



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>26,236.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>26,236.00</u>	(18.) \$ <u>26,236.00</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>26,236.00</u>	(20.) \$ <u>26,236.00</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>1,256.05</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>1,256.05</u>	(22.) \$ <u>1,256.05</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>1,256.05</u>	(24.) \$ <u>1,256.05</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>1,007.77</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>26,236.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>27,243.77</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>1,256.05</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>25,987.72</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>HANS BARGER, TROY</u> <u>9711 BAUER RD</u> <u>DEWITT, MI 48820</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>20.</u>	\$ <u>20.</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>BOLES, BOBBIE</u> <u>4023 NORWICH</u> <u>CANTON, MI 48188</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10.</u>	\$ <u>10.</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>CHAMPAGNE, CATHERINE</u> <u>1365 MILLBROOK TRC.</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10.</u>	\$ <u>10.</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>DAIGNEAU, JENNIFER</u> <u>11526 WILSON AVE.</u> <u>BELLEVILLE, MI 48111</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10.</u>	\$ <u>10.</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>LINCOLN EDUCATION ASSOCIATION</u> <u>2970 WHITTAKER</u> <u>YPSILANTI, MI 48197</u> 4. Date of Receipt <u>4-11-11</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>350.</u>	\$ <u>350.</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: <u>DARLING, GREGORY</u> <u>118 S. BOWEN</u> <u>JACKSON, MI 49203</u> 4. Date of Receipt <u>4-4-11</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>5.</u>	\$ <u>5.</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: <u>EISELE, Brenda</u> <u>3630 NOBLE</u> <u>DEXTER, MI 48130</u> 4. Date of Receipt <u>4-4-11</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>10.</u>	\$ <u>10.</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: <u>HASSBERGER, Jare</u> <u>8104 PARKER</u> <u>SALINE, MI 48176</u> 4. Date of Receipt <u>4-4-11</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>10.</u>	\$ <u>10.</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>mccargar, Sherry</u> <u>3580 HUDSON</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>10</u>	\$ <u>10</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>BARNETT, JEFFREY</u> <u>2200 PLACID WAY</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>15</u>	\$ <u>15</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>ROEHM, LEIGH</u> <u>9116 PANAMA</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>10</u>	\$ <u>10</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>SPARKS, Bridgette</u> <u>9070 PLEASANT RIDGE</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>10</u>	\$ <u>10</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>MABLEY, DANEEN</u> <u>2099 WHISPERING WOODS CT.</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>10</u>	\$ <u>10</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>MCCORMICK, LINDA</u> <u>2675 W. ARBOR RD</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>10</u>	\$ <u>10</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>COWHY, MICHELLE</u> <u>2309 BAKER RD</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>10</u>	\$ <u>10</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>LAWRENCE, VERONICA</u> <u>14095 EDGEWATER DR.</u> <u>GREGORY, MI 48137</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>40</u>	\$ <u>40</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
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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2069-004
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>Hohnke, Kristyn</u> <u>19548 Bush Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>10</u>	\$ <u>10</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>Regnier, Joanne</u> <u>16871 Heim Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>10</u>	\$ <u>10</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>Ingall, Andrew</u> <u>6021 Tony Ln</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>20</u>	\$ <u>20</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>Aeschbach, Sara</u> <u>620 Trego Circle</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-7-11</u>	\$ <u>50</u>	\$ <u>50</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

4. Date of Receipt

3-3-11

Name & Address:

Allen, Geraldine
3705 Lone Tree Rd
MILFORD, MI 48380

\$ 200 \$ 200

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

Public Relations

Occupation SPECIALIST Employer WASHTENAW INT SCHOOLS

Business Address 1819 S. WAGNER, ANN ARBOR, MI 48102

Type of Contribution: Direct Loan from a person Fund Raiser

Click Here for Memo Itemization

3. Contribution # 2

4. Date of Receipt

3-28-11

Name & Address:

Allen, Karen
801 STANLEY ST
YPSICANTI, MI 48197

\$ 25 \$ 25

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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3. Contribution # 3

4. Date of Receipt

3-13-11

Name & Address:

Allen, ROBERT
6030 CHERRYWOOD DR.
YPSICANTI, MI 48197

\$ 200 \$ 200

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

Occupation Administrator Employer ANN ARBOR PUBLIC SCHOOLS

Business Address 2555 S. STATE, ANN ARBOR, MI 48104

Type of Contribution: Direct Loan from a person Fund Raiser

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3. Contribution # 4

4. Date of Receipt

3-21-11

Name & Address:

ANN ARBOR ADMINISTRATORS ASSOCIATION
109 W. WASHINGTON
ANN ARBOR, MI 48103

\$ 2,000 \$ 2,000

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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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>APPEL, MICHAEL</u> <u>1327 Jones Dr</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>50</u>	\$ <u>50</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>ARSEN, DAVID</u> <u>300 Linda Vista</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>100</u>	\$ <u>100</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>ATZINGER, Suzanne</u> <u>5809 Lohr Lake Dr</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>20</u>	\$ <u>20</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>BARNETT, Laurie</u> <u>3425 VINTAGE Valley</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>100</u>	\$ <u>100</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
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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>BOLLMAN, LYNN</u> <u>531 1/2 W. MIDDLE</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u>	\$ <u>100</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>Boyle, MARK + WENDY</u> <u>4540 AUGUSTA CT</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>25</u>	\$ <u>25</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>BRILOFF, Sarah</u> <u>725 Dellwood</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>25</u>	\$ <u>25</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>Brigger, Heather</u> <u>9072 Emerson St.</u> <u>Saline, MI 48176</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>10</u>	\$ <u>10</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)
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3. Contribution # 1 4. Date of Receipt 3-24-11
 Name & Address:
Brown, William
1035 MARVIN
MILAN, MI 48160

6. Amount \$ 20 \$ 20

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

Click Here for Memo Itemization

3. Contribution # 2 4. Date of Receipt 3-14-11
 Name & Address:
Browning, Pat
3988 WEBER Rd
Saline, MI 48176

6. Amount \$ 10 \$ 10

5. If over \$100.00 cumulative, please provide:
 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 3-21-11
 Name & Address:
Burney, Mary
4319 Miller
Ann Arbor, MI 48103

6. Amount \$ 50 \$ 50

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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3. Contribution # 4 4. Date of Receipt 3-28-11
 Name & Address:
CARINO, Laura
25950 COBBLETS LN
S. LYON, MI 48178

6. Amount \$ 10 \$ 10

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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Page Subtotal 90.

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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>3-21-11</u>		
Name & Address: <u>Carl Berg, Sean</u> <u>1902 Independence</u> <u>Ann Arbor, MI 48104</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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	4. Date of Receipt <u>3-21-11</u>		
Name & Address: <u>Cleary, Lynn</u> <u>9400 Mother View</u> <u>Taylor, MI 48180</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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	4. Date of Receipt <u>2-21-11</u>		
Name & Address: <u>COBBLE, LARRY</u> <u>9081 LONE LN</u> <u>Dexter, MI 48130</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Director</u> Employer <u>Altarum Institute</u>			
Business Address <u>3520 Green Ct St 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			
3. Contribution # 4	4. Date of Receipt <u>3-3-11</u>		
Name & Address: <u>Connors, Ronnie</u> <u>321 Edward J. St.</u> <u>Clinton, MI 49236</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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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400

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

Name & Address:

Correll, Wendy
2956 Provincial
Ann Arbor, MI 48104

3-21-11

\$ 100 \$ 100

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

Name & Address:

DOBROWOLSKI, Kathy + Paul
218 W. Bemis
Saukville, MI 49176

3-14-11

\$ 10 \$ 10

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:

DOLAN, Christa
5673 ROXBURY
Ypsilanti, MI 48197

4-3-11

\$ 10 \$ 10

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

Name & Address:

Dries, James
3840 Michael Rd. N
Ann Arbor MI 48103

3-20-11

\$ 500 \$ 500

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

Click Here for Memo Itemization

Occupation President Employer WEST LIBERTY INFORMATION

Business Address 3840 Michael Rd N. Ann Arbor, MI 48103

Type of Contribution: Direct Loan from a person Fund Raiser

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620

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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>ELYAKIN, Neal</u> <u>1300 Red OAK</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-10-11</u>	\$ <u>100</u>	\$ <u>100</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>Emerson, Bert</u> <u>1861 Cimarron Dr</u> <u>Okemos, MI 48864</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u>	\$ <u>100</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>Emlaw, Michael + Margaret</u> <u>1320 King George Blvd.</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>125</u>	\$ <u>125</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Mich Assoc School Administrators</u> Business Address <u>1001 Centennial Way St 300 Lansing, MI 48917</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>Farmer, Cheryl</u> <u>214 N. Heron</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>100</u>	\$ <u>100</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>Federation of Washtenaw Intermediate School Employees Local 3760 MPT</u> <u>307 SOUTH ST.</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>3,000</u>	\$ <u>3,000</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>Geiger + Hamme, LLC</u> <u>7230 JACKSON</u> <u>ANN ARBOR, MI 48102</u>	4. Date of Receipt <u>4-10-11</u>	\$ <u>20</u>	\$ <u>20</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>GIRBACH, Bryan</u> <u>333 Ann Marie Dr</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>100</u>	\$ <u>100</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>Glenn, Kelli</u> <u>7321 Copper Creek Dr.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>25</u>	\$ <u>25</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>Graden, SCOT</u> <u>8150 Waters Rd</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>100</u>	\$ <u>100</u>
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>Green, Patricia</u> <u>2417 Nicholson Rd</u> <u>Sewickley, PA 15143</u>	4. Date of Receipt <u>4-10-11</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPT.</u> Employer <u>N. Allegheny Schools</u> Business Address <u>200 Hillvue Ln, Pittsburgh, PA 15237</u>		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>Greiner, RONALD</u> <u>4856 Birkdale Dr.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-2-11</u>	\$ <u>50</u>	\$ <u>50</u>
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>Gross, Barry</u> <u>3642 Middleton</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>3-2-11</u>	\$ <u>25</u>	\$ <u>25</u>
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			

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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>Gunn, Leah</u> <u>1308 E. Stadium</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>100</u>	\$ <u>100</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>Hansen, John</u> <u>1880 Fifth</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>50</u>	\$ <u>50</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>HART, Kim</u> <u>1628 Brookdale Ct.</u> <u>Brighton, MI 48116</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>100</u>	\$ <u>100</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>Heider, Toish</u> <u>5939 Lohr Lake Dr</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>20</u>	\$ <u>20</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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270.

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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>HELBER, Julie</u> <u>1464 WEDGEWOOD</u> <u>SALINE, MI 48176</u>		4. Date of Receipt <u>4-3-11</u>	\$ <u>25</u> \$ <u>25</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>HERBERT, NORMAN</u> <u>3691 WABNER RIDGE CT.</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-10-11</u>	\$ <u>75</u> \$ <u>75</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>HINES, BARBARA</u> <u>1163 LANDS END LN</u> <u>SALINE, MI 48176</u>		4. Date of Receipt <u>3-14-11</u>	\$ <u>25</u> \$ <u>25</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>HOCKETT, DIANE</u> <u>1037 SHADY OAKS</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-4-11</u>	\$ <u>50</u> \$ <u>50</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-200 9-004
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 3-28-11
Name & Address: Houle, DAVID
1459 CORLAND CIRCLE
CANTON, MI 48187 \$ 50 \$ 50

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 3-28-11
Name & Address: Husse, BELINDA
8729 BURNETH DR.
MILAN, MI 48160 \$ 25 \$ 25

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 3-28-11
Name & Address: JACKSON, EMMA
2252 STATE ST.
YPSILANTI, MI 48198 \$ 20 \$ 20

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 3-27-11
Name & Address: JALET, JENNIFER
1613 E. STADIUM
ANN ARBOR, MI 48104 \$ 25 \$ 25

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 4. Date of Receipt 3-28-11
Name & Address: Jordan, Ruth
2867 Quail Hollow Ct.
Ann Arbor, MI 48108 \$ 100 \$ 100

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 2-29-11
Name & Address: Justen Harvey
1132 vesper
Ann Arbor, MI 48103 \$ 25 \$ 25

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 3-28-11
Name & Address: Kaemmlig, Lisa
49 Chestnut
Chelsea, MI 48118 \$ 20 \$ 20

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 3-23-11
Name & Address: Keeney, Jeremy
5736 Willis
Ypsilanti, MI 48197 \$ 50 \$ 50

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>KIGER, SAM + RICK</u> <u>12110 BUNCE</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>100</u>	\$ <u>100</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>KILLIPS, DAVID</u> <u>1901 REEVES</u> <u>CHELSEA, MI 48118</u>	4. Date of Receipt <u>2-24-11</u>	\$ <u>99</u>	\$ <u>99</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>KNASIAK, JEFF</u> <u>BOX 561</u> <u>MANCHESTER, MI 48150</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>50</u>	\$ <u>50</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, STEPHEN</u> <u>4499 LAKE FOREST DR. E</u> <u>ANN ARBOR, MI 48106</u>	4. Date of Receipt <u>3-3-11</u>	\$ <u>60</u>	\$ <u>60</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 4-8-11
Name & Address: LARKINS, CLIFFORD
570 PEARL ST
YPSILANTI, MI 48197 \$ 30 \$ 30
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 3-13-11
Name & Address: Leacher, John
602 JEFFERSON LN
MILAN, MI 48168 \$ 100 \$ 100
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 3-6-11
Name & Address: Lewis-LAKIN, Shawn
1433 CASSTON LANE
CHELSEA, MI 48118 \$ 100 \$ 100
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 2-19-11
Name & Address: Leyshock, Richard
1008 N. CONGRESS
YPSILANTI, MI 48197 \$ 200 \$ 200
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation SOFT. Employer WASHBURN INT. SCHOOLS
Business Address 1819 S. WAGNER, ANN ARBOR, MI 48103
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>LINCOLN ADMINISTRATORS ASSOCIATION</u> <u>8888 WHITTAKER RD</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>3-28-11</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 # 2 Name & Address: <u>LINTON, EDITH</u> <u>1721 HATCHER CRES</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-4-11</u>	\$ <u>50</u> \$ <u>50</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>LIRONES, MARY</u> <u>393 W. BENNETT</u> <u>SALINE, MI 48176</u>		4. Date of Receipt <u>3-14-11</u>	\$ <u>75</u> \$ <u>75</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>LITTLE, PATRICK</u> <u>170 FOX HULL CT</u> <u>CHELSEA, MI 48118</u>		4. Date of Receipt <u>2-24-11</u>	\$ <u>10</u> \$ <u>10</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 635
Grand Total of All Schedules 4A
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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 _____

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>LISICKI, LAURA</u> <u>9363 PATTON</u> <u>LIVONIA, MI 48150</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u>	\$ <u>100</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>LISICKI, LAURA</u> <u>9363 PATTON</u> <u>LIVONIA, MI 48150</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>30</u>	\$ <u>130</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPT.</u> Employer <u>Willow Run Schools</u> Business Address <u>235 SPENCER LANE, YPSILANTI, MI 48198</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>Lixey, Kathleen</u> <u>24 CEDARLAKE</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>50</u>	\$ <u>50</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>LOVELACE, MICHAEL</u> <u>1945 TIMBER TRAIL</u> <u>ANN ARBOR MI 48103</u>	4. Date of Receipt <u>4-10-11</u>	\$ <u>10</u>	\$ <u>10</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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190

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>MACKENZIE, JAN</u> <u>916 LUTZ AVE</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>20</u>	\$ <u>20</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>MACH, JACQUELYN</u> <u>9180 YORKSHIRE DR</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>20</u>	\$ <u>20</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>MAGYAR, James</u> <u>3855 PINEVIEW DR</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>3-29-11</u>	\$ <u>100</u>	\$ <u>100</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>MANN, Ann</u> <u>1901 Pierce Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>20</u>	\$ <u>20</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>MARCEL BOJAW</u> <u>9135 Horseshoe Bend</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>3-3-11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AST SUPT.</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 # 2 Name & Address: <u>MARSHALL, MARY</u> <u>2200 N. PARKER</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>3-1-11</u>	\$ <u>100</u>	\$ <u>100</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>MARTIN, DEDRICK</u> <u>5763 Pine View Dr</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>3-22-11</u>	\$ <u>100</u>	\$ <u>100</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>MARTIN, JANEY</u> <u>920 NORTH ST.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>30</u>	\$ <u>30</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>MATTIMORE, Joseph</u> <u>301 N. GROVE</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>50</u>	\$ <u>50</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>PREBYS, Henry</u> <u>301 N. GROVE</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>40</u>	\$ <u>40</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>MCBEHEE, John</u> <u>PO Box 519</u> <u>Willis, MI 48191</u>	4. Date of Receipt <u>3-20-11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</u> Employer <u>Lincoln Consolidated Schools</u> Business Address <u>8970 Whitaker, 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 # 4 Name & Address: <u>MEADOWS, Brenda</u> <u>410 N. HARRIS Rd</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>100</u>	\$ <u>100</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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390

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>MEDVED, DI</u> <u>1674 POND SHORE DR</u> <u>ANN ARBOR MI 48108</u>		4. Date of Receipt <u>3-14-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MEXICOTTE, DEBRA</u> <u>2660 YOST</u> <u>ANN ARBOR, MI 48104</u>		4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u> \$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MICH. Educ ASSOCIATION - PAC</u> <u>1716 KENDALE BLVD</u> <u>E. LANSING, MI 48226</u>		4. Date of Receipt <u>3-21-11</u>	\$ <u>2,800</u> \$ <u>2,000</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MISH, PAMELA</u> <u>41304 IVY WOOD LN</u> <u>PLYMOUTH, MI 48170</u>		4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u> \$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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 2,210
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>Moran, William</u> <u>632 Honey Suckle Ln</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>50</u>	\$ <u>50</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>MORHOUS, Kathy</u> <u>1745 Weather Hill Dr</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>50</u>	\$ <u>50</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>Mowrer, Kevin</u> <u>2050 Dutch Dr.</u> <u>MANCHESTER, MI 48150</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>20</u>	\$ <u>20</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>NELSON, Glenn</u> <u>1323 S. FOREST</u> <u>ANN ARBOR MI 48104</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF-EMPLOYED - ECONOMIC CONSULTANT</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	

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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>Newman, Sharon</u> <u>2648 Roseland Dr</u> <u>Ann Arbor MI 48102</u>	4. Date of Receipt <u>2-28-11</u>	\$ <u>25</u>	\$ <u>25</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>NICKELS, Karen + Bill</u> <u>311 N. Wallace</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-8-11</u>	\$ <u>50</u>	\$ <u>50</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>Norton, Steven</u> <u>1217 Olivia Ave</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>3-9-11</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Exec.</u> Employer <u>Mich Parents For Schools</u> Business Address <u>1217 Olivia, Ann Arbor, MI 48104</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>Nowland Margolis, Liza Beth</u> <u>1389 King George Blvd</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>3-13-11</u>	\$ <u>50</u>	\$ <u>50</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>OLSEN, Steve + Mary</u> <u>PO Box 203</u> <u>Chelsea, MI 48118</u>		4. Date of Receipt <u>3-21-11</u>	\$ <u>50</u> \$ <u>50</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>PANITCH, JACK</u> <u>501 BURSON PL</u> <u>ANN ARBOR, MI 48104</u>		4. Date of Receipt <u>3-23-11</u>	\$ <u>100</u> \$ <u>100</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>Phoenix Services, LLC</u> <u>1601 BRIARWOOD CIRCLE STE 450</u> <u>ANN ARBOR MI 48108</u>		4. Date of Receipt <u>4-5-11</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>PLANET MAFIMBA</u> <u>295 BURGHE</u> <u>PLYMOUTH, MI 48178</u>		4. Date of Receipt <u>4-3-11</u>	\$ <u>10</u> \$ <u>10</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-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 4. Date of Receipt 3-28-11
Name & Address:
Queener, Cecilia
46131 Village Green Ln APT A303
Bellerive, MI 48111
5. If over \$100.00 cumulative, please provide: \$ 383 \$ 383
Click Here for Memo Itemization
Occupation HR DIR. Employer Willow Run Schools
Business Address 235 Spencer Ln, Ypsilanti, MI 48197
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 3-14-11
Name & Address:
Rull, Pat
6979 Sun Crest
Salme, MI 48176
5. If over \$100.00 cumulative, please provide: \$ 20 \$ 20
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 3-14-11
Name & Address:
Ramon, Eugenia
9081 Cambridge Dr.
Salme, MI 48176
5. If over \$100.00 cumulative, please provide: \$ 10 \$ 10
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 3-14-11
Name & Address:
Rentschler, Lisa
116 Green Valley Dr.
MILAN, MI 48160
5. If over \$100.00 cumulative, please provide: \$ 20 \$ 20
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person 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-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>Romeo, Joe</u> <u>278 4th Ave Ct</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>300</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Dexter Education Association</u> Business Address <u>7550 4th 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 # 2 Name & Address: <u>Rosen-Leacher, Betty</u> <u>602 Jefferson Lane</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>3-13-11</u>	\$ <u>100</u>	\$ <u>100</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>SALINE EDUCATION ASSOCIATION</u> <u>1300 Campus Drwy</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>3-22-11</u>	\$ <u>2,010</u>	\$ <u>2,010</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, Kimberly</u> <u>7394 SPY GLASS LN</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>25</u>	\$ <u>25</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 2,435
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)
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3. Contribution # 1 Name & Address: <u>SATCHWELL, ROBERT</u> <u>3404 BURBANK</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>2-18-11</u>	\$ <u>100</u> \$ <u>100</u>
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>SAUNDERS, PAULA</u> <u>1394 JUDS RD</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>3-11-11</u>	\$ <u>20</u> \$ <u>20</u>
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>SCHAFFNER, RICHARD</u> <u>6459 TRIAL CROWN LANE</u> <u>TOLEDO, OH 43615</u>	4. Date of Receipt <u>3-22-11</u>	\$ <u>50</u> \$ <u>50</u>
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>Schomacher, Julie</u> <u>7619 KINGFISHER CT</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>50</u> \$ <u>50</u>
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		

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Grand Total of All Schedules 4A
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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>SCOTT-BURTON, Jennifer</u> <u>391 Rolling meadows Dr</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Spec Ed. Dir.</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			
3. Contribution # 2 Name & Address: <u>Secor Business Services</u> <u>5600 ALT Rd</u> <u>PETERSBURG, MI 49210</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>See, Katherine</u> <u>4035 Corey Circle</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>3-10-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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, Lee</u> <u>3725 Fieldstone Dr</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>Simon, BOBB + JOE</u> <u>5532 CREEKVIEW DR</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>50</u>	\$ <u>50</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, MARK</u> <u>107 E. MCKAY</u> <u>SARINE, MI 48176</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>10</u>	\$ <u>10</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>SNAPKE, AMIE</u> <u>9621 HAMILTON ST.</u> <u>BELLEVILLE, MI 48114</u>	4. Date of Receipt <u>4-4-11</u>	\$ <u>15</u>	\$ <u>15</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>SPICKARD, Shanna</u> <u>2150 MILKEY RD</u> <u>SARINE, MI 48176</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>30</u>	\$ <u>30</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)
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3. Contribution # 1 Name & Address: <u>SPINA, Carl</u> <u>235 OLD CREEK RD</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>50</u> \$ <u>50</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>STEAD, Christine</u> <u>575 HUNTER VIEW BLVD.</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>2-25-11</u>	\$ <u>200</u> \$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>CSC</u> Business Address <u>350 E. CERMAK, CHICAGO, IL 60616</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>STEWART, Dorothy</u> <u>1787 MANCHESTER DR</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>200</u> \$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ASSOC DEAN</u> Employer <u>UNIV. OF DETROIT MERCY</u> Business Address <u>4001 W. McNICHOLS, DETROIT MI 48221</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>TASSIN, MARCO</u> <u>2882 AURORA</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>15</u> \$ <u>15</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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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)
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3. Contribution # 1 4. Date of Receipt 4-4-11

Name & Address:
Fercala, William
2809 OAKDALE DR
ANN ARBOR, MI 48108

6. Amount: \$ 30 \$ 30

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 2-25-11

Name & Address:
THOMAS, ANDY
1425 W. STADIUM BLVD
ANN ARBOR, MI 48103

6. Amount: \$ 100 \$ 100

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 3-14-11

Name & Address:
TOMKIE WIEZ, DENISE
10100 WARNER RD
MILAN, MI 48160

6. Amount: \$ 20 \$ 20

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 4-4-11

Name & Address:
TROBELL, KATHY + BOB
30 LAVANAUGH RD
CHELSEA, MI 48118

6. Amount: \$ 10 \$ 10

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: VANATTER, CARL 9740 PLATT RD MILAN, MI 48160	4. Date of Receipt <u>3-22-11</u>	\$ <u>100</u>	\$ <u>100</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: VANATTER, CHERIE 7265 SAVINE-ANN ARBOR RD SAVINE, MI 48176	4. Date of Receipt <u>3-6-11</u>	\$ <u>99</u>	\$ <u>99</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: WABNER, BILL + MARLENE 307 S. MACOMB MANCHESTER, MI 48158	4. Date of Receipt <u>4-4-11</u>	\$ <u>100</u>	\$ <u>100</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: WALTON, BRIAN 7132 E. MAPLE GRAND BLANC, MI 48439	4. Date of Receipt <u>2-25-11</u>	\$ <u>100</u>	\$ <u>100</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>WATNETI, Janice</u> <u>5758 E. SILO RIDGE</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>50</u>	\$ <u>50</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>WARPE HOSKI, Charles</u> <u>736 TAPPAN</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-3-11</u>	\$ <u>50</u>	\$ <u>50</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>WESTERMAN, W. SCOTT</u> <u>1926 HAMPTON CT.</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>3-21-11</u>	\$ <u>200</u>	\$ <u>200</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 # 4 Name & Address: <u>SENKINS, DOLORIS</u> <u>235 SPENCER LANE</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>3-11-11</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>Willow Run Admin. Assoc.</u> Business Address <u>1255 Holmes, Ypsilanti MI 48198</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>WOLTMANN, Jeannette</u> <u>2555 Meade Court</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>3-14-11</u>	\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EDUCATOR</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 # 2 Name & Address: <u>WOODHAMS, JAMES</u> <u>3475 YELLOWSTONE DR.</u> <u>ANN ARBOR MI 48105</u>	4. Date of Receipt <u>3-1-11</u>	\$ <u>100</u>	\$ <u>100</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>YOMTOOB, YOUSSEF</u> <u>2384 GLEN EAGLES</u> <u>RIVER WOODS, IL 60015</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>100</u>	\$ <u>100</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>MARTIN, DEDECK</u> <u>5763 PINE VIEW DR</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>3-28-11</u>	\$ <u>806</u>	\$ <u>906</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPT.</u> Employer <u>YPSILANTI PUBLIC SCHOOLS</u> Business Address <u>1885 PACKARD, YPSILANTI, MI 48197</u> 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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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 3-21-11
Name & Address: ZENZ, Jim
14200 E. MICHIGAN
GRASS LAKE, MI 49240 \$ 20 \$ 20
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 3-21-11
Name & Address: FRAYER, CHRIS
13920 RUSTIC DR.
GREGORY, MI 48137 \$ 20 \$ 20
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 3-14-11
Name & Address: ZIRINSKY, BILL
1038 BALDWIN AVE.
ANN ARBOR, MI 48104 \$ 500 \$ 500
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation OWNER Employer CRAZY WISDOM BOOKSTORE
Business Address 114 S. MAIN, ANN ARBOR, MI 48104
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 3-21-11
Name & Address: ZWEIFLER, ANDREW
1706 S. UNIVERSITY
ANN ARBOR, MI 48104 \$ 20 \$ 20
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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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B 2009-004
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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>Zwetch Ken BAUM, SAMUEL</u> <u>20 Heatheridge Ct.</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>3-6-11</u>	\$ <u>50</u>	\$ <u>50</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>ALWIN, ABBY</u> <u>112 Fairview</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>Carney, Kevin</u> <u>719 Oxford</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>25</u>	\$ <u>25</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>D'ADDONA, PAULA</u> <u>1631 DICKEN DR</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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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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>BATES, DAVID</u> <u>1708 Pearl St</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>BLEVINS, Patricia</u> <u>7876 Grass Rd</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>Bower, Bob + Jan</u> <u>633 Dartmoor Rd</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>DOYLE, Amy</u> <u>210 S. WASHINGTON ST.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>100</u>	\$ <u>100</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>Drew, Mary Anne</u> <u>8 Naves Hill Court</u> <u>Ann Arbor MI 48105</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>Ferrell, Kimberley</u> <u>7918 Ramblewood St</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>Fielder, Mary</u> <u>403 E Main St.</u> <u>Manchester, MI 48159</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>300</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Manchester Schools</u> Business Address <u>20500 Dutch Dr, Manchester MI 48159</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>Hendrick, Janice</u> <u>1908 Psihac Trail</u> <u>Ann Arbor MI 48105</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>Henes, Patti</u> <u>5186 Austin</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>HILTON, MATT</u> <u>3409 Ferry</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>20</u>	\$ <u>20</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>HOLST, Mary Pat</u> <u>1402 Fieldstone Ct</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>HOSPADARUK, Beth</u> <u>837 DUNCAN ST.</u> <u>Ann Arbor, MI 48103.</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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: <u>Hovatter, Diane</u> <u>11164 FAR Rd.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u>	\$ <u>50</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>Karey, Kimberlee</u> <u>6756 Fleming Creek Dr.</u> <u>Superior Twp. MI 48198</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>Lowe, Pamela</u> <u>1715 Scio Church Rd</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>15</u>	\$ <u>15</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>McConnell, Edward</u> <u>4433 CARTERBURY</u> <u>Ann Arbor, MI 48103.</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>MC DONALD, GRIFF + POET</u> <u>3906 PEMBERTON</u> <u>ANN ARBOR MI 48105</u>		4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u> \$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MCLEAN, PATRICK</u> <u>1010 BEAR ST</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>4-11-11</u>	\$ <u>50</u> \$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>REDNOUR, DENISE</u> <u>2136 CHANCER DR</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>SHOCK, BURN</u> <u>3119 WHIPPLE</u> <u>JACKSON, MI 49201</u>		4. Date of Receipt <u>4-12-11</u>	\$ <u>35</u> \$ <u>35</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>SLOTTEN, Karen</u> <u>2212 CHESTNUT CRESCENT</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>20</u>	\$ <u>20</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>TCHALO, C.P.</u> <u>74 Schum</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>Thomas, Clarence</u> <u>879 WICKFIELD CT</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>100</u>	\$ <u>100</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>Thomas, Eileen</u> <u>2909 BROCKMAN BLVD</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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 <u>4-11-11</u>		
Name & Address: <u>WRIGHT, DAYLE</u> <u>126 SOUTH ST.</u> <u>Chelsea, MI 48118</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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	4. Date of Receipt <u>4-14-11</u>		
Name & Address: <u>STAHLER-SHOCK, Barbara</u> <u>406 WILDER AVE</u> <u>Ann Arbor, MI 48104</u>		\$ <u>2</u>	\$ <u>2</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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	4. Date of Receipt <u>4-11-11</u>		
Name & Address: <u>BEHMER, Kevin</u> <u>1465 FOLKSTONE DR</u> <u>Ann Arbor, MI 48105</u>		\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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	4. Date of Receipt <u>4-14-11</u>		
Name & Address: <u>COMPTON, GREGORY</u> <u>7398 LOCHMOOR DR</u> <u>YPSILANTI, MI 48197</u>		\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>COUPLAND, DAVID</u> <u>2552 N. MADE</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>DONNELLY, Julie</u> <u>3712 NOBLE DR</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>KIMMOY, DANIEL</u> <u>1596 SCIO RIDGE RD</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>MAC ARTHUR, James</u> <u>2600 ROSELAND DR</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-12-11</u>	\$ <u>20</u>	\$ <u>20</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
(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)
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3. Contribution # 1	4. Date of Receipt <u>4-12-11</u>		
Name & Address: <u>NATHANS, ELI</u> <u>1210 CLABUE AVE</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization			
Occupation <u>ASSOC. PROF.</u> Employer <u>UNIVERSITY OF WESTERN ONTARIO</u>			
Business Address <u>1151 RICHMONDS ST LONDON, ONTARIO CANADA</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 2	4. Date of Receipt <u>4-11-11</u>		
Name & Address: <u>PASQUE, PETER</u> <u>4377 TEXTILE</u> <u>YPSILANTI, MI 48197</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization			
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	4. Date of Receipt <u>4-12-11</u>		
Name & Address: <u>SHEETS, CATHY</u> <u>3150 WOLVERINE</u> <u>ANN ARBOR MI 48108</u>		\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization			
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	4. Date of Receipt <u>4-11-11</u>		
Name & Address: <u>SOLARI, ANNE</u> <u>2535 STATE ST.</u> <u>ANN ARBOR, MI 48104</u>		\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization			
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-2009-054

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>SUTHERLAND, ELIZABETH</u> <u>492 EVEREST ST</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>4-14-11</u>	\$ <u>20</u>	\$ <u>20</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>TherisaULT-KIMMEY, EMILY</u> <u>1596 SCIO RIDGE Rd</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>THINKSTRETCH LLC</u> <u>339 E LIBERTY #340</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>4-10-11</u>	\$ <u>200</u>	\$ <u>200</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>TUZINSKY, MARCI</u> <u>2005 BRAMPTON CT.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-11-11</u>	\$ <u>10</u>	\$ <u>10</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>Whitcomb, Kristin</u> <u>1632 Kirtland</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-1-11</u>	\$ <u>10</u>	\$ <u>10</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>Bowen, Annette</u> <u>9188 Moon Rd</u> <u>Saline, MI 48176</u>	4. Date of Receipt <u>3-15-11</u>	\$ <u>10</u>	\$ <u>10</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>Berman, Kira</u> <u>1122 Pearl St</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-15-11</u>	\$ <u>50</u>	\$ <u>50</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>Angeli, Julie</u> <u>2139 Roosevelt</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>ARNOLD, SAMIE</u> <u>1209 WESTMOORELAND</u> <u>YPSICANTI, MI 48197</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u> \$ <u>20</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>BASSETT, Theresa</u> <u>2015 ROCK RIDGE CT.</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u> \$ <u>10</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>Bezeau, Anne</u> <u>10343 WASHER RD</u> <u>MILAN, MI 48160</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>5</u> \$ <u>5</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>BINDER, STAVE</u> <u>4001 PRATT RD.</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>50</u> \$ <u>50</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>Bowles, Danielle</u> <u>7765 Fourth St.</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>Browning, Mary</u> <u>1229 Wines</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>40</u>	\$ <u>40</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>Buddin, Sharine</u> <u>5947 Parview</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>30</u>	\$ <u>30</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>Cain, Toni</u> <u>8256 Gary Ave.</u> <u>Westland, MI 48185</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>COLE, ROBERTA</u> <u>425 HARRIS</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>CRAWLEY, COURTNEY</u> <u>8340 PARK RIDGE</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>CZUCHNOWSKY, LARISSA</u> <u>3380 GITSVIEW DR.</u> <u>ANN ARBOR, MI 48108</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>DUCKEE, KENDRA</u> <u>2745 BOARD WALK</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>EMMENDORFER, JOANN</u> <u>516 GOTT ST.</u> <u>ANN ARBOR, MI 48103</u> 4. Date of Receipt: <u>4-16-11</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>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: <u>ENGLISH, JON</u> <u>3413 STRAND</u> <u>ANN ARBOR MI 48105</u> 4. Date of Receipt: <u>4-16-11</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>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: <u>George, Ramona</u> <u>1305 BELMONT PL.</u> <u>ANN ARBOR, MI 48103</u> 4. Date of Receipt: <u>4-16-11</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>15</u>	\$ <u>15</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: <u>Gray, Brenda</u> <u>2191 ASCOT</u> <u>Ann ARBOR MI 48103</u> 4. Date of Receipt: <u>4-16-11</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>20</u>	\$ <u>20</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>GREDEN, LEIGH</u> <u>2860 GLADSTONE</u> <u>Ann Arbor, MI 48104</u> 4. Date of Receipt <u>4-16-11</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>25</u> \$ <u>25</u> Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>HAFELI, CAROL</u> <u>1500 ARBOR VIEW RD</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>4-16-11</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>10</u> \$ <u>10</u> Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>HELMAN, JANET</u> <u>7130 POPLAR DR.</u> <u>YPSILANTI, MI 48197</u> 4. Date of Receipt <u>4-16-11</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>15</u> \$ <u>15</u> Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>HOLE FKA, DEBORAH</u> <u>13485 MCKINLEY</u> <u>CHELSEA MI 48118</u> 4. Date of Receipt <u>4-16-11</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>10</u> \$ <u>10</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-206 9-004

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>HOPKINS, Ellen</u> <u>1465 FOIKSTONE CT.</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>HUGHES, MATT</u> <u>2403 PITTSFIELD BLVD</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>JARBER, MELISSA</u> <u>821 E SUMMERFIELD GLEN</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>JAROSZ, PATTI</u> <u>5369 MARSHLAND CT</u> <u>HAMBURG TWP, MI 48129</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>Johnston, Tyra</u> <u>610 GOTT ST.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>JUDGE, KRISTIN</u> <u>6082 Vineyard Ave</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>JUSTYNA, CANDIDA</u> <u>3227 DUNWOODIE</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>Keith, Sarah</u> <u>6633 RICHARDSON</u> <u>Howell, MI 48843</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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 4-16-11
Name & Address:
Killewald, Barbara
5786 GREENFIELD
BRIGHTON, MI 48114
5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

\$ 10 \$ 10
Click Here for Memo Itemization

3. Contribution # 2 4. Date of Receipt 4-16-11
Name & Address:
Killips, DAVID
1901 REEVES RD
CHELSEA, MI 48118
5. If over \$100.00 cumulative, please provide:
Occupation SUPT. Employer Chelsea Schools
Business Address 500 WASHINGTON, CHELSEA, MI 48118
Type of Contribution: Direct Loan from a person Fund Raiser

\$ 93 \$ 192
Click Here for Memo Itemization

3. Contribution # 3 4. Date of Receipt 4-16-11
Name & Address:
Klein, Kathryn
631 E. FIRST
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

\$ 10 \$ 10
Click Here for Memo Itemization

3. Contribution # 4 4. Date of Receipt 4-16-11
Name & Address:
Klein, Fred
1280 Kuehale CT.
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

\$ 10 \$ 10
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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>KLINK, Gena</u> <u>9121 WATERLOO - MURKIN</u> <u>GRASS LAKE, MI 49240</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>LAVER, Shannon</u> <u>1143 STAMFORD</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>MCDONALD, LAUREL</u> <u>2882 BURECK</u> <u>GRASS LAKE, MI 49240</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>LANTIS, Lauren</u> <u>221 W. MIDDLE</u> <u>CHELSEA, MI 48118</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>Landrum, Laurel</u> <u>315 2nd St, #517</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>Lawther, Leslie</u> <u>900 MIDLER</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u>	\$ <u>20</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>Levine, ELANA</u> <u>1450 MILLBROOK TRAIL</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>LORTIN, DENISE</u> <u>317 N. 7th</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>5</u>	\$ <u>5</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 contributor's 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>MALLORY, JENNIFER</u> <u>3658 Ranched Dr. #102</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MARTIN, DEDRICK</u> <u>5763 Pine View</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>128</u>	\$ <u>1,034</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>Supt.</u> Employer <u>YPSILANTI Schools</u>			
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, Jamie</u> <u>1942 Harley</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>MCKEE, SUSAN</u> <u>11147 Boyce Dr.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>McLean, Kim</u> <u>2069 Delaware</u> <u>Ann Arbor, MI 48103</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u> \$ <u>20</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: <u>McMahon, Kathi</u> <u>15 Hillcrest Blvd</u> <u>Ypsilanti, MI 48197</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>3</u> \$ <u>3</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: <u>Metry, Tracey</u> <u>1417 Garden</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u> \$ <u>10</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: <u>Monde, Dawn</u> <u>11714 Louis Lane</u> <u>Whitmore Lake, MI 48189</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u> \$ <u>10</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>MOON, Heather</u> <u>2625 ARROWWOOD</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>4</u>	\$ <u>4</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>MORRIS, STEPHEN</u> <u>260 BROOKSIDE DR.</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>MULLICE, DEBORAH</u> <u>3958 MARBLEWOOD WAY</u> <u>ANN ARBOR, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>O'MALLEY, Ellen</u> <u>809 FIFTH ST.</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u>	\$ <u>20</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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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>O'NEILL, Gloria</u> <u>938 W. DELHI RD</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>PALMS, Carol</u> <u>20415 BETHEL Church Rd.</u> <u>Manchester, MI 48158</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>50</u>	\$ <u>50</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>Parkus, JoAnn</u> <u>2370 Merrill Ave</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>Patrash, Amy</u> <u>4731 Gatewood Cir 3A</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>PETERSON, Amy</u> <u>3401 millwood ct.</u> <u>WESTLAND, MI 48185</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>RAY, Dairia</u> <u>8349 LAKENAW CT.</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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, Katie</u> <u>2222 GEORGETOWN BLVD.</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>SADLER, RALEIGH</u> <u>1615 SHADFORD</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>SANCH, SUSAN</u> <u>318 N. WALLACE BLVD.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>25</u>	\$ <u>25</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>SATCHWELL, STEPHANIE</u> <u>2202 RIVENACK CT.</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>20</u>	\$ <u>20</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>SCHAFER, Nancy</u> <u>4231 JUDD RD.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>SCHNEIDER, SUSAN</u> <u>11952 N. MAIN ST.</u> <u>WHITMORE LAKE, MI 48189</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>9</u>	\$ <u>9</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>Schneider, Teresa</u> <u>601 W. STADIUM</u> <u>ANN ARBOR, MI 48103</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>Seiser, Paulette</u> <u>4146 Cordova</u> <u>MILAN, MI 48160</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>Sheldon, Ingrid</u> <u>1416 Folkstone Ct.</u> <u>Ann Arbor, MI 48105</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>100</u> \$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>Spiegel, Janet</u> <u>7267 York St.</u> <u>Dexter, MI 48130</u>		4. Date of Receipt <u>4-16-11</u>	\$ <u>30</u> \$ <u>30</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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
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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>STEINHAUER, Kelly</u> <u>1504 E. PARK PL</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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>STOKES, Teresa</u> <u>9242 REYNOLDS CT.</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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</u> <u>680 WALD STRASSE</u> <u>MANCHESTER, MI 48150</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>100</u>	\$ <u>100</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>VENTI MIGLIA, Cynthia</u> <u>3341 PLEASANT Valley Rd.</u> <u>BRIGHTON, MI 48114</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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
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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>WARR, ANGELA</u> <u>3003 CLAWSON AVE</u> <u>ROYAL OAK, MI 48073</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>35</u>	\$ <u>35</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>WELLS, LISA</u> <u>8873 LAKEWAY CT.</u> <u>YPSILANTI, MI 48197</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>WESTBROOKS, SUSAN</u> <u>16590 Heim Rd</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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>Westerman, Cherry</u> <u>715 Granger</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
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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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>WRIGHT, Dayle</u> <u>126 SOUTH ST.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>150</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIETITIAN</u> Employer <u>ALLEGIANCE HEALTH</u> Business Address <u>205 N. EAST AVE. JACKSON, MI 49201</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>YEATS, DONALD</u> <u>1725 GLENWOOD RD</u> <u>Ann Arbor MI 48104</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>30</u>	\$ <u>30</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>DICKINSON-Kelley, LEE Ann</u> <u>3371 BRECKLAND CT.</u> <u>Ann Arbor, MI 48108</u>	4. Date of Receipt <u>4-15-11</u>	\$ <u>100</u>	\$ <u>100</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>FRENCH, Adam</u> <u>761 Taylor St.</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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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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>Marshall, Mary</u> <u>2200 N. Parker</u> <u>Dexter, MI 48130</u>	4. Date of Receipt <u>4-15-11</u>	\$ <u>100</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPT.</u> Employer <u>Dexter Schools</u> Business Address <u>2714 Ann Arbor 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 # 2 Name & Address: <u>Peacock, Eric</u> <u>305 Ideal St.</u> <u>Milan, MI 48160</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>100</u>	\$ <u>100</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>Weid, Corey</u> <u>13913 Aberteen Ln</u> <u>Gregory, MI 48137</u>	4. Date of Receipt <u>4-16-11</u>	\$ <u>10</u>	\$ <u>10</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:	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	



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>WISD SPEC. Ed. millage</u>	<u>4-17-11</u> Date of Expenditure	<u>\$ 182.05</u>	<u>\$ 182.05</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>Neal ELYAKIN</u> <u>1300 Red Oak</u> <u>Ann Arbor, MI 48103</u>	4. Purpose: <u>PO BOX RENT</u> 5. Ballot Proposal: <u>WISD SPEC. Ed. millage</u>	<u>3-3-11</u> Date of Expenditure	<u>\$ 40.00</u>	<u>\$ 222.05</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>FIFTH THIRD BANK</u> <u>2090 W. STADIUM</u> <u>Ann Arbor, MI 48103</u>	4. Purpose: <u>BANK FEE</u> 5. Ballot Proposal: <u>WISD SPEC. Ed. millage</u>	<u>2-1-11</u> Date of Expenditure	<u>\$ 5.00</u>	<u>\$ 227.05</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>Neal ELYAKIN</u> <u>1300 Red Oak</u> <u>Ann Arbor, MI 48103</u>	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD SPEC. Ed. millage</u>	<u>3-14-11</u> Date of Expenditure	<u>\$ 564.00</u>	<u>\$ 791.05</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 791.05
 Grand Total of Schedules 4B
 (Complete on last page of Schedule)

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>Neal Elyakin</u> <u>1300 Red Oak</u> <u>Ann Arbor, MI 48103</u>	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD</u> <u>Spec. Ed. millage</u> County: <u>Washtenaw</u>	<u>3-28-11</u> Date of Expenditure	<u>\$ 217.00</u> Amount	<u>\$ 1008.05</u> Cumulative
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<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>Ann Arbor Center For</u> <u>Independent Living</u> <u>3941 Research Park Dr.</u> <u>Ann Arbor, MI 48108</u>	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD</u> <u>Spec. Ed. millage</u> County: <u>Washtenaw</u>	<u>4-13-11</u> Date of Expenditure	<u>\$ 248.00</u> Amount	<u>\$ 1256.05</u> Cumulative
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<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:	4. Purpose:	5. Ballot Proposal:	\$ _____ \$ _____ Date of Expenditure	Click for Memo Itemization Type
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page 465.00

Grand Total of Schedules 4B
(Complete on last page of Schedule) 1256.05

Enter this total on Line 8a of the Summary Page