#### BALLOT QUESTION COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in link and signed by the treasurer or designated record keeper.	3.This Statement covers Fro	от: <u>7-09-69</u> то <u>10-18-69</u>		
1. Committee I.D. Number	4. Committee's Mailing Addr	ress		
B-2009-004	40 Larry Co	BLEF, Treasurer		
2. Committee Name	9081 LOTIE Dex Ter, MI Area Code and Phone	Care 4 8136		
Friends OF Education	If the address in this box is d	134 126 1233 lifferent from the committee mailing address on on, mail may be sent to this address by the filling		
5. Treasurer's Name and Residential Address				
Larry Cosser				
9081 LOTIE CARE 18130				
9081 LOTIE CARE DESTES, MI 48130 Area Code and Phone 134-426-1233				
6. Treasurer's Business Address	7. Designated Record Keeper's (If the committee has a Designation of the committee ha	Name and Mailing Address nated Record Keeper)		
ALTARUM Institute 3520 Green Court Ste 300	SUE KLIMEK			
3520 612e/1 Cool 6 35 35	859 PLANK	51. . 48/31		
AMIL AFBOS, MI 48105	DUADER M	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
Area Code and Phone 134-362-4643	Area Code and Phone 734-	324-3321		
8, TYPE OF STATEMENT:	8c. ANNUAL STATEMENT	8e. DAMENDMENT TO CAMPAIGN		
8a. PRE-ELECTION	( Coverage Year)	(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)		
OR	8d. QUALIFICATION	indicate which Statement is being amended)		
8b. POST- ELECTION	OR	8f. DISSOLUTION OF COMMITTEE		
Pre-Election or Post-Election Statement relates to:	NON-QUALIFICATION	Effective Date of Dissolution		
☐ PRIMARY ☐ GENERAL	STATEMENT (Required of State-wide Ballot Question			
SCHOOL SPECIAL	Committees Only)			
		By checking this item, I certify that the		
Date of Election:	Date of Qualification or Non- Qualification:	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.		
		4B and the Summary Page.		
2				
<u> </u>				
A committee that does not have a Reporting Waiver must file all rec Schedules. Direct contributions, in-kind contributions, loans, exper	quired Campaign Statements. The C iditures and outstanding debts coun	Campaign Statements must include all applicable t against the \$1,000 Reporting Waiver threshold.		
If any of the information listed in items 4, 5, 6, or 7 has changed sin	ce the information was shown on the	e committee's Statement of Organization, an		
amendment to the Statement of Organization should accompany th or before the filing:deadline of a required campaign statement,	that campaign statement can not	be waived.		
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 50 E KLIMOX Type or Print Name	, Sue Klime Signature	b Date 16-18-09		



#### **SUMMARY PAGE**

1. Committee I.D. Number <u>B-2069-004</u>

**BALLOT QUESTION COMMITTEE** 2. Committee Name Fren DE OF Education Column II RECEIPTS Column L Cumulative for Election Cycle This Period 3. Contributions 21,654,00 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (3b.) \$ NOT APPLICABLE (less than \$20.01 - no Schedule) (3c.) \$ 21,654, (18.) \$ 21,654.06 c. Subtotal of Contributions 4. Other Receipts (Schedule 4A-1, Column 6) (5.) \$ <u>21,654,00</u> 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (20.)\$ 21,654.00 (Add Line 3 c + Line 4) IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a. Itemized In-Kind Contributions (6a.) \$ (Schedule 4-IK, Column 7) (6b.) \$ NOT APPLICABLE b. Unitemized (less than \$20.01 each - no Schedule) 7. TOTAL IN-KIND CONTRIBUTIONS (21.) \$ \_\_ (Add Line 6a + Line 6b) **EXPENDITURES** 8. Expenditures (8a.) \$ 11. 293.19 a. Itemized Direct Expenditures (Schedule 4B, Column 7) b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6) c. In-Kind Expenditures - Purchase of Goods or Services (8c.) \$ \_\_\_\_\_ (Schedule 4B-2, Column 7) d. Unitemized Expenditures (\$50.00 or less-no Schedule) e. Subtotal of Expenditures 9. Independent Expenditures (Schedule 4B-1, Column 7) (24.) \$ 11,293,19 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES 11. Total in-Kind Expenditures-Endorsements, Donations or (25.) \$ \_\_\_ Loans of Goods or Services (Schedule 4B-2, Column 8) **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.)\$ \_\_\_\_ a. Owed by the Committee (Schedule 4E) (12b.) \$\_ b. Owed to the Committee (Schedule 4E) **BALANCE STATEMENT** 13. Ending Balance of last report filed (13.) \$ \_\_\_\_\_ (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts) (14)+ 21,654,00 (15.)= 21, 654.00 15. SUBTOTAL Add lines 13 and 14 (16.)- 11, 193,19 Amount expended during reporting period (Line 10, Column I, Total Expenditures) (17.)\$ 9860,81 17. ENDING BALANCE (Subtract line 16 from line 15)

<sup>\*</sup>If your ending balance is negative, please recheck your math.



#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

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

2. Committee Name French OF Coloration

middle initial.	ddress. If contribution is from an individual,	, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:		2409		
Ahu VIa, AUTA 1317 King Ann Ar Bor 5. If over \$100.00 cumulative, pleas	¿ Araron Geoge Blva	·	s 10.	\$ 1000
5. If over \$100.00 cumulative, pleas	M 1 48/08 e provide:		Click Here for Me	emo Itemization
Occupation				
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 2     Name & Address:		15-19		:
Allen, Karen 801 Stealby 9251/21141, 5. If over \$100.00 cumulative, please	START		s 36 00	\$ 3400
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Occupation	Employer			
Business Address			**	•
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	4. Date of Receipt Q	2719	···	·
Anonymo	SUS .		\$ 300	s_3 88
5. If over \$100.00 cumulative, please	e provide:		Click Here for Mem	o Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt	9-4-09		
Bates, DAVICE	st, 40197	**************************************	\$ 166	s 180 06
5. If over \$100,00 cumulative, please	provide:		Click Here for Mem	o Itemization
Occupation	Employer			- //
Business Address		1.0		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number	B-2019-004
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BALLOT GOLOTION	2. Committe	e Name P1/E1GS	UP COW	Canos
Please enter contributors name and addre middle initial.	ss. If contribution is from an individual, ent	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt 9	15-09		date of receipty
Benczarski, Mi 9512 Crest Un.	enaej e		\$ 10000	\$ 180°°
PINCK Ney, M 5. If over \$100.00 cumulative, please pro	/ <i>48169</i> vide:	• •	Click Here for Me	mo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address: Bendit, Rachel 2002 SCOTTWOOD	4. Date of Receipt 9–9–2	19	1×00	Z) (0)
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	_Employer	· · · · · · · · · · · · · · · · · · ·		
Business Address	Lang from a paragr	Ford Dalace		
3. Contribution # 3 Name & Address:	4. Date of Receipt 9-15	Fund Raiser	·	
Berman, Kira 1122 Pease 1122 Pease 1123 Pease 1123 Pease 5. If over \$160.00 cumulative, please pro	48197 vide:		\$	\$ 188 O)
Occupation	Employer			
Business Address —				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt 9-4-0	79		
Booth, Sue				00
1590 Territor	ial, w		\$ 5000	\$ 50
1300Th, SUR 1590 TEXATOR ANN AT 1308 i. If over \$100.00 cumulative, please prov	MI 48105			
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number <u>B-2009-084</u>

2. Committee Name 1100	
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:  BUDDIN, Showine & John  5941 PARVIEW Dr.  48197  5. If over \$100.00 cumulative, please provide:	\$ 50 % \$ 30 Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:   Direct   Loan from a person   Fund Raiser	
3. Contribution #2  Name & Address:  Bushart Charles  317 OBrian  Milan, M/ 48160  5. If over \$100.00 cumulative, please provide:	\$ 50 ° \$ 50 ° S
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 4. Date of Receipt 9469	
Clancy, DeBorah & Mike  256 SANDRICK CT  Ann Ar Box M/ 48 163  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$ 188 \$ 188 Click Here for Memo Itemization
Type of Contribution: Loan from a person Fund Raiser	
3. Contribution #4 Name & Address:  Cleary, Lynn 9400 Morten VIEW  Tay Lor, MI 48180 5. If over \$100.00 cumulative, please provide:	\$ 100 \$ 100 Click Here for Memo Itemization
Occupation Employer	Click here for Wemo Itemization
Business Address	•
Type of Contribution: Direct Loan from a person Fund Raiser	
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

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

2. Committee Name French OF Education

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Please enter contributors name and address. If c middle initial.	ontribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:  Coder, Larry	Date of Receipt 8-27-0	9	00	
9081 Lotte LANE			s 200	\$ 200 00
TOUXTES, MI 48/30 5. If over \$100.00 cumulative, please provide:	<b>)</b>		Click Here for Men	no Itemization
Occupation DITECTUT Empl	loyer ALTARUM IN	STITUTE		
Business Address 3530 Green ( Type of Contribution: Hoirect	Loan from a person	n A A Boc, M Fund Raiser	1 48105	
Name & Address: Con Vergent Tech For 801 S. SAGINOW ST	Date of Receipt 9-23-1 Part Nevs +. Ste 385	7 9	\$ / 00	\$ 188 0
Him, ml 48503 i. If over \$100.00 cumulative, please provide:	2	•	Click Here for Memo	) Itemization
Occupation Empl	oyer			
Business Address			•	
Type of Contribution: Direct  3. Contribution # 3  4.	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 945-0	7	•	
Dexter Education A 1550 Fourth ST.	350Ca710D		\$ 300 00	·
Dexter, on 481	<i>(3</i> )		3 300	\$ <u>300°</u>
5. If over \$100.00 cumulative, please provide:	_		Click Here for Memo	Itemization
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

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BALLOT QUESTION COMMITTEE 2. Committee Name FILE IT.	DS 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 8-28-09		
Doyle, Amy 210 S. washington St.	s 50 od	s 38 60
JPS, GAH, MI 48/9) 5. If over \$100.00 cumulative, please provide:	Click Here for Mer	mo Itemization
OccupationEmployer		•
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2  4. Date of Receipt 8 2809  Name & Address:		
Dries, James & Cathie 3840 Michael R.D. N Ann Arbor, Mi 48163 i. If over \$100.00 cumulative, please provide:	\$ 500 OO	\$ 586 S
Occupation Prespoent Employer West GRESTY Information		o Homization
Business Address 3840 Michael Rd W. Ann As	Box, mi-	48183
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
Name & Address:  4. Date of Receipt 9-23-17	•	
Dugger, DAVID 6924 Jennings Rd. ASBUT 701 48105 5. If over \$100.00 cumulative, please provide:	\$_/3\\dagger\dag	
Occupation DICCOTO Employer WAShtenaw Int. School	<b>S</b>	
Business Address 1819 S. WAFFNET, Ann AR BOT 1 MI Type of Contribution: Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 8-1809		
Elyakin, Neau 1300 Red OOK Ann As Bot MI 48183 If over \$100.00 cumulative, please provide:	\$ 150 00	s_/ <del>S</del> 61
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number B-2019-009
2. Committee Name French SF Education

middle initial.	ss. If contribution is from an individual, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address:  ELLISON, Roy  1108 Nature  Manchester, m.  5. If over \$100.00 cumulative, please pro	TRIL 4 858	\$ 100 °C \$ 100 °C Click Here for Memo Itemization
Occupation	Employer	
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2  Name & Address:  En right, Sean  10305 CoBB 1,  Saline, Mi 481  5. If over \$100.00 cumulative, please pro	4. Date of Receipt 9-9-09  Follow Farm  16	\$ 25°0 \$ 25°0
Occupation		Click here for wemo itemization
Business Address  Type of Contribution: Direct  3. Contribution # 3	Loan from a person  4. Date of Receipt  9-4-59	
Name & Address:  Farmer, Chery L  214 n. Huron ST  YPSILaut, MI 48  5. If over \$100.00 cumulative, please pro	('{'}' / · · · · · · · · · · · · · · · · · ·	\$ 180 \$ 100 S
Occupation	Employer	
Business Address Type of Contribution: Direct	Loan from a person Fund Raiser	
Contribution # 4 Name & Address:	4. Date of Receipt 9409	
Fleszan Dlana 9216 Clover Dr Milan, M. 48 . If over \$100.00 cumulative, please prov	160 ide:	\$ 50 °° \$ 50 °° Click Here for Memo Itemization
Occupation	Employer	
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number <u>B-2019-004</u>

BALLOT QUESTION COMMITTEE	2. Committee Name FIENDS OF COURATION
Please enter contributors name and address. If contribution is from an middle initial.	individual, enter last name, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1  Name & Address  Fouch eq. Jerry  1317 LAurel View Dr.  Ann Arbor, M1 48105  5. If over \$100.00 cumulative, please provide:	9-15-09 \$ 50 ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a pers	son Fund Raiser
3. Contribution #2 Name & Address:  Frame work Systems LLC 618 Taylor St  Chelsea, m1 48118  5. If over \$100.00 cumulative, please provide:	9-2309  \$
Occupation Employer	Slick Here to Mento iteniization
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Business Address	
Type of Contribution: Direct Loan from a person 3. Contribution # 3 4. Date of Receipt	Fund Raiser
Name & Address:  Frese, DAVID  290 Bemis  Saline, Mi 48176  5. If over \$100.00 cumulative, please provide:	\$ 50 00 \$ 50 08  Click Here for Memo Itemization
Occupation Employer	
Business Address	Total Control of the
Type of Contribution: Direct Loan from a person	Fund Raiser
3. Contribution #4 Name & Address:  60 (CETT, WINNIE)  7551 WOOD WIND CT,  BUIGHTON, MI 4 81/6  5. If over \$100.00 cumulative, please provide:	9-15-09
1551 WOOD WIND 4 81/6	\$ 10°00 \$ 10°00
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

1. Committee I.D. Number <u>B</u>-2009-004

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**BALLOT QUESTION COMMITTEE** TEMPS OF EDUCATION 2. Committee Name Please enter contributors name and address. If contribution is from an individual, enter last name, first name, 7. Cumulative for 6. Amount middle initial Election Cycle for Each Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt Name & Address: GITBACH, Bryan 333 Ann marie tr. MILAD, MI 48160 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address -Direct Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 2 4. Date of Receipt Name & Address: GLASS, ROB 944 ADAMS CASTLE Dr. Bloom FICLD HILLS, MI 48304 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 Name & Address: GLENN, KELLI 1321 Copper Creek Tr. 0) 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 Contribution # 4 Name & Address: 4. Date of Receipt Graden, PILAR 8150 WATERS Re 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 00 Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Page 8 of 65



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-009

BALLOT QUESTION CO	2. Committee	ee Name <u> </u>	<u> </u>	EXOCULTION
Please enter contributors name and address. I middle initial.	f contribution is from an individual, en	ster last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: G つ 55, S US ATI ダ 3642 M は カンと TO A AM の A C B O C, M I 5. If over \$100.00 cumulative, please provide	18165 48165	19-69	\$ 25°00 Click Here for Men	\$ 25 and Itemization
OccupationEr	nployer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address: GUI // En, 5& E 2486 Gant Dr. Ann Arbur, mi 5. If over \$100.00 cumulative, please provide	4. Date of Receipt 9-15-	<u>'09</u>	\$60 Click Here for Memo	\$20 ° d
	nployer			
Business Address	,	•		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:  HART, KIMBER ley  1628 BROOK Dale  13(64+TOI), MI 4  5. If over \$100.00 cumulative, please provide	18116		\$	
Occupation E	mployer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 8 2	<u>409</u>		
HAW KINS, JAMES 2144 Collegewood 18511anti, MI 4815 If over \$100.00 cumulative, please provide	?7		\$	\$ / 80 od
OccupationEn	nployer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
Page 9 of 65		Page Subtotal d Total of All Schedules 4A e on last page of Schedule)	245 00 Enter this total on line 3a of Summary	



#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-0092. Committee Name F0ENDS of Eb CaT70N

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Please enter contributors name and address. If comiddle initial.	ontribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1  Name & Address:  Heaviland Hally  230 Crest Ave	Date of Receipt 8-17-0	19	00	177 08
230 CIEST AVE	200		\$ <u>150</u>	\$ 150
Ann ArBor, MI 4 5. If over \$100.00 cumulative, please provide:	8/0.3		Click Here for Men	no Itemization
Occupation Administrator Empl	oyer WASHTERAW_	tat. Scha	15	
Business Address 1819 S. WA6	Ner, Ann ArBar,	11 48113		
Type of Contribution: Direct	Loan from a person	Fund Raiser		·
Name & Address:	Date of Receipt 9-2/10	9		
HELBER, Julie	₩.	·	· 100 00	s 100 00
SAUNE, MI 481. 5. If over \$100.00 cumulative, please provide:	16			
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	Itemization
Occupation Employee	oyer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 4. Name & Address:	Date of Receipt 9-22-	9		
HOCKETT, DIAME & 7	BOB		-100	00
1637 Shaty OAKS	DV.		\$ 50	\$ 50
5. If over \$100.00 cumulative, please provide:	48103		Click Here for Memo	Itemization
OccupationEmpl	oyer			
Business Address		, a		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Pate of Receipt 9-4-0	79		
Houle, DAVID 1459 copeland C	arde		00	(4.6)
Canton, mi 4	8/81		\$ 100	108 0)
5. If over \$100.00 cumulative, please provide:	0 0/		Click Here for Memo	Itemization
Occupation Emplo	yer			
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number	3-2089	7-084
Fro		- ED. Co.

Summary Page

		Name / //	13 OF C	way 1010
Please enter contributors name and address. If middle initial.	contribution is from an individual, ente	r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	. Date of Receipt 9-	4-09		
Hovatter, Dans 11164 Far Rd, Milan, Mi 4 5. If over \$100.00 cumulative, please provide:			\$OO	\$ 20 00
Occupation Em	oloyer	•		
Business Address				
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	. Date of Receipt 9-23-		00	_, 0)
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5. If over \$100.00 cumulative, please provide:	48198		Click Here for Memo	Itemization
Occupation Emp	oloyer			
Business Address	- A. 1			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:  Sthn & Green Co.  8413 Tha mes CT	Date of Receipt 9-15-09	-	\$ 100	s 188 od
5. If over \$100.00 cumulative, please provide:	8		Click Here for Memo	
Occupation Emp	iloyer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 9-23-6	9		
SOCD AN, E. RUM 2867 QUAIL Holld DAM AFROC, MI If over \$100.00 cumulative, please provide:	W CT 48108	,	\$_50° \$	5000
Dogwoodian			Click Here for Memo	Itemization
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

Committee I.D. Nu	mber $B-2$	809-00	3/
2. Committee Name	Frends	OF E	lica 170n

Page

Please enter contributors name and address. If contri middle initial.	bution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date Name & Address:  KANITZ, DAWN 612 Church St.  MICAN, MI 48/160  5. If over \$100.00 cumulative, please provide:	e of Receipt 8-51-09	\$ 50 Click Here for Mer	\$ 50 00
Occupation Employer  Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
Name & Address:  Smith, Clifford  1635 Sheffield Dr.  1635 Sheffield  Business Address 1635 Sheffield	E of Receipt 97509  KAYCEE CONSULTING CONSULTANCE CONSULTING CONSULTANCE	\$ <u>230</u> Click Here for Mem  (C 40197	\$ 250 on Itemization
Name & Address:  Kern & An, Denise  1430 whit more Lake, M  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address		\$OO \$Click Here for Memo	\$ 50 csd
	oan from a person Fund Raiser		
3. Contribution #4 Name & Address:  KIG-CY, JANICE  12110 BUNCE Rol  MILAN MI 48168  5. If over \$100.00 cumulative, please provide:  Occupation Employer	of Receipt <u>A-21-6</u>	\$	s /Óð oð
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
Page 12 of 65	Page Subtota  Grand Total of All Schedules 4  (Complete on last page of Schedul	A 750	



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COM	MITTEE 2. Committee	e Name <i>Frien</i>	DS OF	EDUCATION
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Contribution # 1 4.     Name & Address:	Date of Receipt 8-2	49		date of receipty
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1901 Reeves Ln	•		\$ 50°00	s 5700
5. If over \$100.00 cumulative, please provide:	811-8		Click Here for Mer	no Itemization
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Business Address		· · · · · · · · · · · · · · · · · · ·		
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KING SCOTT ASSOCIATED AND CHIGAN Kalana ZOD, MI 5. If over \$100.00 cumulative, please provide:	4 9007		Olial, Hann for M	
Occupation Empl			Click Here for Memo	Itemization
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. C	Tate of Receipt $9-22$			
Name & Address:		.07		
Laatsch, Steve 4429 LAKE FOREST	Dr. E		\$ 500	60
Hover \$100.00 cumulative, please provide:	\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Click Here for Memo	Itemization
Occupation Emplo	yer	771170	and the feet monte	
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

Committee I.D. Number	B-2009-009	/

Summary Page

SCHEDULE 4A	
	TENDS OF Education
Please enter contributors name and address. If contribution is from an individual, enter last name, firs middle initial.	t name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address:  Lewis-Lakin, Shawn & Barbara 1433 Carsten Lane	\$ 150° \$ 150°°
Chelseq A1 48118  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation SSPT/Cles94 Employer MANCHESTES COMM. S  Business Address 410 Cty Rd, MArchestes, M,  Type of Contribution: Direct Loan from a person Fund Raise	4 8118
3. Contribution #2  Name & Address:  LINCOLN ADMISTRATORS ASSOCIATION  8970 Whittaker Ra,  YPSILANH, MI 48197  5. If over \$100.00 cumulative, please provide:	\$ 500 \$ 500 Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution: Loan from a person Fund Raiser	<u> </u>
3. Contribution #3  Name & Address:  Loya, William  10550 MACON Rd  Saline, MI 48/16  5. If over \$100.00 cumulative, please provide:	\$ 50 ° \$ 50 ° \$
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
. Contribution #4 4. Date of Receipt 915-09	
MACIGNEGOR, Stephen & Erica 11138 SANDY BOTTOM Dr. ENHA LYON, MI 4818	\$ 50 00 \$ 30 00
South Lyon, MI 48178. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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Page 14 of 65	Enter this total



#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee i.D. Nur	mber <u>13- 20</u>	009-004	
2 Committee Name	Friends	OF ENUC	2027ON

EALLOT GOLD TO COMMITTEE TAINE 7 17 - 122	17.0
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:  MATCEL, Brian  9735 Horseshoe Bend  Doxter, M. 48130  5. If over \$100.00 cumulative, please provide:	\$ 200 \$ 205  Click Here for Memo Itemization
Occupation School Admin Employer WASHTE Naw Int Soch Business Address 1819 S. WAS NER, And ASBN 11 4810.  Type of Contribution: Direct Loan from a person Fund Raiser	3
3. Contribution #2  Name & Address:  MATS hall, MATY  11332 SCOTCH CT  S. LYON, MI 48/16  5. If over \$100.00 cumulative, please provide:	\$ 100 \$ 100 S
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 3 Name & Address:  MARTIN, JANOT  24676 TODY LORE  For min 6-Ton Hills MI 48 335  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	\$ 50 ° \$ 50 ° Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 Name & Address:  MAY LEBEN, John 9290 WICD WOOD Cake  Whit More Lake mi 48/89  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$ 50 \$ 50 S Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser	
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Nur	mber <u>B-20</u>	89-004
2 Committee Name	Frens	OF EDWATION

Page

Please enter contributors name and address. If c middle initial.	ontribution is from an individual, enter la	ast name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:  McCalla, Craig  6465 Buck Run  Whit movelable, 481  5. If over \$100.00 cumulative, please provide:	Date of Receipt 8-28 7	7	\$ <u>50</u> Click Here for Mer	\$no Itemization
Occupation Empl	loyer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 4. Name & Address:  McGehee, John 5810 Country Lane  YPSILANTI MI 481 5. If over \$100.00 cumulátive, please provide:	Date of Receipt 94509	7	\$ 50 00	\$s
Occupation Employment  Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:  MEDLEY, DAVID  2009 PRAISIE DUNES  Ann Asbor, MI 48104  5. If over \$100.00 cumulative, please provide:	8		\$ 50 Click Here for Memo	\$
Occupation Emp	loyer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #4 Name & Address:  Men finger, MAFY C 11340 MC Crone Rd Mlan, Mi 48160 5. If over \$100.00 cumulative, please provide:	Date of Receipt 8-2/07		\$ 100 CO	s <u>f Ø Ø</u> s Itemization
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Page 16 of 65		Page Subtotal al of All Schedules 4A last page of Schedule)	Enter this total on line 3a of Summary	



#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number 3-2689-084

2. Committee Nam	THEMPSOF	100Ca1 10.0
Please enter contributors name and address. If contribution is from an individual, enter last middle initial.	name, first name, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 8-28-0 Name & Address:	7	
MINNICK, JILL 3931 PERPENIDGE TEALL BRIGHTON, MI 48114 5. If over \$100.00 cumulative, please provide:	\$_ <u>30</u>	\$ 50 OU  Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person	und Raiser	
3. Contribution # 2  Name & Address:  4. Date of Receipt  8 78-0 9		
MISH, Pain 41304 IVY WOODE LA	\$ 100	\$ 168.00
PLY MOUTH M1 48/78  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 Fu	nd Raiser	
3. Contribution #3  Name & Address:  Moran, WE  632 Honey Suckle Cone  MILAM, MI 48160  5. If over \$100.00 cumulative, please provide:	s 50	60 \$ 50 00
OccupationEmployer	14 TO THE PARTY OF	
Business Address		
Type of Contribution: Direct Loan from a person Fu	d Raiser	
3. Contribution # 4 4. Date of Receipt 9456 89		
munik, Richard 6324 Kingon Dr.	\$ <u>58</u>	\$ 50
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

Committee I.D. Number	13-200	9-00	f F
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2. Committee Name Fite 14	DS OF CDUCOCITOR
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:  New Man, Sharon & Chuck  2648 Roseland Dr.	\$ 50° \$ 30°
Ann ArBir, MI 48183 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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Northoup, DAVID & Nicola 6383 OAKHUIST Dr.	s 50 °° s 50 °°°
リアミルスカナル、 かしょく & しゅう) i. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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3. Contribution # 3 4. Date of Receipt 9-22-69 Name & Address:	
PARKS, LEE ANN 3630 FIELD CREST EN 4PSILANTI NI 48197 5. If over \$100.00 cumulative, please provide:	\$ 10 \$ 10 00 Click Here for Memo Itemization
OccupationEmployer	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
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Peacock, Eric 305 IDEAL ST MILAR DI 48160	s 100 00 s 100 01
MILAn の 4 8166 . If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee i.D. Number <u>B-2089</u>— & 4

BALLOT QUESTION COMMITTEE 2. Committee Name File n	DS OF E	DUCATION
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:  PUTAL, Sheryl E. 14468 E PLEASANT Lake Rd.  MANCHESTER, M. 48158	s 38 co	\$ 50 00
5. If over \$100.00 cumulative, please provide;	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 9-15-09		
Roned, Joe 218 Lyn Anne CT.	\$ 50	\$ 50 01
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Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 3 4. Date of Receipt 9.20.49		
Name & Address:  RowAn, Sylvester  48981 Denton Ra Apt. 201  TBelle ville, mi 48111  5. If over \$100.00 cumulative, please provide:	\$ 100 00	\$ \ldot \delta \
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
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SAVINUELSON, KIM BERLY 1394 SOY GLASS LN 48197 5. If over \$100.00 cumulative, please provide:	s 25 00 s	2500
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Business Address		
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**Business Address** 

#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

Loan from a person

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SCHEDULE 4A				Watton
BALLOT QUESTION C	COMMITTEE 2. Co	ommittee Name <i>Frie</i>	NDS OF CA	<del></del>
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Type of Contribution:



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number 13-200 9-004

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i middle initial.	ss. If contribution is from an individual, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 9-15-19	T date of receipty
Shrock, Guen		
3119 Whipple Ra	0	2500 2500
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5ACK Son, n1 4 5. If over \$100.00 cumulative, please pro	1920/ vide:	Click Here for Memo Itemization
Occupation	Employer	
Business Address		
Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2		
Name & Address:	4. Date of Receipt 9-23-69	
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3. Contribution # 3 Name & Address:	4. Date of Receipt 8-1809	
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6820 BUCKHOR	a lake Rd	\$ 100 00 100
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>B</u>-2089-004

BALLUI QUESTIO	ON COMMITTEE 2. Com	mittee Name FIRM	S OF EDICATION
mode initial.	dress. If contribution is from an individua		e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  TETENS, Na Na 933 WSIGHT C  MUAN, Mi 5. If over \$100.00 cumulative, please  Occupation	11 48168 provide:	-2309	\$ 160 00 \$ 160 00 Click Here for Memo Itemization
Business Address			
Type of Contribution: Direct	Loan from a person	Fund Raiser	
3. Contribution # 2 Name & Address:  Tho mas, Paul 623 Second Had AfBor, 5. If over \$100.00 cumulative, please p	4. Date of Receipt 9-  A St.  M1 48163  provide:	11-09	\$ 50 \$ 50 OD
Occupation	Employer		
Business Address	Loan from a person	Fund Raiser	
Contribution # 3     Name & Address;	4. Date of Receipt 9-	22-89	
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Occupation	Employer		
Business Address Type of Contribution: \( \bar{V} \) Direct	Loan from a person	Fund Raiser	
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

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3. Contribution # 1 Name & Address:  Tramontin, Mary 3400 SALLE Rd	4. Date of Receipt 8-3/-2  Sane	19	s 50 00	\$ 50 00
Ann ArBix, Mi 2 5. If over \$100.00 cumulative, please provi	4 816_3 de:		Click Here for Men	no Itemization
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millan, mi 48/ 5. If over \$100.00 cumulative, please provide	<i>60</i> e:	•	Click Here for Memo	o Itemization
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3. Contribution #3 Name & Address:  VAM BOGELEN, MAN 686 WALL STRAS  MANCHESTEN, MI 5. If over \$100.00 cumulative, please proving	48158	<del>9</del> .	\$	\$ / ÖÖ
Occupation F	Employer			
Business Address Type of Contribution: Direct	<u> </u>	Fund Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 8-78-0	9		
VIBBART, Jim 8140 M-36 Whith one Lake, If over \$100.00 cumulative, please provide	ni 48189	•	\$ 50 00	570)
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-2009-004</u>

BALLOT QUESTION	N COMMITTEE 2. Committee Name	FIRNDS OF EDUCATION
middle initial.	ress. If contribution is from an individual, enter last nam	e, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 9-15-69	
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5. If over \$100.00 cumulative, please p	rovide:	Click Here for Memo Itemization
Occupation	Employer	
Business Address		
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WALL TOM & MO 21159 OUTER DO Deag BOCN, MI 5. If over \$100.00 cumulative, please pro	5010a 48124 ovide:	\$ 20 00 \$ 28 00 Click Here for Memo Itemization
Occupation	Employer	
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Type of Contribution: Direct	Loan from a person Fund Ra	iser
Name & Address:  WALTON, Brain  1/32 E. MAGKE  Grand T3LAnc,  5. If over \$100.00 cumulative, please pr	M1 48439	\$ 100 \$ 100 Click Here for Memo Itemization
Occupation	Employer	
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number B-2009-009
2. Committee Name From DS OF EDUCATION

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middle initial.	address. If contribution is from an individual, e	enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number <u>B-2009-009</u>

BALLOT QUESTION COM	IMITTEE 2. Committee	ee Name <u>FIJEIT</u>	IS OF C	DUCATION
Please enter contributors name and address. If o middle initial.	contribution is from an individual, en	ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

1.	Committee	i.D.	Numbe

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2. Committee Name	05 OF ED	UCASTOU
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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# **ITEMIZED CONTRIBUTIONS**

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3. Contribution # 1 Name & Address: Bollman, Ly 135 Creek Stone	4. Date of Receipt 8-2/49	00	\$ 188 00
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number <u>B-20 89-864</u>

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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number <u>B-2009-004</u>

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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-2089-054</u>

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BALLOT QUESTION COMMITTE	EE 2. Committee Name <u>Fren</u>	DS OF SOUCETION	
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3. Contribution #1 Name & Address:  Rochm, Stephanie 1566 WWD BROK Rd Ann Arbon M1 4810 5. If over \$100.00 cumulative, please provide:		\$ 10 00 S 10 Click Here for Memo Itemization	_
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3. Contribution # 2  Name & Address:  Henry Karen  8590 CEDAR Hills Dr  Dexter, on 48/3  5. If over \$100.00 cumulative, please provide:	·	\$	_
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3. Contribution # 3 Name & Address:  BAKER KELLY  1586 ABI & ALL WAY  ALL ALL WAY  5. If over \$100.00 cumulative, please provide:  Occupation Employer_	·	\$\$\$\$	
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Business Address  Type of Contribution: Direct Loa	in from a person Fund Raiser		
3. Contribution #4 Name & Address:  Hey DLAUFF, Tracy  203 GLAZIER Rd.  Chelsea, MI 48.  5. If over \$100.00 cumulative, please provide:		$\frac{20^{\circ 0}}{20^{\circ 0}}$ s $\frac{20^{\circ 0}}{20^{\circ 0}}$	
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-009
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2009-084

2. Committee Name Frents of Education

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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number 3- 200 9-05 4

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3. Contribution # 1 4.  Name & Address:  AnG-EU II, NICH,  1243 DAISY (2),  MILAN, MI 4.  5. If over \$100.00 cumulative, please provide:  Occupation Emp	£8160	909	\$CD \$Click Here for Mer	s_50 cs
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3. Contribution # 3  Name & Address:  MCDDNALD, LAUREL 2882 BUSTCH Rd,  Grass Lake, M, 49.  5. If over \$100.00 cumulative, please provide:  Occupation Emp  Business Address  Type of Contribution:   Direct		Fund Raiser	\$	s / O O)  Distribution
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 3-2009-004
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3. Contribution # 1 Name & Address:  DAVIS KIM BERLY  45 CLEST NOT DO  Chel Sea, MI 48  5. If over \$100.00 cumulative, please provide:	,	02-09	\$	\$
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3. Contribution # 2 4.  Name & Address:  KOCHAN, MARIE  1129 N. CON GRESS  YPSILANTI, MI 48.  5. If over \$100.00 cumulative, please provide:	Date of Receipt 9-2	2-09	\$	\$ 10 °CO
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B</u> <u>2009</u> – <u>084</u>

BALLOT QUESTION C	z. Committee		DS OF E	Socation
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3. Contribution # 1 Name & Address:  MARTIN- REED,  1938 HIDDEN RI  NOTTH WHE, MI	Beverly DEE Cane 48167	2209	\$	s /0 00
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

2. Committee Name French OF ESUCATION

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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address:  Chel Sea EDUCAT  570 E WHS  Chel Sea, MI  5. If over \$100.00 cumulative, please prov	4. Date of Receipt 9-22-09  Non ASSOCIATION  NINGTON ST  48118  ride:	\$ 108	\$ 160
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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address:  Sharon, Lester  3225 Fiet D Stor  Dexter, M/  5. If over \$100.00 cumulative, please pro  Occupation	48130	\$	\$/88 <sup>@ 3</sup>
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address:  Mow Ver, Kevin  1313 AUSTON CO.  Chelsea, Mi  5. If over \$100.00 cumulative, please prov	48/18 ride:	$\frac{25^{\alpha}}{}$	\$ <u>25</u> -60
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 3-2009-004

2. Committee Name FILE NDS OF COUCASION

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3. Contribution # 3 Name & Address:  An Gel, LAURA 1243 DA1SY Lan MICAN, MI 4  5. If over \$100.00 cumulative, please p	860	\$\$\$ \$\$ Click Here for Memo Itemization
Occupation	Employer	
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 4 Name & Address:  ARINGTON, D.  7425 WICUS R  4PSILANTI, M  5. If over \$100.00 cumulative, please pr	4. Date of Receipt 9-2506 9  A 148197  rovide:	\$\$ \$
Occupation	Employer	Click Here for Memo Itemization
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-054
2. Committee Name FILENTOS OF ESUCATION

Please enter contributors name and address. If middle initial.	contribution is from an individual, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1  Name & Address:  BAXTER, AMY  6221 TUTTLE  VPSILANTI, MI  5. If over \$100.00 cumulative, please provide:	48197	\$ 10 00 \$ 10 00 Click Here for Memo Itemization
Occupation Em	ployer	
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2 Name & Address: BEFECZ, CARI  8183 Humming BI  4051 CAntl, MI 4 5. If over \$100.00 cumulative, please provide:	4. Date of Receipt 9-2509  20 Dr. 18197	\$SSSSSSSSSSSSSSSSS
	Loan from a person Fund Raiser	
Name & Address:  CYRBOK, An6-ELA  6355 Jone UIL  5. If over \$100.00 cumulative, please provide		\$ 5 00 \$ 5 0d  Click Here for Memo Itemization
3. Contribution # 4 Name & Address:  PAIGNEAU, Jenn 1: 11576 WILSON  B-Clleville, ni 48 5. If over \$100.00 cumulative, please provide:		\$\$ \$\$Click Here for Memo Itemization
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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

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

2. Committee Name FILENDS OF COUCATION

Please enter contributors name and a middle initial.	ddress. If contribution is from an individual, er	nter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each
				Contributor (Through date of receipt)
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DICKS, RAGU 2650 SAMDH	ILL Dr.		\$ <u>5</u>	s <u> </u>
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3. Contribution # 2 Name & Address:	4. Date of Receipt 9-2	5-09		
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A 1. Commit

BALLOT QUESTION COMMITTEE 2. Committee Name FORMUS OF Edu Carton

. Committee (.D. Number	B-2009-00	4

	2. Com	militee Name / / / / / / / /	5 -1 Cero COO 1010
Please enter contributors name and address middle initial.	s. If contribution is from an individua	l, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  Hn Derer, Dia, 56.96 Senser  5. If over \$100.00 cumulative, please prov	TKAK	9-25-09	\$
Occupation	Employer	<del></del>	
Business Address			
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3. Contribution # 2 Name & Address:  HUG-HES, DAW 989 MARSH A		7-2509	F00 5-00
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3. Contribution # 4 Name & Address:	•	7.509	
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 13-2009-004

SCHEDULE 4A	
BALLOT QUESTION COMMITTEE 2. Committee Name Frent	65 OF Coucation
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:  LINCOLN ENUCATION ASSICIATION  8976 WHITTAKER  4. Date of Receipt 9-25-9  LINCOLN ENUCATION ASSICIATION  8976 WHITTAKER  9051 LANT), MI 48197  5. If over \$100.00 cumulative, please provide:	\$\$ \$\$ 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:  RICHET, Lori  8970 whitTaker  4. Date of Receipt 9-2509  8970 whitTaker  975/Ant, mi 48/97  5. If over \$160.00 cumulative, please provide:	\$\$ \$Click Here for Memo Itemization
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3. Contribution #3  Name & Address:  Leh Tb, JAMIE  2970 whataker	s 18 °0 s 16 °0
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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 9-25-89 Name & Address:	
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1435 HIDEAWAY Dr.	s 15 % s 15 %
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Numl

1. Committee I.D. Number B-2689-869
2. Committee Name FRENDS OF EDUCATION

Please enter contributors name and address. If comiddle initial.		ast name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: hock, Jackey, 9184 mc 6 regor	Ræ	9	s 165-00	s 165 00
VINOKNOY, MI 43 5. If over \$100.00 cumulative, please provide:	8169		Click Here for Men	no Itemization
Occupation Princy Bal Emplo	oyer Uncella School	5		
Business Address 8970 wh ITTake	er YPSICANTI, MI	48127		
Type of Contribution:	Loan from a person	Fund Raiser		
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Van Hevel SODI 8916 Iron wood	Dri		\$ 500	\$ 500
5. If over \$100.00 cumulative, please provide:	48111			
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	temization
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3. Contribution # 3 4.1 Name & Address;	Date of Receipt 9-25-0	<u> </u>		
Weathers, DANI 8744 whittaker	É MIKE		s 20°	\$ 2000
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WILBANKS, GAR	<i>y</i>		_00	_00
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number \_

B-2009-004

BALLOT QUESTION COMMITTEE 2. Committee Name FileND	S OF SOUCATION
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)
. Contribution #1 Name & Address:  2   T n   K, DAN   PL 88 91 BUNTON  WILLS MI 4894  5. If over \$100.00 cumulative, please provide:	\$
Dccupation Employer	
Business Address  Type of Contribution: Loan from a person Fund Raiser	
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Business Address  Type of Contribution: Fund Raiser  Fund Raiser	
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2009-8042. Committee Name F6/6005 6F Ebucato

Please enter contributors name and addre middle initial.	ess. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 9-25-09		
HENRY, KRISTI 1570 E FOREST IPSILANTI, M 5. If over \$100.00 cumulative, please pi	TAVE,	\$	\$ / 8 GB
Occupation			
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address:  Rendelly SAL  151 & Sum m  Chelsey m  5. If over \$100.00 cumulative, please pro	4. Date of Receipt 9-75-89  1.49  2.1	\$	s_/0
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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 9-25-89		
m JOHH, Ca 100 20431 SAGER Chelsla, mi 5. If over \$100.00 cumulative, please p	RD-	\$ 10 Click Here for Memory	\$ 18 00 ltemization
Occupation	Employer		
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
Contribution # 4     Name & Address:	4. Date of Receipt 9-22-59		
FEDERATION OF U FWISE LOCAL 310 1819 S. WA GNER ANN ARDSOR 5. If over \$100.00 cumulative, please pro	PASHTE NOW INTERMEDIATE  100, AFT, AFT MI, AFC-C16  101, 48106	School Em  \$ 2480  Click Here for Mem	\$ 248000
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

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

Please enter contributors name and add	trace If contribution is from an individual auto-last name first	6 Amount	7 Cumulative for
middle initial.	dress. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 22809		T date of rescript)
MILLER, WILLIAM 208 Montg om AND ANBOR  5. If over \$100.00 cumulative, please,	n C. ery m, 48103	\$	s /66
5. If over \$100.00 cumulative, please p	provide:	Choic viole for the	STIO RESTRIZACION
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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 7-2019		
Ley Shock, Rich 1008 Con 6 res 4PSICANTI, M 5. If over \$100.00 cumulative, please p	5	s_208°	
	Employer WASHTENAW 155	Click Here for Mer	mo Itemization
Business Address Type of Contribution: Direct  3. Contribution # 3	Loan from a person Fund Raiser  4. Date of Receipt 7-3/19	3	
Name & Address:			
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•	Employer ASHTE Naw 15D		
Business Address 1819 S. WI	46NCG, AND ARBOS, M, 48163		
Type of Contribution: Direct	Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address:  KUM EK, SUE  \$59. PLANK	4. Date of Receipt 1-3/-3 9	4-00	00
DUNDEE, m1  5. If over \$100.00 cumulative, please pl	48131	\$ <u>33</u>	\$ 35
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

2.	Committee	Name	 -11	4

1. Committee I.D. Number B-2889-604
2. Committee Name Frents S OF Esucation

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	Cumulative for     Election Cycle for Each     Contributor (Through     date of receipt)
3. Contribution # 1 4. Date of Receipt 9-2949 Name & Address:		
ROBINSON, ERIC 523 WIMIDDLE	\$ 200	\$ 20800
Chelsea, m, 48/18 5. If over \$100.00 cumulative, please provide:	Click Here for Mer	mo Itemization
Occupation Teacher Employer Chelsea Schools	_	
Business Address 500 WASHINGTON ST., Chelsea, mi 48/1  Type of Contribution: Direct Loan from a person Fund Raiser	8	
3. Contribution # 2  Name & Address:  4. Date of Receipt 9-29-0 9		
Thompson, Kathleer 287 HIGHLAKE	\$ 2000	\$ 2000
Ann ACBOC, MI 48103 5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemízation
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 9-29-0 9 Name & Address:		
HERMOSKIO, JUDITH 1930 n. DANCER RD.	\$ 15	\$_1500
DEYTE R, MI 48130 5. If over \$100.00 cumulative, please provide:	Click Here for Memo	o Itemization
OccupationEmployer		
Business Address  Type of Contribution:		
3. Contribution # 4 4. Date of Receipt 9-29-89 Name & Address:		
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49 Chestnut	\$ 20	s 20 °6
Chelsea, ml 481/8 5. If over \$100.00 cumulative, please provide:	Click Here for Mem	
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 3-2009-854
2. Committee Name Frence of Education

Please enter contributors name and address middle initial.	s. If contribution is from an individ	ual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt	7-29-8 9		
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Occupation	Employer			
Business Address				
Type of Contribution:     Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address: Churchwell, H. 4124 VICTORIA Canton, MI	4. Date of Receipt 9 CANSICE N SQ. WEST 98188	1-2989	\$ 5000	s 50 °0
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Occupation	Employer			
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Occupation	Employer			
Business Address  Type of Contribution:   Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt 9-3	29-09		
PARISH - FOSTER, P. O. BOX 70 WhITT AKER, 5. If over \$100.00 cumulative, please provi	Kasen m 1 48190		s_25°00	\$ 25
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

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

2. Committee Name Frents of Esucation

	Z. Obininico ive	1110 / / Corr L. J. J.		
Please enter contributors name and address. If conmiddle initial.	ntribution is from an individual, enter la	st name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. D Name & Address:  KUZUN, LINDA  4665 FOX SEDGE	ate of Receipt 9-29-0	9	50	and officerpty
•			\$ _ 50	\$ <u> </u>
Dexter, mi 48/5. If over \$100.00 cumulative, please provide:	30		Click Here for Men	no Itemization
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3. Contribution #3 4. D Name & Address:	ate of Receipt 9-19-0	7		
ALEX, ARTEMIS 1350 FOX POINTE ANN ARBOT, M 5. If over \$100.00 cumulative, please provide:			\$ 2500 Click Here for Memo	\$ 25 oc
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L/P SILANT, M) 5. If over \$100.00 cumulative, please provide:	48191		Click Here for Memo	temization .
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 3-2009-009
2. Committee Name FILENDS OF EDUCATION

Please enter contributors name and addraiddle initial.	ess. If contribution is from an individual, er	ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 9-	2909		
Phoenix Service 1601 Briarwood Ann ArBor, m. 5. If over \$100.00 cumulative, please p.	Circle 5,450		\$ /60	\$ 168
Occupation	Employer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 10 18	<u> </u>		
CLARK CONSTRUC PO BOX 40087			\$ 300	\$ 308
LANSING, MI 45 5. If over \$100.00 cumulative, please pr			Click Here for Men	o Itemization
Occupation	Employer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 3     Name & Address:	4. Date of Receipt 16-1-0	9		
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1200 Irm scher	BLOD.		\$ 500	s 508
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3. Contribution # 4 Name & Address:	4. Date of Receipt 16-18	9		
MILAN EDUCATION 100 BIG Res :	Drive		s 460°	s 466 ex
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2009-004

2. Committee Name FG18 ntb5 OF ESUCATION

	2. Committee	e Ivanie _ F # /EZ/I	05 1 07-01120
Please enter contributors name and address. If co middle initial.	ntribution is from an individual, ente	er last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. [ Name & Address:  MOSIC, ROGER 12456 PIRECREST Dr.  PLYMOUTH, M1 48/ 5. If over \$100.00 cumulative, please provide:	\$\$\$\$  Click Here for Memo Itemization		
Occupation Emplo	oyer		
Business Address			
Type of Contribution: \(\sum_{\text{Direct}}\)	Loan from a person	Fund Raiser	
3. Contribution # 2 4.1  Name & Address:  PEOPLES, GREGORY  5445 SCOTT COURT  YPSICANTI, MI 4  5. If over \$100.00 cumulative, please provide:	Date of Receipt 18-5-0	9	\$ 50 \$ 50 00 Click Here for Memo Itemization
Occupation Emplo	oyer		
Business Address  Type of Contribution: Direct  3. Contribution # 3	Loan from a person  Date of Receipt 16-5-6-9	Fund Raiser	
Name & Address:  Re15T, 6setchen  325 O'Brian Do  MICAN, MI 4816  5. If over \$100.00 cumulative, please provide:	? <i>8</i>		\$ 50 \$ 50 ad
Occupation Empl	oyer		
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser	
Name & Address:  GIELINSKI, JUDY  47150 Denton  Belleville, Mi  5. If over \$100.00 cumulative, please provide:	Rd. 48111	9	\$ 50 \$ 50 Click Here for Memo Itemization
Occupation Emplo	oyer		
Business Address  Type of Contribution:  Direct	Loan from a person	Fund Raiser	
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number <u>B-2869-684</u>

BALLOT QUESTION COMMITTEE 2. Committee Name Friend	S OF ED UCATION
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:  De Kleyses, Torre 7811 Win Flexts Ps.  Brighton, Mil 48116  5. If over \$100.00 cumulative, please provide:  OccupationEmployer	\$
Business Address  Type of Contribution:  Loan from a person Fund Raiser	
3. Contribution # 2  Name & Address:  Solinson t word LLC  ai30 Hemphill Rd  Bulton, mil 4 8529  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:  Welss, John + Sarah 1206 Pearl ST.  VPSILANTI, MI 48197  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution:   Direct   Loan from a person   Fund Raiser	\$\$\$\$\$
3. Contribution # 4 Name & Address:  GETO, CAMESON  305 MAPLE ST.  VOSICANTI, MI 48198  5. If over \$400.00 cumulative, please provide:  OccupationEmployer	\$ 108 \$ 108  Click Here for Memo Itemization

Page Subtotal

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

Fund Raiser

Loan from a person

Enter this total on line 3a of Summary Page

Page <u>32</u> of <u>65</u>

Business Address \_\_\_

Type of Contribution:

Direct



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

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

Summary Page

BALLOT QUESTION COMMITTEE 2. Committee Name 11/10/11	53 OF	COUCATION
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:  MOOSE, ROGES  12456 PINECSEST Dr.	s <u>50</u> 00	s <u>10 8</u> 0 0
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<del></del> .	
3. Contribution # 2  An Date of Receipt 10-5-0 9  Name & Address:		
HUGG, Heather 921 n. Alexander	s_70 00	s_ 78 00
TOYAL OAK, MI 48067  5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 10-3-09 Name & Address:		
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1472 Carston In	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	ltemization
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 10-5-0 9		:
Arons, William 665 MAYER Chelsea, mi 48118	s 95 00	s 95 °
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
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Page <u>53</u> of <u>65</u>	Enter this total on line 3a of	



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 3-2089-004
2. Committee Name FOLDINS OF Education

DALEOT GOLOTION COMMITT	Z. Committee iva	me FIJEND	5 0/2 2	descarrons
Please enter contributors name and address. If contributed middle initial.	ution is from an individual, enter las	st name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date Name & Address:  LUNDY, DICK Po Box 241	of Receipt	9	\$ 108	\$ 108 02
DEXTER, MI 48/30 5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
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3. Contribution # 2 4. Date Name & Address:	of Receipt 10-12-0 9	7		
WILLS, PAUL 1260 ALBANY ST. FEINDALL, MI 482 5. If over \$100.00 cumulative, please provide:	20		\$	\$ 100
Occupation Employer				
Business Address  Type of Contribution: Direct Lo	pan from a person	Fund Raiser		
3. Contribution #3  Name & Address:  VANNATER, Cherie  9140 GLATT Rd-  MILAN, MI 48160  5. If over \$100.00 cumulative, please provide:	of Receipt 10-12-89	····	\$ 30	\$ 37 60 Itemization
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Business Address Type of Contribution: Direct Lo	an from a person	und Raiser		
3. Contribution # 4. Date of Name & Address:  STAUDCL & BARCH + AS  3989 Research GAR  ANN ANBOR, MI 4816  i. If over \$100.00 cumulative, please provide:	k brive		\$ 108 Click Here for Memo	\$ / 6 & /
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Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
Page 34 of 65		Page Subtotal I of All Schedules 4A ast page of Schedule)	357 50  Enter this total on line 3a of Summary	



## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2809-009

2. Committee Name Friends of Education

Please enter contributors name and address. If comiddle initial.	ontribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	Date of Receipt 16-12-6	9		
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5. If over \$100.00 cumulative, please provide:	11), 48061		Click Here for Mer	no Itemization
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ADTUAN Mechanic 953 W. Beecher	al Services ( 5T. 19221	Co.	s 250	\$ 250 86
5. If over \$100.00 cumulative, please provide:	77200		Click Here for Memo	a Itamization
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# ITEMIZED CONTRIBUTIONS

SCHEDULE 4A	GIENDS OF EDUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, fir	
niddle initial.	Contributor (Through date of receipt)
Contribution # 1  Name & Address:  BLACK WELL, Thomas  670 0 NO DAGA  VPS/LANTI, MI 48/98  5. If over \$100.00 cumulative, please provide:	\$\$ \$\$ Od \$\$ Click Here for Memo Itemization
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Business Address  Type of Contribution: Direct Loan from a person Fund Rai	ser
3. Contribution #2  Name & Address:  A Date of Receipt  16-12-89  16-12-89	\$ 20° \$ 20°0
670 ONO DAGA  VPS/LANTI, M. 48198  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution:  Loan from a person Fund Rais	er
3. Contribution # 3 4. Date of Receipt 16-12-89	
Name & Address:  LISIS CKI, LAURE  LID ONO DA 6-A  VPSILANTI, MI 48/98  5. If over \$100.00 cumulative, please provide:	s 20 00 s 20 00 Click Here for Memo Itemization
OccupationEmployer	
Business Address  Type of Contribution: Direct Loan from a person Fund Rais	er
3. Contribution #4 Name & Address:  Burton, Jenni Fer  388 Rolling Meadows br.	s 150°s 150°°
5. If over \$100.00 cumulative, please provide:	Click Here for Merno Itemization
Occupation Administrator Employer WASHTC Naw 13D  Business Address 1819 5. WAGNER TRA, Ann ARBOT, N  Type of Contribution: Direct Loan from a person Fund R	0) 48103
(2011bran 21, 22, 22,	

Page <u>56</u> of 65

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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

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

2. Committee (value ) v / v / v / v	
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:  OKEY, PER LAMENT  329 ANN ARBOT HILL  MANCHESTER, M, 48/58  5. If over \$100.00 cumulative, please provide:	\$
Occupation Employer	
Business Address  Type of Contribution: Loan from a person Fund Raiser	
3. Contribution #2  Name & Address:  LANGEN, SUE  347 WILLS RA.  SALINE, MI 48116  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 10-12-8-9	
PLATT, Heather  524 W. MIDDLE ST.  Chelsea, M, 48/18  5. If over \$100.00 cumulative, please provide:	\$\$SSO
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 4. Date of Receipt 16-/2-6 9	
Burroughs, Nicole 1642 Fourth ST.  Dexter mi 4830  5. If over \$100.00 cumulative, please provide:	s_10 ° s_10 ° 0
	Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal  Grand Total of All Schedules 4A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2089-884

2. Committee Name Frents of Execution

Please enter contributors name and address. If c middle initial.	ontribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1  Name & Address:  HICKS - Caselli, Je  6120 Storer Rd  Chelsea, M; 4  5. If over \$100.00 cumulative, please provide:		39	\$	\$
Occupation Emp				
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution #2  Name & Address:  LOCKS, BARBARA  4881 STRWBERRY  Whit more Lake,  5. If over \$100.00 cumulative, please provide:	Lake Rd.  In 48189	2-09	\$	\$ <u>10</u>
Occupation Emp	oloyer			
Business Address  Type of Contribution: Direct	Loan from a person  Date of Receipt	Fund Raiser		
Name & Address:  STRAHLER, COSOL  3470 CONWAY RO  Chelsea, m, 48  5. If over \$100.00 cumulative, please provide:  OccupationEm  Business Address  Type of Contribution: # Direct	///8	Fund Raiser	\$/5_0 Click Here for Men	\$ 15-00 no Itemization
	Date of Receipt 10-13			
Name & Address:  ALBURT, JILL  PO BOX 646  DAPOLE D. M. 46  5. If over \$100.00 cumulative, please provide:	7241		\$ 20 Click Here for Me	\$ 20
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Business Address  Type of Contribution:  Direct	Loan from a person	Fund Raiser	* † <del>'</del>	
Page <u>58</u> of <u>65</u>		Page Subtotal Total of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of Summary Page	



## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2609-609

2. Committee Name FILATOS OF CAN CASHON

2. Committee Name 717911	JS OF CON CASIOO
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 10-12-89  Name & Address:  PRIESE, DAVID  290 BLMIS Rd  SAUNE, MI 49116  5. If over \$100.00 cumulative, please provide:  Occupation RIMINAL Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$
3. Contribution # 2  Name & Address:  COBLER, LATTY  9081 Lottle CARE  TEXTER, MI 48136  5. If over \$100.00 cumulative, please provide:  Occupation DICETOR Employer ALTARUM INSTITUTE  Business Address 3520 G(PER CT STE 300 ANN AFBOR, MI)  Type of Contribution: A Direct Loan from a person Fund Raiser	\$ <u>200</u> \$ <u>466</u> Click Here for Memo Itemization
3. Contribution #3 Name & Address:  EMLAW: MICHAEL 1320 KING GEOFGE BLVD  Ann ARBOC, MI 48100  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100 \$ 100 Ga Click Here for Memo Itemization
3. Contribution # 4 Name & Address:  Subset	\$ 25 00 \$ 25 00 Click Here for Memo Itemization
Type of Contribution: V Direct Loan from a person Fund Raiser  Page Subtot  Grand Total of All Schedules 4  (Complete on last page of Schedules 4)	A



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE 2. Committee Name Filen	DS OF COUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, niddle initial.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 A. Date of Receipt  Jo-12-69  WILLOW RUN Administrator Association  235 Spencer Lane  VPSILANT, M., 218198  If over \$100.00 cumulative, please provide:  Decupation  Employer  Business Address  Type of Contribution: P Direct  Contribution # 2 Name & Address:  Belli Beth  3232 Glacier et	\$
Occupation Employer  Business Address  Type of Contribution:	Click Here for Memo Itemization
A. Date of Receipt  A. Dat	\$ 50 \$ 50 Click Here for Memo Itemization
Contribution # 4 Name & Address:  BaTTAGLIA, STACIE  5806 5. IHAY RAKE Hallow  Chellsea, MI 48118  If over \$100.00 cumulative, please provide:  Decupation	\$ / 06 \$ / 06  Click Here for Memo Itemization

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Fund Raiser

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Type of Contribution: H Direct



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

Summary Page

SCHEDULE 4A		1000-		
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Name & Address: STAUDES, Paul 3140 Stone Britoe	ate of Receipt 10-18-	09	s 2500	s_25°00
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Occupation Emplo	yer			
Business Address  Type of Contribution:	Loan from a person	Fund Raiser		
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5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
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Business Address	Loan from a person	Fund Raiser		and the second s
3. Contribution # 3 Name & Address:  MOCGAM, JAMELLE 3966 W. MAIN  STANTON, MI  5. If over \$100.00 cumulative, please provide:  OccupationEmp	48888		\$ 20	s 20 00
Business Address				
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Nowell, MI 488 5. If over \$100.00 cumulative, please provide:	93		Click Here for Me	emo Itemization
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Page <u>61</u> of 65	Grand (Complete	Total of All Schedules 4. on last page of Schedul	Enter this total on line 3a of Summary	



## 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 middle initial.	contribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:  VAN KISK, GSES  24743 NLPQVINE  NOVI, MI 483  5. If over \$100.00 cumulative, please provide:	,	39	\$	\$ 100
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Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2  Name & Address:  WILLOW RUN EDUCATION  11855 LAN BUS DE PLYMOUTH, M1481  5. If over \$100.00 cumulative, please provide:		9	\$	\$ 50 00
OccupationEm	oloyer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:  Williams, DAVID 769 Ga fes  VPSICAM, MI 4819  5. If over \$100.00 cumulative, please provide:			\$Click Here for Mem	s 40 ° 3
Occupation Em	ployer			
Business Address				
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$\sqrt{\rho_{51}/ant_{1}}$ on $\sqrt{2}$ 5. If over \$100.00 cumulative, please provide:	37.78		Click Here for Men	no Itemization
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Page <u>62</u> of <u>65</u>		Page Subtotal Total of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of	



#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-2009-054</u> ENRINE OF ENVOLUTION

2. Committee Name 11/8	11 ps of Couragion
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:  Henry, Robert  10526 Heenan Dr.  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:  Shumaker, Julie  10-1009  Name & Address:  Line TISHER CT.  DLINE MI 4/8/30  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$S &S &
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 Name & Address:  RYBURG, Cafèle  36/6 N. WISON CT  Dexter, M. 48/30  5. If over \$100.00 cumulative, please provide:	\$\$\$ SS S
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Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 Name & Address:  Brad Anto Anne  Bezela u, Brad Anto Anne  163 43 w Arner Rd  Milan, 101 4 816 5  5. If over \$100.00 cumulative, please provide:  Occupation	\$ 50 ° \$ 50° Click Here for Memo Itemization
Business Address	
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Page Subtotal  Grand Total of All Schedules 4A (Complete on last page of Schedule)  Page 63 of 65	Enter this total on line 3a of Summary



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number <u>B-200</u> 9-06 9 2 Committee Name FIRMTHE AF EDUPOTIONS

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2. Committee Name	IS OF CITOCOCITORO
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:  Steven Son, Jesse  885 Febora br.  Tecumseh, m, 49286  5. If over \$100.00 cumulative, please provide:	\$ \$ S
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 2 4. Date of Receipt 10-18-09  Name & Address:  HENES, PATTI  5186 AUSTIN Pd.  SALINC, MI 48116  5. If over \$100.00 cumulative, please provide:	\$\$ \$\$ Click Here for Memo Itemization
OccupationEmployer	
3. Contribution # 3 Name & Address:  Moyer, Cristal  106 Astor Birb  Belleville, Mi 48/// 5. If over \$100.00 cumulative, please provide:  Occupation	\$\$\$
Occupation	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 Name & Address:  Shock, LiA 9,84 Mc6regor RA Pinckney M1 48169  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$ \$ \$
Business Address	
Type of Contribution: V Direct Loan from a person Fund Raiser	
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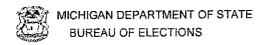
## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A** BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2019-019
2. Committee Name Frem S OF Expugation

Please enter contributors middle initial.	name and address. If	contribution is from an individual,	enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  OAK Poin  Po BoX  Bri6H 5. If over \$100.00 cumu		4. Date of Receipt 10 -	18-89	s / 08	80 8 108 Aemo Itemization
Occupation	Em	ployer	4.00		
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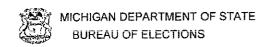


# ITEMIZED DIRECT EXPENDITURES

Page 1 of 2

ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B	ommittee I. D. Number	2009	-004		
= - · · · · ·	ommittee Name Frenz	S OF	Ew	catton	
3. Name and address of person to whom paid	State purpose of expenditure     Identify the ballot proposal invindicate whether supported or or	olved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:				
PAY Pal. COM	Internet BANK	rees			
	5. Ballot Proposal; WASHTEREUSS Requ Enhancement	na   Milloge E	167919 Date of Expenditure	58.72	\$56,12
Check box if expenditure is payment of debt or obligation reported on previous statement	County: WASHTEN	Oppose	Click for	Memo Itemization	Туре
Fund Raiser	Statewide	Local			
Expenditure # 2 Name & Address:	4. Purpose:	,			
QUAHARD Leyshock	Brochuse Brinting,				ĺ
1008 CONGRESS WI YPSILANTI, M148197	5. Ballot Proposal: 95HTENAW 155 Reg 1017 Enhance ment Mil	nage	78-89 Date of xpenditure	s <u> 3 88,92</u>	\$ <u>439,64</u>
YWSICANTY, MIT OUT	County: WASHTENA		Apenditors		
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Expenditure # 3	4. Purpose:				
Ann Arbor Center For	Donate an Anony	nous con	IT ( ) BUT	TION	
Independent LIVING 3941 Research Park Drive W	5. Ballot Proposal: ASHTENAUS 1513 REGIL ENNANCEMENT MIL		3049 Date of xpenditure	\$ 3,00	\$ <u>44764</u>
Ann ArBor, m1 48108	County: WASHTEN		•	Memo Itemization T	уре
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Expenditure # 4	4. Purpose:				
Name & Address: WEST CIBERTY In Formation LLC	CIST SelecTIC			1 114 00	
DOUD MICHAEL Rd N. W	5. Ballot Proposal: ASHTE NOW ISD Reg.	once.	Date of	\$ 1,110,28	\$ <u>/532,9</u> 2
AMA ATBOC, MI 48103	Enhancement M	11109E, E	xpenditure		
	County: WASHTEN	aw	Click for	Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local	····	·····	
		Subtota	I this page	1552,92	
		nd Total of Sch			
	(John proto C		L.	Enter this total	

on Line 8a of the Summary Page



## ITEMIZED DIRECT EXPENDITURES

ITEMIZED DIRECT EXPENDITURES  SCHEDULE 4B	. Committee I. D. Number	B-20	09-00	<u> </u>	
	. Committee Name 🛮 🗜	rients of	= Edu	CATTON	
3. Name and address of person to whom paid	State purpose of e     Identify the ballot p     Indicate whether sup	xpenditure. roposal involved.	6. Date	7. Amount	8. Cumulative for election
	4. Purpose:  YACD SI  5. Ballot Proposal:  WASH TE IVILLY  Enhanceme  County: WAS:  Support  Statewide  4. Purpose:  Brochuces	SMS  155 Pegional  IT Millage  HTENAW  Oppose  Local	Expenditure Click fo	or Memo Itemizatio	n Type
SACINE, MI 48176  Check box if expenditure is payment of debt or obligation reported on previous statement  Fund Raiser	County: WAS		Expenditure	· Memo Itemization	a.
Expenditure # 3 Name & Address:  Allegia Print + I maging  1283 Industrial &  SALINE, MI 48176  Check box if expenditure is payment of debt or obligation reported on previous statement  Fund Raiser	County: WAS	est millage	Expenditure	\$ <u>3871.<b>321</b></u> r Memo Itemization	
Expenditure # 4 Name & Address:	4. Purpose: 5. Ballot Proposal:		Date of	\$	\$
Check box if expenditure is payment of debt or obligation reported on previous statement	County:  Support	Oppose	Expenditure Click fo	or Memo Itemizatio	n Type
Fund Raiser  Page 2 of 2		<u> </u>		10,24627 11,193,19 Enter this total on Line 8a of the Summary Page	