City	ZIP	
Phone number	Email	Campaign website, if applicable	
616-460-6027	barb.prahl@gmail.com		

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Montcalm Township	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Barbara Prahl</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	<i>By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.</i>	
	<u>Barbara A. Prahl</u> Candidate signature	<u>4/13/2024</u> Date
	Notary signature	Notary name
	<u>Kimberly Ann Croy</u>	<u>Kimberly Ann Croy</u>
	County of commission	Acting in the County of
<u>Montcalm</u>	<u>Montcalm</u>	
My commission expires	Date of notarization	
<u>8-7-2028</u> <small>DATE (MM/DD/YYYY)</small>	<u>4-13-2024</u> <small>DATE (MM/DD/YYYY)</small>	

Office use only	Date of filing	Received by
	<u>4/24/2024</u>	<u>Stephanie Bracey</u>
Reviewed by <u>Stephanie Bracey</u>		



# Precinct Delegate Affidavit of Identity and Receipt of Filing

CLEAR FORM

SECTION 1 Candidate information	First name <u>AMY</u>	Middle name <u>RICHELLE</u>	Last name <u>MCCALL</u>
	Year of birth <u>1971</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	Residential address <u>23809 JOSHUA DR.</u>		City <u>SAND LAKE</u>
	Mailing address, if different than above		ZIP <u>49343</u>
	Phone number <u>616-799-5582</u>	Email <u>ARTOWSLEY2000@YAHOO</u>	Campaign website, if applicable

SECTION 2 Office & ballot information	Office name Precinct Delegate	Jurisdiction <u>PERSON TWN</u>	Precinct number <u>1</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>REPUBLICAN</u>		
	<input checked="" type="checkbox"/> Primary election <u>8-6-24</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>AMY MCCALL</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Amy McCall</u> Candidate signature	<u>4-13-24</u> Date
	Notary signature <u>Kimberly Ann Croy</u>	Notary name <u>Kimberly Ann Croy</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
My commission expires <small>DATE (MM/DD/YYYY)</small> <u>8-7-2028</u>		Date of notarization <small>DATE (MM/DD/YYYY)</small> <u>4-13-2024</u>

Office use only	Date of filing <u>5-6-2024</u>	Received by <u>Stephanie Bracey</u>
	Reviewed by	



KIMBERLY ANN CROY  
 Notary Public - State of Michigan  
 County of Montcalm  
 My Commission Expires Aug 7, 2028  
 Acting in the County of Montcalm

# Precinct Delegate Affidavit of Identity and Receipt of Filing

CLEAR FORM

SECTION 1 Candidate information	First name <b>Dawn</b>		Middle name <b>marie</b>	Last name <b>Sweet</b>		
	Year of birth <b>1972</b>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____				
	Residential address <b>4722 N. Satterlee Rd.</b>			City <b>Coral</b>	ZIP <b>49322</b>	
	Mailing address, if different than above			City	ZIP	
	Phone number <b>616-240-5815</b>		Email <b>3dsweet@gmail.com</b>	Campaign website, if applicable		

SECTION 2 Office & ballot information	Office name Precinct Delegate		Jurisdiction <b>Pine Township</b>	Precinct number <b>1</b>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <b>Republican</b>			
	<input checked="" type="checkbox"/> Primary election <b>08/06/2024</b> <small>DATE (MM/DD/YYYY)</small>			
	Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <b>Dawn M. Sweet</b>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	 Candidate signature	<b>4-17-24</b> Date
	Notary signature 	Notary name <b>Jennifer Jo Trevino</b>
	County of commission <b>Montcalm</b>	Acting in the County of <b>Montcalm</b>
My commission expires <small>DATE (MM/DD/YYYY)</small> <b>12/17/2029</b>		Date of notarization <small>DATE (MM/DD/YYYY)</small> <b>4/17/2024</b>

Office use only	Date of filing <b>4/17/2024</b>	Received by <b>Stephanie Bracey</b>
	Reviewed by <b>Stephanie Bracey</b>	

**JENNIFER JO TREVINO**  
 Notary Public, Montcalm Co., MI  
 My Commission Expires Dec. 17, 2029

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Sharon Teresa Davis		
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	9-26-59		
	Residential address	City	ZIP
8700 Edgar Rd		Vestaburg	48891
Mailing address, if different than above	City	ZIP	
Phone number	Email	Campaign website, if applicable	
989-500-8701	tazidavis@yahoo.com		

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Richland	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>Aug. 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
Sharon Davis			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	Sharon T. Davis	
	Candidate signature	Date
		4-18-24
	Notary signature	Notary name
Karen S. Grover	Karen S. Grover	
County of commission	Acting in the County of	
Montcalm	Montcalm	
My commission expires	Date of notarization	
7/13/2025	4/26/2024	

Office use only	Date of filing	Received by
	5.3.2024	Chater O'Brien
Reviewed by		

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name <u>Rhonda</u>		Middle name <u>Lanette</u>	Last name <u>Bishop</u>		
	Year of birth <u>1963</u>	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____				
	Residential address <u>1280 W. County Farm Rd.</u>			City <u>Sheridan</u>	ZIP <u>48884</u>	
	Mailing address, if different than above			City	ZIP	
	Phone number <u>616-824-0345</u>	Email <u>queenbee715@icloud.com</u>		Campaign website, if applicable		

SECTION 2 Office & ballot information	Office name Precinct Delegate		Jurisdiction <u>Sidney</u>	Precinct number <u>001</u>
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>			
	<input checked="" type="checkbox"/> Primary election <u>August 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>			
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)  <u>Rhonda Bishop</u>				

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years and may result in disqualification from the ballot.	
	<u>Rhonda L Bishop</u> <small>Candidate signature</small>	
	<u>4/13/24</u> <small>Date</small>	
	Notary signature <u>Barbara J. Prael</u>	Notary name <u>Barbara J. Prael</u>
	County of commission <u>Montcalm</u>	Acting in the County of <u>Montcalm</u>
My commission expires <small>DATE (MM/DD/YYYY)</small> <u>10/06/2029</u>		Date of notarization <small>DATE (MM/DD/YYYY)</small> <u>4/13/2024</u>

Office use only	Date of filing <u>4/29/2024</u>	Received by <u>Stephanie Bracey</u>
	Reviewed by <u>Stephanie Bracey</u>	

# Precinct Delegate Affidavit of Identity and Receipt of Filing

CLEAR FORM

SECTION 1 Candidate information	First name	Middle name	Last name
	Glenda	Kay	Neuenschwander
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1959		
	Residential address	City	ZIP
	3030 Oak Dr	Stanton	48888
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	(616) 835-2500	Glenda_Kay1959@yahoo.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Sidney Twn.	P.#1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>08/06/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Glenda K. Neuenschwander</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>Glenda K Neuenschwander</u> Candidate signature	<u>04/18/2024</u> Date
	Notary signature	Notary name
	<u>Barbara J. Prael</u>	<u>Barbara J. Prael</u>
	County of commission	Acting in the County of
<u>Montcalm</u>		
My commission expires	Date of notarization	
<u>10/06/2029</u> <small>DATE (MM/DD/YYYY)</small>	<u>4/18/2024</u> <small>DATE (MM/DD/YYYY)</small>	

Office use only	Date of filing	Received by
	<u>5-3-2024</u>	<u>Michelle O'Green</u>
	Reviewed by	

BARBARA J. PRAHL  
 NOTARY PUBLIC, STATE OF MI  
 COUNTY OF MONTCALM  
 MY COMMISSION EXPIRES Oct 6, 2029  
 ACTING IN COUNTY OF Montcalm

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Ann	Marie	Wubbeling
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1969		
	Residential address	City	ZIP
5708 W. Hansen Rd.	Sheridan	48884	
Mailing address, if different than above	City	ZIP	
Phone number	Email	Campaign website, if applicable	
(616) 225-8856	wubbelingam@icloud.com		

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	Sidney Twp	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>Aug. 6, 2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>AnnMarie Wubbeling</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	<u>AnnMarie Wubbeling</u> Candidate signature	<u>4/13/24</u> Date
	Notary signature	Notary name
	<u>Kimberly Croy</u>	<u>Kimberly Croy</u>
	County of commission	Acting in the County of
<u>Montcalm</u>	<u>Montcalm</u>	
My commission expires	Date of notarization	
<u>August 7, 2028</u> <small>DATE (MM/DD/YYYY)</small>	<u>4.13.2024</u> <small>DATE (MM/DD/YYYY)</small>	

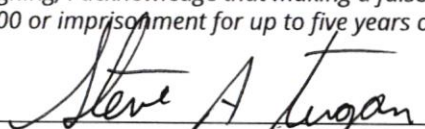
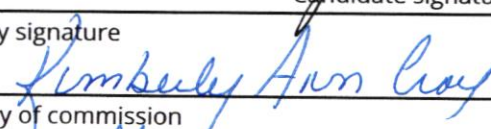
Office use only	Date of filing	Received by
	<u>5-1-2024</u>	<u>Cammy Sotay</u>
Reviewed by		

KIMBERLY ANN CROY  
 Notary Public - State of Michigan  
 County of Montcalm  
 My Commission Expires Aug 7, 2028  
 Acting in the County of Montcalm

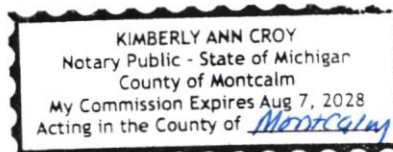
# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	Steve	Anthony	Tugan
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	08/17/1959		
	Residential address	City	ZIP
	604 W. Judd Street	Greenville	48838
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	616-213-5060	graced-0@hotmail.com	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	City of Greenville	2
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>August 6 2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
Steve Tugan			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	 Candidate signature	April 13 2024 Date
	Notary signature	Notary name
	 County of commission Montcalm	Kimberly Ann Croy Acting in the County of Montcalm
	My commission expires <small>DATE (MM/DD/YYYY)</small>	Date of notarization <small>DATE (MM/DD/YYYY)</small>
	8-7-2028	4-13-2024

Office use only	Date of filing	Received by
	4-19-2024	Cammy Gorby
	Reviewed by	

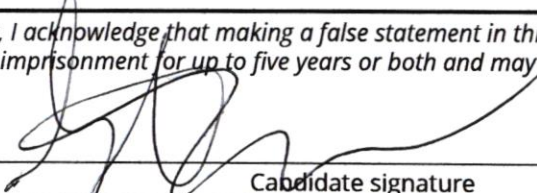


# Precinct Delegate Affidavit of Identity and Receipt of Filing

CLEAR FORM

SECTION 1 Candidate information	First name	Middle name	Last name
	Steven	Craig	Tanner
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is _____	
	1966		
	Residential address	City	ZIP
	1415 Crestview St.	Greenville	48838
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	616-894-2052	Steve.tannersellsme@gmail.com	gmail.com

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	City of Greenville	1
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>Republican</u>		
	<input checked="" type="checkbox"/> Primary election <u>8/6/2024</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>Steve Tanner</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
		
	Candidate signature	Date
		4/13/24
	Notary signature	Notary name
Kimberly Ann Croy	Kimberly Ann Croy	
County of commission	Acting in the County of	
Montcalm	Montcalm	
My commission expires	Date of notarization	
DATE (MM/DD/YYYY) 8-7-2028	DATE (MM/DD/YYYY) 4-13-2024	

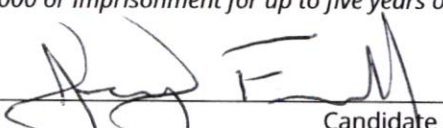
Office use only	Date of filing	Received by
	4/19/2024	Stephanie Bracey
	Reviewed by	
	Stephanie Bracey	

KIMBERLY ANN CROY  
 Notary Public - State of Michigan  
 County of Montcalm  
 My Commission Expires Aug 7, 2028  
 Acting in the County of Montcalm

# Precinct Delegate Affidavit of Identity and Receipt of Filing

SECTION 1 Candidate information	First name	Middle name	Last name
	JERRY	E.	FENNEL
	Year of birth	<input type="checkbox"/> My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is <u>GERALD</u>	
	5/21/52		
	Residential address	City	ZIP
	125 S. CLAY ST.	GREENVILLE	48838
	Mailing address, if different than above	City	ZIP
	Phone number	Email	Campaign website, if applicable
	616 334-5150	JERRY@28THSTREET.BIZ	

SECTION 2 Office & ballot information	Office name	Jurisdiction	Precinct number
	Precinct Delegate	GREENVILLE	4
	<input checked="" type="checkbox"/> I am running for a partisan office, and my political party is: <u>REPUBLICAN</u>		
	<input checked="" type="checkbox"/> Primary election <u>8/6/24</u> <small>DATE (MM/DD/YYYY)</small>		
Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters)			
<u>JERRY FENNEL</u>			

SECTION 3 Certification & acknowledgment	<input checked="" type="checkbox"/> I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.	
	By signing, I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000 or imprisonment for up to five years or both and may result in disqualification from the ballot.	
	 Candidate signature	<u>4/12/2024</u> Date
	Notary signature	Notary name
	<u>Kimberly Ann Croy</u>	<u>Kimberly Ann Croy</u>
	County of commission	Acting in the County of
<u>Montcalm</u>	<u>Montcalm</u>	
My commission expires	Date of notarization	
<small>DATE (MM/DD/YYYY)</small> <u>8-7-2028</u>	<small>DATE (MM/DD/YYYY)</small> <u>4-13-2024</u>	

Office use only	Date of filing	Received by
	<u>5/3/2024</u>	<u>Stephanie Bracey</u>
	Reviewed by	

KIMBERLY ANN CROY  
 Notary Public - State of Michigan  
 County of Montcalm  
 My Commission Expires Aug 7, 2028  
 Acting in the County of Montcalm