



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: <u>7-09-09</u> To <u>10-18-09</u>	
1. Committee I.D. Number <u>B-2009-004</u>	4. Committee's Mailing Address <u>46 Larry Cobler, Treasurer</u> <u>9081 Lotie Lane</u> <u>Dexter, MI 48136</u> Area Code and Phone <u>734 426 1233</u>
2. Committee Name <u>FRIENDS OF EDUCATION</u>	<small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>
5. Treasurer's Name and Residential Address <u>Larry Cobler</u> <u>9081 Lotie Lane</u> <u>Dexter, MI 48136</u> Area Code and Phone <u>734-426-1233</u>	
6. Treasurer's Business Address <u>ALTARUM INSTITUTE</u> <u>3520 Green Court Ste 300</u> <u>Ann Arbor, MI 48105</u> Area Code and Phone <u>734-302-4643</u>	7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) <u>Sue Klimek</u> <u>859 Plank St.</u> <u>Duane, MI 48131</u> Area Code and Phone <u>734-529-3321</u>
8. TYPE OF STATEMENT: 8a. <input checked="" type="checkbox"/> PRE-ELECTION OR 8b. <input type="checkbox"/> POST-ELECTION Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL Date of Election: <u>11-03-2009</u>	8c. <input type="checkbox"/> ANNUAL STATEMENT (___ Coverage Year) 8d. <input type="checkbox"/> QUALIFICATION OR <input type="checkbox"/> NON-QUALIFICATION STATEMENT (Required of State-wide Ballot Question Committees Only) Date of Qualification or Non- Qualification: _____
8e. <input type="checkbox"/> AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended) 8f. <input type="checkbox"/> DISSOLUTION OF COMMITTEE Effective Date of Dissolution _____ <small>By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.</small>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold.</p> <p>If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.</p>	
9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.	
Current Treasurer or Designated Record Keeper <u>Sue Klimek</u> <u>Sue Klimek</u> Date <u>10-18-09</u> <small>Type or Print Name Signature</small>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>21,654.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>21,654.00</u>	(18.) \$ <u>21,654.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>21,654.00</u>	(20.) \$ <u>21,654.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>-</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>-</u>	(21.) \$ <u>-</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>11,793.19</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>-</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>-</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>-</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>11,793.19</u>	(22.) \$ <u>11,793.19</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>-</u>	(23.) \$ <u>-</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>11,793.19</u>	(24.) \$ <u>11,793.19</u>
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>-</u>	(25.) \$ <u>-</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>-</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>21,654.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>21,654.00</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>11,793.19</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>9,860.81</u>	

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Ahuvia, Aura & Aaron</u> <u>1317 King George Blvd</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>8-24-09</u>	\$ <u>10.⁰⁰</u>	\$ <u>10.⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Allen, Karen</u> <u>801 Stealey Street</u> <u>Ypsilanti, MI 48198</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>30.⁰⁰</u>	\$ <u>30.⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>ANONYMOUS</u>	4. Date of Receipt <u>8-27-09</u>	\$ <u>3.⁰⁰</u>	\$ <u>3.⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Bates, David R.</u> <u>1208 Pearl St.</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>9-4-09</u>	\$ <u>100.⁰⁰</u>	\$ <u>100.⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

143.⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Benczarski, Michael</u> <u>9512 Crest Line</u> <u>Pinckney, MI 48169</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Bendit, Rachel</u> <u>2012 SCOTTWOOD AVE</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9-9-09</u>	\$ <u>30⁰⁰</u> \$ <u>30⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Berman, Kira</u> <u>1122 Pearl</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Booth, Sue</u> <u>1590 Territorial, W</u> <u>Ann Arbor, MI 48105</u>		4. Date of Receipt <u>9-4-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

300.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Buddin, Sharine & John</u> <u>5947 Par View Dr</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Bushart, Charles</u> <u>317 O'Brian</u> <u>Milan, MI 48160</u>	4. Date of Receipt <u>8-2-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Clancy, Deborah & Mike</u> <u>256 SANDROCK CT</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>9-4-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Clary, Lynn</u> <u>9400 Mortenview</u> <u>Taylor, MI 48180</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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300⁰⁰

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Coder, Larry</u> <u>9081 Lotie Lane</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>8-27-09</u>	\$ <u>200⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>ALTARUM INSTITUTE</u> Business Address <u>3520 Green Court, Ste 300, Ann Arbor, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Convergent Tech Partners</u> <u>801 S. Saginaw St. Ste 305</u> <u>Flint, MI 48502</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Dexter Education Association</u> <u>7530 Fourth St.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>300⁰⁰</u>	\$ <u>300⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Dexter Teachers Union</u> Employer _____ Business Address <u>7530 Fourth St, Dexter, MI 48130</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Domino, Karen</u> <u>647 Wemedeey Ct.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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700⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Doyle, Amy</u> <u>210 S Washington St</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>50⁰⁰</u>	\$ <u>38⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Dries, James & Cathie</u> <u>3840 Michael Rd N</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>500⁰⁰</u>	\$ <u>500⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>West Liberty Information LLC</u> Business Address <u>3840 Michael Rd N, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Dugger, David</u> <u>6924 Jennings Rd</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>150⁰⁰</u>	\$ <u>130⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Washtenaw Int. Schools</u> Business Address <u>1819 S. Wagner, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Elyakin, Neal</u> <u>1300 Red Oak</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>150⁰⁰</u>	\$ <u>150⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Educ Admin.</u> Employer <u>Washtenaw Int. Schools</u> Business Address <u>1819 S. Wagner, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>ELLISON, Ron</u> <u>1108 NATURE TRAIL</u> <u>MANCHESTER, MI 48158</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Enright, Sean</u> <u>10305 COBB Hollow Farm</u> <u>Saline, MI 48176</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Farmer, Cheryl</u> <u>214 N. HUDON ST.</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>9-4-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Fleszar Diana</u> <u>9216 clover dr.</u> <u>milan, MI 48160</u>	4. Date of Receipt <u>9-2-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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275⁰⁰

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
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BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

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3. Contribution # 1 Name & Address: <u>Fouchey, Jerry</u> <u>1317 LAUREL VIEW DR.</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Frame work systems LLC</u> <u>618 Taylor St.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>FRIESE, DAVID</u> <u>290 BEMIS</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>GARRETT, WIMMIE</u> <u>7551 WOODWIND CT.</u> <u>BRIGHTON, MI 48116</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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210⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
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1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1 Name & Address: <u>GIRBACH, Bryan</u> <u>333 Ann Marie Dr.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>8-21-09</u>	6. Amount \$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 2 Name & Address: <u>GLASS, ROB</u> <u>944 ADAMS CASTLE DR.</u> <u>BLOOMFIELD HILLS, MI 48304</u>	4. Date of Receipt <u>8-28-09</u>	6. Amount \$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 3 Name & Address: <u>GLENN, KELLI</u> <u>7321 COPPER CREEK DR.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-15-09</u>	6. Amount \$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 4 Name & Address: <u>Graden, PILAR</u> <u>8150 WATERS Rd</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-13-09</u>	6. Amount \$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

350⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>GROSS, SUSAN & BARRY</u> <u>3642 MIDDLETON</u> <u>ANN ARBOR, MI 48105</u>		4. Date of Receipt <u>8-19-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>GUILLEN, JEE</u> <u>2486 GRANT DR.</u> <u>ANN ARBOR, MI 48108</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>HART, Kimberley</u> <u>7628 BROOKDALE CT</u> <u>BRIGHTON, MI 48116</u>		4. Date of Receipt <u>8-21-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>HAWKINS, JAMES</u> <u>2144 COLLEGEWOOD</u> <u>PSILANT, MI 48197</u>		4. Date of Receipt <u>8-24-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

245⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Heaviland, Holly</u> <u>230 Crest Ave</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-17-09</u>	\$ <u>150⁰⁰</u>	\$ <u>150⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>WASHTENAW INT. Schools</u> Business Address <u>1819 SWABER, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>HELBER, Julie</u> <u>1464 WEDGEWOOD DR.</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>HOCKETT, DIANE & BOB</u> <u>1037 SHADY OAKS DR.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Houle, DAVID</u> <u>1459 Copeland Circle</u> <u>CANTON, MI 48187</u>	4. Date of Receipt <u>9-4-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

400⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2089-084
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Hovatter, Diane</u> <u>11164 Far Rd,</u> <u>milan, mi 48160</u>		4. Date of Receipt <u>9-4-09</u> 6. Amount \$ <u>20⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>20⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>JACKSON, Emma</u> <u>2252 STATE ST.</u> <u>YPSILANTI, MI 48198</u>		4. Date of Receipt <u>9-23-09</u> 6. Amount \$ <u>50⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>John E Green Co.</u> <u>2413 Thames Ct.</u> <u>Ypsilanti, MI 48198</u>		4. Date of Receipt <u>9-15-09</u> 6. Amount \$ <u>100⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>JORDAN, E ROTH</u> <u>2867 Quail Hollow Ct</u> <u>Ann Arbor, MI 48108</u>		4. Date of Receipt <u>9-23-09</u> 6. Amount \$ <u>50⁰⁰</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

220⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>KANITZ, DAWN</u> <u>612 Church St</u> <u>Milan, MI 48160</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>SMITH, CLIFFORD</u> <u>1635 SHEFFIELD DR.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>250⁰⁰</u>	\$ <u>250⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>KAYCEE CONSULTING LLC</u> Business Address <u>1635 SHEFFIELD DR, YPSILANTI, MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>KERRIGAN, DENISE</u> <u>7430 WHITMORE LAKE RD</u> <u>WHITMORE LAKE, MI 48189</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>RIGER, JANICE</u> <u>12110 BUNCE RD</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

450⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009 004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Killips, WANDA</u> <u>1901 Reeves Ln</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Kingscott Associates</u> <u>229 E. Michigan STE 335</u> <u>Kalamazoo, MI 49007</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Kingscott Associates</u> <u>229 E Michigan STE 335</u> <u>Kalamazoo, MI 49007</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Laatsch, Steve</u> <u>4429 LAKE FOREST DR. E</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

300⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 8-18-09
Name & Address:
Lewis Lakin, Shawn & Barbara
1433 Carsten Lane
Chelsea, MI 48118
6. Amount \$ 150⁰⁰ \$ 150⁰⁰
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Supt/Clergy Employer Manchester Comm. Schools
Business Address 410 City Rd, Manchester, MI 48118
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 9-15-09
Name & Address:
LINCOLN ADMINISTRATORS ASSOCIATION
8970 Whittaker Rd,
Ypsilanti, MI 48197
6. Amount \$ 500⁰⁰ \$ 500⁰⁰
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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 4. Date of Receipt 8-21-09
Name & Address:
Loyd, William
10550 MAcon Rd.
Saline, MI 48176
6. Amount \$ 50⁰⁰ \$ 50⁰⁰
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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 # 4 4. Date of Receipt 9-15-09
Name & Address:
MacGregor, Stephen & Erica
11738 SANDY BOTTOM DR.
SOUTH LYON, MI 48178
6. Amount \$ 50⁰⁰ \$ 50⁰⁰
7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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

Page Subtotal

750⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 8-13-09
Name & Address: MARCEL, Brian
9735 Horseshoe Bend
Dexter, MI 48130
5. If over \$100.00 cumulative, please provide: \$ 200⁰⁰ \$ 200⁰⁰
Occupation School Admin Employer WASHTENAW INT Sch
Business Address 1819 S. WARNER, ANN ARBOR MI 48103
Type of Contribution: Direct Loan from a person Fund Raiser
Click Here for Memo Itemization

3. Contribution # 2 4. Date of Receipt 8-28-09
Name & Address: MARSHALL, MARY
11332 SCOTCH CT
S. LYON, MI 48176
5. If over \$100.00 cumulative, please provide: \$ 100⁰⁰ \$ 100⁰⁰
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser
Click Here for Memo Itemization

3. Contribution # 3 4. Date of Receipt 9-23-07
Name & Address: MARTIN, JANET
24676 Tobby Lane
FARMINGTON HILLS, MI 48335
5. If over \$100.00 cumulative, please provide: \$ 50⁰⁰ \$ 50⁰⁰
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser
Click Here for Memo Itemization

3. Contribution # 4 4. Date of Receipt 9-11-09
Name & Address: MAYLEBEN, John
9296 WILDWOOD Lake
Whitmore Lake, MI 48189
5. If over \$100.00 cumulative, please provide: \$ 50⁰⁰ \$ 50⁰⁰
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser
Click Here for Memo Itemization

Page Subtotal 400⁰⁰
Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2089004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>McCalla, Craig</u> <u>6465 Buck Run</u> <u>Whitmore Lake, 48189</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>McGehee, John</u> <u>5810 County Lane</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>MEDLEY, DAVID</u> <u>2009 PRAIRIE DUNES CT. S.</u> <u>Ann Arbor, MI 48109</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Mehring, MARY C.</u> <u>11340 McCone Rd.</u> <u>Milan, MI 48160</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

250⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>MINNICK, JILL</u> <u>3931 PEPPERIDGE TRAIL</u> <u>BRIGHTON, MI 48114</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>MISH, PAUL</u> <u>41304 IVY WOOD LN</u> <u>PLYMOUTH, MI 48170</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>MOSAN, ALE</u> <u>632 Honeysuckle Lane</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>MUNIR, Richard</u> <u>6324 Kinyon Dr.</u> <u>BRIGHTON, MI 48116</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

250⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 8-26-09
 Name & Address: Newman, Sharon & Chuck
2648 Roselands Dr.
Ann Arbor, MI 48103
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 50⁰⁰ \$ 50⁰⁰
 Click Here for Memo Itemization

3. Contribution # 2 4. Date of Receipt 8-28-09
 Name & Address: Northrup, David & Nicola
6383 OAKHURST Dr.
Ypsilanti, MI 48197
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 50⁰⁰ \$ 50⁰⁰
 Click Here for Memo Itemization

3. Contribution # 3 4. Date of Receipt 9-22-09
 Name & Address: PARKS LEE Ann
3630 FIELD CREST Ln.
Ypsilanti, MI 48197
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 10⁰⁰ \$ 10⁰⁰
 Click Here for Memo Itemization

3. Contribution # 4 4. Date of Receipt 8-31-09
 Name & Address: Peacock, Eric
305 IDEAL ST
MILAN, MI 48160
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 100⁰⁰ \$ 100⁰¹
 Click Here for Memo Itemization

Page Subtotal 210⁰⁰
 Grand Total of All Schedules 4A
 (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Puray, Sheryl E.</u> <u>14408 E PLEASANT Lake Rd.</u> <u>Manchester, MI 48158</u>		4. Date of Receipt <u>8-18-09</u>	\$ <u>38⁰⁰</u> \$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Romeo, Joe</u> <u>278 Lyn Ann CT.</u> <u>Ann Arbor, MI 48103</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Rowan, Sylvester</u> <u>48981 Denton Rd</u> <u>Agst. 207</u> <u>Belleville, MI 48111</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Samuelson, Kim Berly</u> <u>7394 Sky Glass Ln</u> <u>Ypsilanti, MI 48197</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

225⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-054
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>SARAGOZA, TONYA</u> <u>1802 ADDINGTON LN.</u> <u>ANN ARBOR, MI 48108</u>		4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>SCHAFFNER, RICK</u> <u>6459 TRIPLE CROWN LN</u> <u>TOLEDO, OH 43615</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>75⁰⁰</u> \$ <u>75⁰¹</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Secor, Cathy</u> <u>5600 ALT Rd.</u> <u>PETERSBURG, MI 49210</u>		4. Date of Receipt <u>8-28-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Sharon molke</u> <u>4197 SANDHILL Lane</u> <u>Dexter, MI 48130</u>		4. Date of Receipt <u>9-4-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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325⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>SHROCK, Gwen</u> <u>3119 Whipple Rd</u> <u>JACKSON, MI 49201</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>SOLTIS, Leanna</u> <u>12525 WABASH Rd.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Starkweather, M. Zoe</u> <u>6820 BUCKHORN LAKE Rd</u> <u>HOLLY, MI 48442</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Stewart, Dorothy</u> <u>1787 MANCHESTER Dr.</u> <u>YPSICANTI, MI 48198</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>200⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADJUNCT PROF</u> Employer <u>Henry Ford Comm. College</u> Business Address <u>Evergreen Rd, Dearborn, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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350⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>TETENS, Nancy</u> <u>933 WRIGHT LN</u> <u>MILAN, MI 48168</u>	4. Date of Receipt <u>9-23-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>THOMAS, PAULA</u> <u>623 SECOND ST</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>9-11-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>TIRICO, DEBROAH</u> <u>2320 TALL OAKS DR.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>TOMAKOWSKI, Diane</u> <u>9058 Posey Dr.</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>8-24-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 225⁰⁰
Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>TRAMONTA, Mary Jane</u> <u>3400 SAURE Rd</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Truhn, Bonnie</u> <u>258 IDEAL ST.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>VAN BOGELAN, MARK & RUTH</u> <u>686 WALT STRASSE</u> <u>MANCHESTER MI 48158</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>VIBBART, Jim</u> <u>8140 M-36</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 250⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>VINCENT, Pamela</u> <u>215 N. Park St.</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>9-15-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>WALL, TOM & MONICA</u> <u>21159 OUTER DR.</u> <u>DEAR BORN, MI 48124</u>	4. Date of Receipt <u>8-28-09</u>	\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>WALTON, BRIAN</u> <u>7132 E. MAPLE</u> <u>GRAND BLANC, MI 48439</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Wanamaker, SUE</u> <u>37824 CASTLE DR.</u> <u>Romulus, MI 48174</u>	4. Date of Receipt <u>9-4-09</u>	\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

160⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>WARNER, JANICE</u> <u>5758 E. SILO RIDGE DR.</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>8-26-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>WATERS, MARY ANNE</u> <u>9370 VAN ANTWERP</u> <u>BRIGHTON, MI 48116</u>	4. Date of Receipt <u>8-18-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Weisman, JACQUELINE</u> <u>1010 Red Oak Rd.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Whitmore Lake Education ASSOCIATION</u> <u>8440 MAIN ST.</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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250⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>WILKINSON, ROBERT</u> <u>7268 Copper Creek Dr.</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>150⁰⁰</u> \$ <u>150⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Admin.</u> Employer <u>Ypsilanti Schools</u> Business Address <u>1895 Packard, Ypsilanti, MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Winkelman, Sara Jane</u> <u>3050 Foxcroft</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9-4-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>WOLGAST CORPORATION</u> <u>4835 TOURNE CENTRE RD</u> <u>SABINAW, MI 48104</u>		4. Date of Receipt <u>9-23-09</u>	\$ <u>200⁰⁰</u> \$ <u>200⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>WOLK, Steve</u> <u>3739 E MICHIGAN AVE.</u> <u>JACKSON, MI 49202</u>		4. Date of Receipt <u>9-15-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2089-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1
Name & Address: WRIGHT, DAYLE
126 SOUTH ST
Chelsea, MI 48118

4. Date of Receipt 8-24-09

6. Amount \$ 100⁰⁰ \$ 100⁰⁰

5. If over \$100.00 cumulative, please provide: _____

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2
Name & Address: Ypsilanti School District Principal and
Administrators Association, 2486 Grandis,
Ann Arbor, MI 48108

4. Date of Receipt 9-9-09

6. Amount \$ 500⁰⁰ \$ 500⁰⁰

5. If over \$100.00 cumulative, please provide: _____

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Name & Address: Rosen-Leacher, Betty
602 Jefferson Lane
Milan, MI 48160

4. Date of Receipt 8-17-09

6. Amount \$ 100⁰⁰ \$ 100⁰⁰

5. If over \$100.00 cumulative, please provide: _____

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Name & Address: Leacher, John
602 Jefferson Lane
MILAN, MI 48160

4. Date of Receipt 8-17-09

6. Amount \$ 100⁰⁰ \$ 100⁰⁰

5. If over \$100.00 cumulative, please provide: _____

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 800⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 Name & Address: <u>Bollman, Lynn</u> <u>735 Creekstone Lane</u> <u>Chelsea, MI 48118</u></p> <p>4. Date of Receipt <u>8-21-09</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u></p> <p>Click Here for Memo Itemization</p>	
<p>3. Contribution # 2 Name & Address: <u>SHOBER, Lucille</u> <u>8330 Waterloo Rd</u> <u>Grass Lake, MI 49240</u></p> <p>4. Date of Receipt <u>8-21-09</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u></p> <p>Click Here for Memo Itemization</p>	
<p>3. Contribution # 3 Name & Address: <u>Livengood, Ronald</u> <u>19124 Deerfield Ct</u> <u>Chelsea, MI 48118</u></p> <p>4. Date of Receipt <u>8-21-09</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>75⁰⁰</u> \$ <u>75⁰⁰</u></p> <p>Click Here for Memo Itemization</p>	
<p>3. Contribution # 4 Name & Address: <u>Killips, DAVID</u> <u>1901 Reeves</u> <u>Chelsea, MI 48118</u></p> <p>4. Date of Receipt <u>8-21-09</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u></p> <p>Click Here for Memo Itemization</p>	

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375⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Kaemming, Marcus</u> <u>49 Chestnut</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Ingall, Andrew</u> <u>6021 Tory Lane</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>LITTLE, Patrick</u> <u>120 Fox Hills</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>WOODHAMS, James</u> <u>3475 Yellowstone</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>8-21-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1
Name & Address:

4. Date of Receipt 8-21-09

OLSEN, R. Stephen
PO Box 203
Chelsea, MI 48118

\$ 50⁰⁰ \$ 50⁰⁰

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2
Name & Address:

4. Date of Receipt 8-21-09

OLSEN, R. Stephen, P.C.
PO Box 203
Chelsea, MI 48118

\$ 50⁰⁰ \$ 100⁰⁰

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Name & Address:

4. Date of Receipt 9.9.09

MERKEL, ELISE
634 FLANDERS ST.
Chelsea, MI 48118

\$ 10⁰⁰ \$ 10⁰⁰

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Name & Address:

4. Date of Receipt 9-9-09

BAREIS, Andrea
46 BUTTERNUT CT.
Chelsea, MI 48118

\$ 10⁰⁰ \$ 10⁰⁰

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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120⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2089-084

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Roehm, Stephanie</u> <u>7566 WOODBROOK Rd</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Henry, Karen</u> <u>8590 CEDAR HILLS DR.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>BAKER, Kelly</u> <u>1586 ABIGAIL WAY</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>15⁰⁰</u>	\$ <u>15⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>HEYDLAUFF, Tracy</u> <u>203 GLAZIER Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>WAGONER, AMY</u> <u>2610 S. Lima Center Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>BAREIS, MICHAEL</u> <u>49 BUTTERNUT CT.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>60⁰⁰</u> \$ <u>60⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Lawrence, Veronica</u> <u>14075 Edgewater Dr.</u> <u>Gregory, MI 48137</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>15⁰⁰</u> \$ <u>15⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>NICKEL, Lisa</u> <u>7085 N. Lake Orchard Dr.</u> <u>Gregory, MI 48137</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-084
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>WELTON, WAYNE</u> <u>1470 Tara Lane</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>ZIGMAN, TERESA</u> <u>469 CHANTILLY</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>MANN, ANNE</u> <u>1901 Pierce Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>DEPPER, JULIE</u> <u>211 QUIET CREEK CT</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-9-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 9-9-09
Name & Address: ANGELL II, NICHKAS
1243 DAISY Lane
MILAN, MI 48160 \$ 50⁰⁰ \$ 50⁰⁰

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 # 2 4. Date of Receipt 9-9-09
Name & Address: DeVol, Sally
14303 SCIO Church
Chelsea, MI 48118 \$ 60⁰⁰ \$ 60⁰⁰

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 4. Date of Receipt 9-22-09
Name & Address: MCDONALD, LAUREL
2882 Burtch Rd.
Grass Lake, MI 49240 \$ 10⁰⁰ \$ 10⁰⁰

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 # 4 4. Date of Receipt 9-22-09
Name & Address: PULLEY, Karen
7160 PALMER
Dexter, MI 48130 \$ 10⁰⁰ \$ 10⁰⁰

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>DAVIS, Kim Berly</u> <u>45 Chestnut Dr.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Kochan, MARIE</u> <u>1129 N. Congress</u> <u>Ypsilanti, MI 48197</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Byrne, ALICE</u> <u>52 Butternut Ct.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Inman, SANDRA</u> <u>6639 Woodvine Dr.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-22-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>MARTIN-REED, Beverly</u> <u>7738 HIDDEN RIDGE Lane</u> <u>Northville, MI 48167</u>		4. Date of Receipt <u>9-22-09</u> \$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>HOLDSWORTH, Laura</u> <u>578 UPLAND HILLS Dr.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-22-09</u> \$ <u>15⁰⁰</u>	\$ <u>15⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Hermes, Pamela</u> <u>1325 PROVINCIAL Dr.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-22-09</u> \$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Dunn, SAUNDRA</u> <u>3035 Barman Rd.</u> <u>DANSVILLE, MI 48819</u>		4. Date of Receipt <u>9-22-09</u> \$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Cole, Jennifer</u> <u>753 PROVINCIAL DR.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Chelsea Education Association</u> <u>500 E. WASHINGTON ST.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-22-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Sharon Lester</u> <u>3225 Fieldstone</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>9-1-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Mowrer, Kevin</u> <u>1313 AUSTON Lane</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 9-27-09

Name & Address:
COLTON, Kenneth
5841 RED FOX RUN
ANN ARBOR, MI 48105

\$ 30⁰⁰ \$ 30⁰⁰

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 # 2 4. Date of Receipt 9-18-09

Name & Address:
TASSIN, MARE
7999 POPLAR
Dexter, MI 48130

\$ 25⁰⁰ \$ 25⁰⁰

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 4. Date of Receipt 9-25-09

Name & Address:
ANGEL, LAURA
1243 DAISY Lane
MILAN, MI 48160

\$ 10⁰⁰ \$ 10⁰⁰

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 # 4 4. Date of Receipt 9-25-09

Name & Address:
ARINGTON, D.
7425 WILLIS Rd
YPSILANTI, MI 48197

\$ 4⁰⁰ \$ 4⁰⁰

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

Page Subtotal 89⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>BAXTER, Amy</u> <u>6227 TUTTLE HILL</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Berez, CARI</u> <u>8183 Hummingbird Dr.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>CYRBOK, ANGELO</u> <u>6355 JOANVILLE LN.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>DAIGNEAU, Jennifer</u> <u>11526 WILSON</u> <u>Belleville, MI 48114</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

25⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>DICKS, RAQUEL</u> <u>2650 SANDHILL Dr.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Fouchay, Lynn</u> <u>1317 LAUREL View Dr.</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>HALALAY, DENNIS</u> <u>1765 S. FRANKLIN CT.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>HILL, CINDY</u> <u>8970 Whitaker</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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65⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Hinderer, Diana & Robert</u> <u>5096 SUNSET TRAIL</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-25-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>HUGHES, Dawn</u> <u>989 MARSHALL CT</u> <u>Dexter, MI 48130</u>		4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>SUSIE JACKSON</u> <u>2970 WHITAKER</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-25-09</u>	\$ <u>2⁰⁰</u> \$ <u>2⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Krumrei, Rose</u> <u>8970 WHITAKER</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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112⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>LINCOLN Education ASSOCIATION</u> <u>8970 WHITTAKER</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>580⁰⁰</u>	\$ <u>58⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Richert, Lori</u> <u>8970 WHITTAKER</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Lehto, JAMIE</u> <u>8970 WHITTAKER</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>18⁰⁰</u>	\$ <u>18⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>ROBBINS, PAM</u> <u>7435 HIDEAWAY DR,</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>9-25-09</u>	\$ <u>15⁰⁰</u>	\$ <u>15⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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538⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>SHOCK, SACKLYN</u> <u>9184 Mcgregor Rd</u> <u>Pinckney, MI 48169</u>		4. Date of Receipt <u>9-25-09</u>	6. Amount \$ <u>105⁰⁰</u> \$ <u>105⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal</u> Employer <u>Lincoln Schools</u> Business Address <u>8970 Whittaker, Ypsilanti, MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Van Hevel, SODI</u> <u>8976 Ironwood Dr.</u> <u>Bellerive, MI 48111</u>		4. Date of Receipt <u>9-25-09</u>	6. Amount \$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Wroathers, DAN & MIKE</u> <u>8744 Whittaker</u> <u>Ypsilanti, MI 48197</u>		4. Date of Receipt <u>9-25-09</u>	6. Amount \$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>WILBANKS, GARY</u> <u>5317 Merritt Rd.</u> <u>Ypsilanti, MI 48197</u>		4. Date of Receipt <u>9-25-09</u>	6. Amount \$ <u>5⁰⁰</u> \$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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135⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>ZITNIK, DANIEL</u> <u>8891 BUNTON</u> <u>WILLIS, MI 48191</u>		4. Date of Receipt <u>9-25-09</u> \$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>EMLAW, MEG</u> <u>445 MAYER DR.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-25-09</u> \$ <u>110⁰⁰</u>	\$ <u>110⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Chelsea Schools</u> Business Address <u>500 WASHINGTON ST., Chelsea MI 48118</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>WIRELAND, Karen</u> <u>8065 MESTER RD.</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-25-09</u> \$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>McCalla, Kathryn</u> <u>6465 BUCK RUN</u> <u>Whitmore Lake, MI 48189</u>		4. Date of Receipt <u>9-25-09</u> \$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

230⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 9-25-09
 Name & Address: HENRY, KRISTIN
1570 E. FOREST AVE.
YPSILANTI, MI 48198
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 10⁰⁰ \$ 10⁰⁰
 Click Here for Memo Itemization

3. Contribution # 2 4. Date of Receipt 9-25-09
 Name & Address: RENDLE, SALLY
157 E. SUMMIT ST.
Chelsea, MI 48118
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 10⁰⁰ \$ 10⁰⁰
 Click Here for Memo Itemization

3. Contribution # 3 4. Date of Receipt 9-25-09
 Name & Address: MURPHY, CAIOLÉ
20437 SAGER RD.
Chelsea, MI 48118
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 10⁰⁰ \$ 10⁰⁰
 Click Here for Memo Itemization

3. Contribution # 4 4. Date of Receipt 9-22-09
 Name & Address: Federation of WashTEncore Intermediate School Employees
FWISE LOCAL 3760, AFT, AFT MI, AFL-CIO
1819 S. WAGNER
Ann ARBOR, MI 48106
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

\$ 2480⁰⁰ \$ 2480⁰⁰
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-084
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>MILLER, WILLIAM C.</u> <u>208 Montgometry</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>7-2009</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Ley shock, Richard</u> <u>1008 Congress</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>7-2009</u>	\$ <u>200⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Admin.</u> Employer <u>WASHTENAW 1SD</u> Business Address <u>1819 S. WAGNER, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>ALLEN, Geraldine</u> <u>3705 Lone Tree Rd</u> <u>MILFORD, MI 48388</u>	4. Date of Receipt <u>7-31-09</u>	\$ <u>200⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Admin.</u> Employer <u>WASHTENAW, SD</u> Business Address <u>1819 S. WAGNER, Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>KLIMEK, SUE</u> <u>859 PLANK ST.</u> <u>DUNDEE, MI 48131</u>	4. Date of Receipt <u>7-31-09</u>	\$ <u>35⁰⁰</u>	\$ <u>35⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 535⁰⁰
Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2089-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>ROBINSON, ERIC</u> <u>523 W. MIDDLE</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>200⁰⁰</u> \$ <u>200⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Chelsea Schools</u> Business Address <u>500 WASHINGTON ST., Chelsea, MI 48118</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>THOMPSON, KATHLEEN</u> <u>287 HIGHLAKE</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>HERMOSKLO, JUDITH</u> <u>1930 N. DANCER RD.</u> <u>DEXTER, MI 48130</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>15⁰⁰</u> \$ <u>15⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>KaEMMING, LISA</u> <u>49 CHESTNUT</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 255⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>GOVEN, DONALD</u> <u>232 FAIRHILLS DR.</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Churchwell, H. Canbice</u> <u>4724 VICTORIAN SQ. WEST</u> <u>CANTON, MI 48188</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>MARTIN, DETRICK</u> <u>2568 EAGLES CIRCLE #3</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>PARISH-FOSTER, Karen</u> <u>P.O. Box 70</u> <u>WHITTAKER, MI 48190</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 225⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>KUZON, LINDA</u> <u>4665 FOX SEDGE CT.</u> <u>DEXTER, MI 48130</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>RICCOBONO, BILL</u> <u>503 ROOSEVELT</u> <u>YPSILANTI, MI 48191</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>ALEX, ARTEMIS</u> <u>1350 FOX POINTE CIRCLE</u> <u>ANN ARBOR, MI 48108</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>BASHERT, LISA</u> <u>909 GRANT STREET</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>9-29-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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135⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Phoenix Services</u> <u>1601 Briarwood Circle</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>9-29-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>CLARK Construction</u> <u>Po Box 40087</u> <u>LANSING, MI 48901</u>	4. Date of Receipt <u>10-1-09</u>	\$ <u>300⁰⁰</u>	\$ <u>300⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>FANNING/Howey Associates</u> <u>1200 Ermischer BLVD.</u> <u>CELINA, OH 45822</u>	4. Date of Receipt <u>10-1-09</u>	\$ <u>500⁰⁰</u>	\$ <u>500⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>MILAN Education Association</u> <u>100 Big Red Drive</u> <u>MILAN, MI 48168</u>	4. Date of Receipt <u>10-1-09</u>	\$ <u>400⁰⁰</u>	\$ <u>400⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004
2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>MOORE, ROGER</u> <u>12456 PIPECREST DR.</u> <u>PLYMOUTH, MI 48170</u>	4. Date of Receipt <u>8-24-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>PEOPLES, GREGORY</u> <u>5445 SCOTT COURT</u> <u>YPSICANTI, MI 48197</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>REIST, GRETCHEN</u> <u>325 O'BRIAN DR.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>GIELINSKI, JOBY</u> <u>47150 DENTON RD.</u> <u>BELLEVILLE, MI 48111</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>DeKeyser, Tom</u> <u>7811 Winfield Dr.</u> <u>BRIGHTON, MI 48116</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Johnson + Wood LLC</u> <u>2130 Hemphill Rd</u> <u>Button, MI 48529</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Weiss, John + Sarah</u> <u>1206 Pearl St.</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Getto, Cameron</u> <u>305 Maple St.</u> <u>Ypsilanti, MI 48198</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Moore, Roger</u> <u>12456 Pinecrest Dr.</u> <u>Plymouth, MI 48178</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>50⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>HUGG, Heather</u> <u>921 N. ALEXANDER</u> <u>ROYAL OAK, MI 48067</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>70⁰⁰</u>	\$ <u>70⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Catherman, Rick</u> <u>1472 Carston Ln</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>90⁰⁰</u>	\$ <u>90⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Arons, William</u> <u>665 Mayer</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>10-5-09</u>	\$ <u>95⁰⁰</u>	\$ <u>95⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>LUNDY, DICK</u> <u>Po Box 247</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>108⁰⁰</u>	\$ <u>108⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>WILLS, PAUL</u> <u>1260 ALBANY ST.</u> <u>Ferndale, MI 48220</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>100⁰⁰</u>	\$ <u>108⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>VANNATER, Cherie</u> <u>9740 PLATT Rd.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>STAUDER, BARCH + ASSOCIATES INC.</u> <u>3989 Research PARK drive</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>108⁰⁰</u>	\$ <u>108⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 10-12-09

Name & Address: KAPOLKA, Michael
1915 E. HUDSON AVE.
ROYAL OAK, MI 48067

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

\$ 50⁰⁰ \$ 50⁰⁰

[Click Here for Memo Itemization](#)

3. Contribution # 2 4. Date of Receipt 10-12-09

Name & Address: LAWRENCE, Veronica
14095 Edgewater Dr.
GREBOYS, MI 48137

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

\$ 50⁰⁰ \$ 65⁰⁰

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3. Contribution # 3 4. Date of Receipt 10-12-09

Name & Address: HORNE, LINDA
205 OAK ST. #1
YPSILANTI, MI 48198

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

\$ 20⁰⁰ \$ 20⁰⁰

[Click Here for Memo Itemization](#)

3. Contribution # 4 4. Date of Receipt 10-12-09

Name & Address: ADRIAN Mechanical Services Co.
953 W. Beecher St.
ADRIAN, MI 49221

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

\$ 250⁰⁰ \$ 250⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>BLACKWELL, Thomas</u> <u>670 ONODAGA</u> <u>YPSILANTI, MI 48198</u> 4. Date of Receipt <u>10-12-09</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>15⁰⁰</u> \$ <u>15⁰⁰</u> Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>HUMES, CHRISTINE</u> <u>670 ONODAGA</u> <u>YPSILANTI, MI 48198</u> 4. Date of Receipt <u>10-12-09</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u> Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>LISIS CKI, LAURA</u> <u>670 ONODAGA</u> <u>YPSILANTI, MI 48198</u> 4. Date of Receipt <u>10-12-09</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u> Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>BURTON, JENNIFER</u> <u>388 Rolling Meadows Dr.</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>10-7-09</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>WASHTC New ISD</u> Business Address <u>1819 S. WAGNER Rd Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>150⁰⁰</u> \$ <u>150⁰⁰</u> Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>OKEY, Per Lamont</u> <u>329 ANN ARBOR HILL</u> <u>MANCHESTER, MI 48158</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>LANGEN, SUE</u> <u>347 WILLIS RD.</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>PLATT, Heather</u> <u>524 W. MIDDLE ST.</u> <u>CHELSEA, MI 48118</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Burnoughs, Nicole</u> <u>7642 Fourth ST.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-804
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>HICKS-Caselli, Jeanne</u> <u>6120 STOFER Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>LOCKS, BARBARA</u> <u>4881 STRAWBERRY Lake Rd.</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>10⁰⁰</u> \$ <u>10⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>STRAHLER, Carol</u> <u>5470 Conway Rd.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>15⁰⁰</u> \$ <u>15⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>ALBERT, JILL</u> <u>PO Box 646</u> <u>NAPOLEON, MI 49201</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>20⁰⁰</u> \$ <u>20⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

55⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDU CASHOW

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>FRIESE, DAVID</u> <u>290 BEMIS RD</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>10-12-09</u>	\$ <u>1,000⁰⁰</u>	\$ <u>1050⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>COBLER, LARRY</u> <u>9081 LOTIE CARR</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>200⁰⁰</u>	\$ <u>400⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>ALTARUM INSTITUTE</u> Business Address <u>3520 Green CT STE 300 ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>EMLAU, MICHAEL</u> <u>1320 KING GEORGE BLVD</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>JUDGE, KRISTIN</u> <u>6082 Vineyard Ave</u> <u>ANN ARBOR MI 48108</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1325⁰⁰

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>WILLOW RUN ADMINISTRATOR ASSOCIATION</u> <u>235 SPENCER LANE</u> <u>YPSILANTI, MI 48198</u>		4. Date of Receipt <u>10-12-09</u>	\$ <u>200⁰⁰</u> \$ <u>200⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>BELL, BETH</u> <u>3232 GLACIER CT</u> <u>DEXTER, MI 48130</u>		4. Date of Receipt <u>10-12-09</u>	\$ <u>25⁰⁰</u> \$ <u>25⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>KINSEY, TONI</u> <u>21 HICKORY DR.</u> <u>CHELSEA, MI 48119</u>		4. Date of Receipt <u>10-12-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>BATTAGLIA, STACE</u> <u>5806 S. HAY RAKE HOLLOW</u> <u>CHELSEA, MI 48119</u>		4. Date of Receipt <u>10-12-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

375⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>STAUDES, PAUL</u> <u>2148 STORE BRIDGE DR S.</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>MILES, JENNIFER</u> <u>1404 DOVES DR</u> <u>YPSICANTI, MI 48197</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>MORGAN, Janelle</u> <u>3966 W. MAIN</u> <u>STANTON, MI 48888</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>SZCZECHOWICZ, Michelle</u> <u>1781 CLOVER RIDGE DR.</u> <u>Nowell, MI 48843</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

95⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	4. Date of Receipt <u>10-18-09</u>		
Name & Address: <u>VAN KIRK, Greg</u> <u>24743 NEPAVINE</u> <u>NOVI, MI 48314</u>		\$ <u>100⁰⁰</u>	\$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2	4. Date of Receipt <u>10-18-09</u>		
Name & Address: <u>WILLOW RUN EDUCATION ASSOCIATION</u> <u>11855 LANDERS DR.</u> <u>PLYMOUTH, MI 48170</u>		\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	4. Date of Receipt <u>10-18-09</u>		
Name & Address: <u>WILLIAMS, DAVID</u> <u>769 GATES</u> <u>YPSILANTI, MI 48198</u>		\$ <u>40⁰⁰</u>	\$ <u>40⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	4. Date of Receipt <u>10-18-09</u>		
Name & Address: <u>NEW WEST WILLOW NEIGHBORHOOD ASSOCIATION</u> <u>2057 TYLER RD</u> <u>YPSILANTI, MI 48198</u>		\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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215⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Henry, Robert</u> <u>10526 Heenan Dr.</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Schumaker Julie</u> <u>7619 KINGFISHER CT.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Ryburg, Carole</u> <u>3616 N. Wilson Ct.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>15⁰⁰</u> \$ <u>15⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Bezeau, Brad AND Anne</u> <u>10343 Warner Rd</u> <u>Milan, MI 48160</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>50⁰⁰</u> \$ <u>50⁰⁰</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Stevenson, Jesse</u> <u>885 Fedora Dr.</u> <u>Tecumseh, MI 49286</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>10⁰⁰</u>	\$ <u>10⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Henes, Patti</u> <u>5186 AUSTIN RD.</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Moyer, Cristal</u> <u>106 ASTOR BLVD</u> <u>Belleville, MI 48111</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Shock, Lia</u> <u>9184 McBregoe Rd</u> <u>Pinckney, MI 48169</u>	4. Date of Receipt <u>10-18-09</u>	\$ <u>5⁰⁰</u>	\$ <u>5⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

70⁰⁰

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>OAK POINTE GROUP</u> <u>PB BOX 2153</u> <u>BRIGHTON, MI 48116</u>		4. Date of Receipt <u>10-12-09</u>	6. Amount \$ <u>100⁰⁰</u> \$ <u>100⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: _____		4. Date of Receipt _____	\$ _____ \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: _____		4. Date of Receipt _____	\$ _____ \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: _____		4. Date of Receipt _____	\$ _____ \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 4A
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100⁰⁰
21,654⁰⁰

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2009-004
2. Committee Name FRIENDS OF EDUCATION

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>PAY PAL.COM</u>	4. Purpose: <u>INTERNET BANK FEES</u> 5. Ballot Proposal: <u>WASHTENAW 1ST Regional Enhancement Millage</u>	<u>10-18-09</u> Date of Expenditure	<u>\$ 58.92</u>	<u>\$ 56.92</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>RICHARD LEYSHOCK</u> <u>1008 CONGRESS</u> <u>YPSILANTI, MI 48197</u>	4. Purpose: <u>Brochure printing, faxing</u> 5. Ballot Proposal: <u>WASHTENAW 1ST Regional Enhancement Millage</u>	<u>8-18-09</u> Date of Expenditure	<u>\$ 388.92</u>	<u>\$ 439.64</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Ann Arbor Center For Independent Living</u> <u>3441 Research Park Drive</u> <u>Ann Arbor, MI 48108</u>	4. Purpose: <u>Donate an Anonymous Contribution</u> 5. Ballot Proposal: <u>WASHTENAW 1ST Regional Enhancement Millage</u>	<u>9-30-09</u> Date of Expenditure	<u>\$ 3.00</u>	<u>\$ 442.64</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>WEST LIBERTY INFORMATION LLC</u> <u>3840 MICHAEL Rd N.</u> <u>Ann Arbor, MI 48103</u>	4. Purpose: <u>LIST Selection</u> 5. Ballot Proposal: <u>WASHTENAW 1ST Regional Enhancement Millage</u>	<u>10-6-09</u> Date of Expenditure	<u>\$ 1,110.28</u>	<u>\$ 1,552.92</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page 1552.92
Grand Total of Schedules 4B
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Enter this total on Line 8a of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2009-004

2. Committee Name FRIENDS OF EDUCATION

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>Ann Arbor Citizens Millage Committee</u> <u>PO Box 8131</u> <u>Ann Arbor MI 48107</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>YARD SIGNS</u> 5. Ballot Proposal: <u>WASHTENAW 15D Regional Enhancement Millage</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>10-6-09</u> Date of Expenditure	<u>\$ 1677.56</u>	<u>\$ 3230.48</u> Click for Memo Itemization Type
Expenditure # 2 Name & Address: <u>Allegra Print + Imaging</u> <u>1283 Industrial Dr.</u> <u>SALINE, MI 48176</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Brochures Postage</u> 5. Ballot Proposal: <u>WASHTENAW 15D Regional Enhancement Millage</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>10-6-09</u> Date of Expenditure	<u>\$ 5491.44</u>	<u>\$ 8721.92</u> Click for Memo Itemization Type
Expenditure # 3 Name & Address: <u>Allegra Print + Imaging</u> <u>1283 Industrial Dr.</u> <u>SALINE, MI 48176</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Brochures</u> 5. Ballot Proposal: <u>WASHTENAW 15D Regional Enhancement Millage</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>10-12-09</u> Date of Expenditure	<u>\$ 3071.27</u>	<u>\$ 11793.19</u> Click for Memo Itemization Type
Expenditure # 4 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: County:	 Date of Expenditure	 \$ _____	 Click for Memo Itemization Type

Subtotal this page 10,246.27
 Grand Total of Schedules 4B (Complete on last page of Schedule) 11,793.19

Enter this total on Line 8a of the Summary Page