#### BALLOT QUESTION COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.	3.This Statement covers Fro	om: <u>1-01-11</u> To <u>4-11-11</u>
1. Committee I.D. Number B-200 9-064	4. Committee's Mailing Addr	ress  MAGYAR, Treasurer  Pinenew Drive  134-911-0271  different from the committee mailing address on
2. Committee Name	Dexte	( m! 48136
Friends of Education	Area Code and Phone  If the address in this box is of the Statement of Organization official.	on, mail may be sent to this address b⊈the filing
5. Treasurer's Name and Residential Address		THS HI
JIM MAGYAR	NA	APR TEN
3855 PINEVIEW Dried Dexter MI 48136	, ,	TER 12
Area Code and Phone 73 4- 91/- 027	7	
6 Treasurer's Rusiness Address		Name and Mailing Address Danated Record Keepen Record Keep
Ann ArBor Center For		mek ≘
Ann Arbor Center For Inde Ren bent Living 3941 Research Park or	859 PL	Mek Ste 5
Ann Areac, mi 48108 Area Code and Phone 134-395-1931	DUN DEE	, 111 =0
Area Code and Phone 134-395-1131	Area Code and Phone	134-529-3321
8. TYPE OF STATEMENT:	8c. ANNUAL STATEMENT	8e. DAMENDMENT TO CAMPAIGN STATEMENT
8a. PRE- ELECTION	(Coverage Year)	(Complete Item 8a, 8b, 8c 8d, or 8f to
OR	8d. QUALIFICATION	indicate which Statement is being amended)
8b. POST-ELECTION	OR	8f. DISSOLUTION OF COMMITTEE
Pre-Election or Post-Election Statement relates to:	NON-QUALIFICATION	Effective Date of Dissolution
☐ PRIMARY ☐ GENERAL	STATEMENT (Required of State-wide Ballot Question	
SPECIAL SPECIAL	Committees Only)	
_		By checking this item, I certify that the
Date of Election: 5- 3 - 20	Date of Qualification or Non- Qualification:	By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule
5-3-2011	Qualification.	4B and the Summary Page.
A committee that does not have a Reporting Waiver must file all red Schedules. Direct contributions, in-kind contributions, loans, expen	uired Campaign Statements. The ditures and outstanding debts coun	Campaign Statements must include all applicable t against the \$1,000 Reporting Waiver threshold.
If any of the information listed in items 4, 5, 6, or 7 has changed sin amendment to the Statement of Organization should accompany the or before the filing deadline of a required campaign statement,	is Campaign Statement. It a reque that campaign statement can not	be waived.
Verification: I certify that all reasonable diligence was used in the my knowledge and belief the contents are true, accurate and corr	preparation of this statement and an plete.	attached schedules (if any) and to the best of
Current Treasurer or	C. N.	nek_ Date_4-19-11
Current Treasurer or Designated Record Keeper SUF KU M UK  Type or Print Name	Signature	Date 1-1/-1/



#### SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number

B-2009-004

2. Committee Name Frents OF COUCATION RECEIPTS Column I Column II This Period Cumulative for Election Cycle 3. Contributions (3a.) \$ 26, 236,00 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (less than \$20.01 - no Schedule) (3b.) \$ NOT APPLICABLE (3c.) \$ 26, 236,00 (18.) \$ 26, 236.00 c. Subtotal of Contributions 4. Other Receipts (Schedule 4A-1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$ 26,236.00 (20.)\$ 26,236,00 (Add Line 3 c + Line 4) IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7) (6a.) \$ b. Unitemized (less than \$20.01 each - no Schedule) (6b.) \$ \_\_NOT APPLICABLE 7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b) (21.) \$ \_\_\_\_ (7.) \$ **EXPENDITURES** 8. Expenditures (8a.) \$ 1256.05 a. Itemized Direct Expenditures ( Schedule 4B, Column 7) b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6) (8b.) \$\_\_\_\_ c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7) (8c.) \$ (8d.) \$\_\_\_\_ d. Unitemized Expenditures (\$50.00 or less-no Schedule) (8e.) \$\_\_\_ 1256, 05 e. Subtotal of Expenditures 9. Independent Expenditures (Schedule 4B-1, Column 7) 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) 1256. (24.)\$ 1256,05 **IN-KIND EXPENDITURES** 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8) (11.) \$ (25.) \$ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations a. Owed by the Committee (Schedule 4E) (12a.)\$ \_\_\_ b. Owed to the Committee (Schedule 4E) (12b.) \$\_ **BALANCE STATEMENT** 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) Amount received during reporting period (14.)+\_26,236.00 (Line 5, Column I, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (16.)-\_\_\_\_/, 256. 05 (Line 10, Column I, Total Expenditures) 17. ENDING BALANCE (17.)\$ 25, 987, 72 · (Subtract line 16 from line 15)

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



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

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number \_

13-28	0	9 <u>~</u>	00	4	

BALLOT QUESTION (	OMMITTEE	2. Committee	Name Fren	DS OF E	» ucation
Please enter contributors name and address middle initial.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  HANS BARGER, Troy 9711 BAVER Rd	4. Date of Receipt —	4-11-	<u>//                                   </u>	s 20·	s 20·
Dewitt, mi 5. If over \$100.00 cumulative, please prov	48820 ride:			Click Here for Me	emo Itemization
Occupation	Employer				
Business Address					•
Type of Contribution: X Direct	Loan from a pe	erson	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt	4-11-11			
Boles, BOBBIE 4023 norwich				\$_ <i>10</i> .	s 10.
Can Ton, MI 48 5. If over \$100.00 cumulative, please provi	=			Olivan to the	
	Employer			Click Here for Mei	no Itemization
OccupationBusiness Address	Employer				
Type of Contribution: Direct	Loan from a pers	son	Fund Raiser		
Name & Address:  CHAM PAGNE, Co  /365 Mill B (o)  ANN ATBOC, To  5. If over \$100.00 cumulative, please prov	M1 48108			\$Click Here for Merr	
Occupation				Office 101 Mess	o itemization
Business Address					
Type of Contribution: Direct	Loan from a perso	on ·	Fund Raiser		
Contribution # 4 Name & Address:	4. Date of Receipt	4-11-11			
DAIGNEAU, JE	ennifer				
11526 Wilson  Belle Ville, If over \$100.00 cumulative, please provide	Ave. M1 48111			\$ 16.	\$
				Click Here for Mem	no Itemization
·	Employer				
Business Address Direct					
Type of Contribution: P Direct	Loan from a pe	Grand To	Fund Raiser  Page Subtotal of All Schedules 4A last page of Schedule)	Enter this total on line 3a of Summary Page	



# **ITEMIZED CONTRIBUTIONS**

1. Committee I.D. Number

B-2009-004

SCHEDU	LE 4A	·	- /	-
BALLOT QUEST	ION COMMITTEE 2. Comm	ittee Name <u>Frien</u>	DS OF EDL	Cathor
middle initial	address. If contribution is from an individual,		e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  LINCOIN EDUCA  8970 Whit  YPSILANTI,  5. If over \$100.00 cumulative, plea	m1 48197	-11 N	\$ <u>3.5</u> 70 ·	\$ 350. emo Itemization
Occupation	Employer			
Business Address  Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Name & Address:  DATUNG, 646  118 S. Bou  SACK SON,  5. If over \$100.00 cumulative, pleas  Occupation	ven m1 49203 e provide:	<del>.</del>	\$\$. Click Here for Mer	\$5 mo Itemization
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:  CISE / E, Bre.  3630 NOB/E  Dexter, MI	4. Date of Receipt 44.	-11	\$ <u>10</u> .	s
5. If over \$100.00 cumulative, plea			Click Here for Men	no Itemization
Occupation	Employer		•	
Business Address  Type of Contribution:     Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt	-11		
HASSBERGER, 8104 Park	Jase er		\$ //	\$ 10·

Page Subtotal

Click Here for Memo Itemization

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

Fund Raiser

Loan from a person

Enter this total on line 3a of Summary Page

Page Z of 13

Occupation

Business Address Type of Contribution:

Saune, mi 48/ 5. If over \$100.00 cumulative, please provide:



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

1. Committee I.D. Number <u>B-2059-084</u>

2. Committee Name Prient	s of CD	UCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1  Name & Address:  MCC acgar, Sherry  3580 HVDSON  Dexter, MI 48138	\$	
5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2  Name & Address:  Barnett, Jeffrey  2200 PLACID WAY  Ann Ar Bor, MI 48105	\$_/ <b>3</b>	s15
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: $\chi$ Direct Loan from a person Fund Raiser		
Name & Address:  Rochm, Leigh  9116 Fanama  48198  5. If over \$100.00 cumulative, please provide:	\$/O\ Click Here for Memo	\$
Occupation Employer		
Business Address  Type of Contribution: Y Direct Loan from a person Fund Raiser		
Contribution #4 Name & Address:  SPA CKS, Bridgette  9070 Gheasant Ribble  Saline, mi 48116  If over \$100.00 cumulative, please provide:	\$\$	/6.
OccupationEmployer	Click Here for Memo	Itemization
usiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

		ame <u>FI/E/I/D</u>	5 09 C.	DUCATION .
Please enter contributors name and address. If middle initial.	contribution is from an individual, enter i	ast name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  MABLLEY, DANELIN  2099 Whisperin  Ann Af Bör, n	4. Date of Receipt 4411		s /0	s 18
Ann ArBar, n	11 48103			
5. If over \$100.00 cumulative, please provide	!		Click Here for Me	emo itemization
Occupation Em	ployer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
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MCCORMICK, Linto 2675 W. AFBOR	2d		\$ <u>16</u>	s
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OccupationEm	ployer		Charles of West	no remization
Business Address	,			
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 3-6-11			
Cowhy, Michelle 2309 Baker Rd Dexter, mi 48, 5. If over \$100.00 cumulative, please provide:			\$/0	\$/0 o Itemization
OccupationEmp	oloyer			
Business Address Type of Contribution: Direct	Loan from a person	und Raiser		
Name & Address:	Date of Receipt 3-6-11			
LAW TENCE, VE TONICA 14015 EDGE WATER GTEGO TY, MI 481: If over \$100.00 cumulative, please provide:	Dr.		\$ <u>40</u>	\$ <u>48</u>
Decupation Empi	oyer		Click Here for Memo	o Itemization
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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 3- 2069-004

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middle initial.	ddress. If contribution is from an individual, enter l	ast name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Hohnke, Kristyn 19548 Bush 2	2d		\$1O	\$
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Business Address				
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Business Address				
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3. Contribution # 3 Name & Address:	4. Date of Receipt 3-6-1	1		
FREALL, Andre	100		s 20	s_ 20
Chelsta, MI 4 5. If over \$100.00 cumulative, please	provide:		Click Here for Memo	Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct		und Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 3-7-11			· · · · · · · · · · · · · · · · · · ·
Aesch BACh,	Sara			
620 Trego	CITCLE		s 50	50
ALSCH BACH, 670 Trego Ann Arbor, If over \$100.00 cumulative, please p			Click Here for Memo	
occupation	Employer		Chek Fore for Mellin	Remization
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age <u>5</u> of <u>13</u>			Enter this total on line 3a of	
			Summary Page	



5.

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

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

Summary Page

	THON COMMITTEE	2. Committee Nam	e Hiends	OF E	du Cation
Please enter contributors name an middle initial.	d address. If contribution is from a	an individual, enter last	name, first name,	6. Amount	7. Cumulative for Election Cycle for Ea Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt	3-3-11			j date of receipt)
Allen, Gerald 3705 Lone	tipe Re		· <del></del>	s 200	\$ 200
MILFORD, M 5. If over \$100.00 cumulative, ple POBLIC Rela	ase provide:				Memo Itemization
Occupation SPECIAL	ST Employer WAS A				
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3. Contribution # 2 Name & Address:	4. Date of Receipt	3-28-11	und Raiser		
Allen Karei	•				
801 STANCE	y 51		9	25	\$ 25
YPSI/anti) n 5. If over \$100.00 cumulative, pleas	7) 48197				
Occupation	Employer		(	Click Here for Me	emo Itemization
Business Address					
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Contribution # 3     Name & Address:	4. Date of Receipt	3-13-11			
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Allen, Rober 6030 Cherr	ywood Dr.		\$	200	\$ 200
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usiness Address <u>ZSSS S.</u>	State, Ann A	LEGOT, MI	48104		
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>B- 200 9-00 9</u>

BALLOT QUESTION COMMITTEE	2. Committe	Name <u>F(1-ln)</u>	os of cx	ucation
Please enter contributors name and address. If contribution is middle initial.		er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1  Name & Address:  APPEL, MICHAEL  1327 Junes Dr  Ann Arbor, MI 48105	7-321	/	s_50	\$ 50
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Employer				
Business Address				
Type of Contribution: X Direct Loan fro	om a person	Fund Raiser		
3. Contribution #2  Name & Address:  ATSLn, TAVIT  300 Linta VISTA		′1	\$ 160	s 100
Ann Areor, m1 48103	3		<u> </u>	
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	Itemization
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Business Address  Type of Contribution:     Direct   Loan from	·			
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Name & Address:	ot 3-14-1	1	* * * * * * * * * * * * * * * * * * *	
ATZINGER, SUZANNE				
5809 Lohr Lake Dr	.0		<u>\$ 20</u>	<u>\$_20</u>
Amn Arror, mi 4810. 5. If over \$100.00 cumulative, please provide:	ď		Clinic House for Many	
OccupationEmployer			Click Here for Memo	itemization
Business Address ———————————————————————————————————				
Type of Contribution: Y Direct Loan from a	person	Fund Raiser		
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Barne TT, CAUSSE	<u> </u>			
Barnett, CAUSIE 3425 VINTAGE Valley				
Amn Arzor, mi 4810	5		\$ 100 s	100
If over \$100.00 cumulative, please provide:			Click Here for Memo	temization
Occupation Employer			a tat meme	·
usiness Address				
Type of Contribution: 2 Direct Loan from	n a person	Fund Raiser		
age <u>7</u> of <u>73</u>	Grand To (Complete or	Page Subtotal stal of All Schedules 4A last page of Schedule)	Enter this total on line 3a of Summary Page	



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

2. Committee Name	BS OF CAUCATION
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:  BOLL Man, Lynn  531 '/2 W. MIDDLE  Chelcla, MI 48118  5. If over \$100.00 cumulative, please provide:	\$
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2  Name & Address:  BOYLE, MACK + WENDY  4540 AUGUSTA CT  AND ACCUSTA CT  MI 48108  5. If over \$100.00 cumulative, please provide:	\$ 25 \$ 25  Click Here for Memo Itemization
Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	Control of World Refuzeron
Name & Address:  Brilloff, Sarah  775 Dellwood  Ann Anson, mi 48103  5. If over \$100.00 cumulative, please provide:  OccupationEmployer	\$25\$25_Click Here for Memo Itemization
Contribution #4 Name & Address:  Brigger, Heather  90 12 Emerson or.  Saline, ni 48176  If over \$100.00 cumulative, please provide:  Decupation Employer  usiness Address	\$\$\$\$
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE**

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

BALLOT QUESTION CO	MMITTEE 2. Committee	Name <u>Frends</u>	OF E	o UCATION
Please enter contributors name and address. I middle initial.	f contribution is from an individual, ente	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	4. Date of Receipt 324	<u> </u>	-	
Brown, William 1035 marvin				
1035 Marvin			s <u>20</u>	\$ 20
milan, mi 4 5. If over \$100.00 cumulative, please provide			Click Here for Me	emo Itemization
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Name & Address:	4. Date of Receipt 3-2/-			
Burney, Mary 4319 Miller				
	1 48103		\$ 50	\$ 50
5. If over \$100.00 cumulative, please provide	,		Click Here for Mem	o Itemization
Occupation Er	nployer			
Business Address —				
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Page 9 of 73			on line 3a of	
			Summary Page	



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

Summary Page

2. Committee Name 11 E	DS OF E	sucation
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 Eac Contributor (Through date of receipt)
3. Contribution #1  Name & Address:  Carl Berg, Jean  1902 Incle pendence		
1902 Inde perdence	\$ _ 30	\$ 50
Ann Arbor, mi 48104  5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		
Business Address	•	
Type of Contribution: 🗴 Direct Loan from a person Fund Raiser		
3. Contribution #2  4. Date of Receipt 3-Z1-11  Name & Address:		
Cleary, Lynn 9400 morten view	\$ 100	s 100
Tay Lor, m; 48180  5. If over \$100.00 cumulative, please provide:		·
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Business Address  Type of Contribution: Loan from a person Fund Raiser		
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COBBLET, LATTY 9081 LOTTE LA		
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bexter, mi 48130  5. If over \$100.00 cumulative, please provide:	Click Here for Memo	Hamata a P
Occupation Director Employer Altarum Institute	Click Here for Meltio	nemization
a A	سوان م	
Susiness Address 3520 Creen Ct CT 200 Ann Araor, mj 24.  Type of Contribution: Direct Loan from a person Fund Raiser	8705	
Contribution # 4 4. Date of Receipt 2.2		
Connors, Ronnie 321 Edward J. ST.		_
Clinton, m. 49236	\$ 50	50
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Grand Total of All Schedules 4A (Complete on last page of Schedule)		
age <u>10</u> of <u>73</u>	Enter this total on line 3a of	



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number \_\_\_

B-2009-004

S. Contribution # 1 Name & Address:  Correctl, Wandy 2950 Groun Clau Ann Arzon, M1 48 My S. If over \$100.00 cumulative, please provide:  Cocupation  Employer  Business Address Type of Contribution # 2 Nore & Address Type of Contribution # 3 Nore & Address Type of Contribution # 4 Nore & Address Type of Contribution # 5 Nore		2. Committee Name <u>P1-le</u>	
S. Contribution # 1  Name & Address:    Address	middie initial.	contribution is from an individual, enter last name, first na	Election Cycle for Eac Contributor (Through
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

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

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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number

B-2009-004

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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

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

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

1. Committee I.D. Number <u>B-208 9-88 Y</u>

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Please enter contributors name and address. If middle initial.		st name, first name,	6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through date of receipt)
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milan, mi 48160	5		\$ _ 700	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Emp	oloyer			
Business Address		***************************************		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
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KILLIPS, DAVID				
IGNI ROLVES			s 99	\$ 99
Cheisea, mi 4811	8			
. If over \$100.00 cumulative, please provide:			Click Here for Mem	Itemization
Occupation Emp	loyer			
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Contribution # 3 4. Name & Address:	Date of Receipt 3-14-11			
Knaslak, Jeff 130× 561 MANCHESTED MI 41 i. If over \$100.00 cumulative, please provide:	9158		\$Click Here for Memo	\$ 50
Occupation Emp	loyer		Chert Flore for Michiga	nomization
usiness Address —				
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LAATSCH, STEPHEN H419 Lake Forest Ann Ar Bon MI 4 If over \$100.00 cumulative, please provide:	18108	<del></del>	\$ 60 s	60
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-7009-804</u>

Summary Page

BALLOT QUESTION	2. Committee Name	SOF EDU	cation
Please enter contributors name and addres middle initial.	ss. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 48-11		
LACKINS, CLIFFOR	ZD		
510 Pearl ST		\$ <u>30</u>	\$ _ 30
5. If over \$100.00 cumulative, please pro	4 <i>8! 9 1</i> vide:	Click Here for Me	emo Itemization
Occupation			
Business Address			
Type of Contribution: X Direct	Loan from a person Fund Raiser		
Contribution # 2     Name & Address:	4. Date of Receipt 3-/3-//		
Leacher, John	,		
602 Jefferson C	en O	\$ 100	\$ 100
5. If over \$100.00 cumulative, please prov	UB vide:	Click Here for Mer	no Itamization
Occupation	Employer	Oncir Here for Mei	no itemization
Business Address			
Type of Contribution: V Direct	Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 3-6-11		
Lewis-LAKIN, Sha 1433 Casston L	wn		
1433 Carston L	216	\$ 100	\$ 100
Chelsea, ml 5. If over \$100.00 cumulative, please prov	2/8/1/8 vide:	Click Here for Men	o Itemization
Occupation	Employer		
Business Address —			
Type of Contribution: X Direct	Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt Z -/ 9-11		
Leyshock, Rich 1008 n. Conbres	ر بر الم	s 200	200
YPSICANTI, MI	4817/	\$ 200	\$ 600
5. If over \$100.00 cumulative, please provi		Click Here for Mem	o Itemization
	Employer WASHTENOW INT. School	Vs	
	ner, Ann Arbor, MI 48103		
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number <u>B-2069-084</u>

BALLOT QUESTION C	OMMITTEE 2. Committee Name Frent	S OF COL	cation
Please enter contributors name and address. middle initial.	If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address:  LINCOLA ADMINIST  8888 WHITTAKES  YPSICANTI, MI 4	18197	\$\$OOClick Here for Mem	\$
5. If over \$100.00 cumulative, please provi	<b>de:</b> Employer		
'	Linployer		
Type of Contribution: X Direct	Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 4411		
LINTON, EDITH 1921 HATCHER CSE ANN ASBOR, MI 5. If over \$100.00 cumulative, please provid	78,00	\$S Click Here for Memo	\$ 58
Occupation	Employer		
Business Address			
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Name & Address:  LI (0 10 5, m A RY  3 13 w Bennett  SAU 10, m, 4817  5. If over \$100.00 cumulative, please provi  Occupation  Business Address	76	\$	\$temization
Type of Contribution:    Direct	Loan from a person Fund Raiser		
Contribution # 4 Name & Address:  LITTLE, POTFICK  170 Fox HUL C  Chef Seq, MI 48  If over \$100.00 cumulative, please provid		\$\$ Click Here for Memo	
DecupationE	mployer		
Type of Contribution: X Direct	Loan from a person Fund Raiser		
age <u>Z1</u> of <u>73</u>	Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number \_\_\_\_

B-2009-004	

BALLOT QUESTION COM	MILIEE 2. Committee Nam	e		
Please enter contributors name and address. If c middle initial.	ontribution is from an individual, enter last	name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4.  Name & Address:  LISICKI, LAUTA  9362 PATTON  LIVONIA, MI  5. If over \$100.00 cumulative, please provide:	Date of Receipt 36-11		\$	\$
Occupation Empl	oyer			
Business Address	Loan from a person	und Raiser		
Name & Address:  LISICKI, LAURA  9363 OA TTON  LIVOMA, MI 48158  5. If over \$100.00 cumulative, please provide:	Date of Receipt 3/1/1		\$	\$ /30
Occupation SUPT. Empl Business Address Z35 SPLACET Type of Contribution: X Direct  3. Contribution #3 Name & Address: LIXEY, Kathler 24 Cedarlake Chelsey, M1 48 5. If over \$100.00 cumulative, please provide:	Date of Receipt 3-6-11	n/ 48/98 nd Raiser	\$50_	\$ 50
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Lovelace, Michael 1945 Timber Tak	Pate of Receipt 4/10/11			\$ <u>//</u>
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Page <u>22</u> of <u>13</u>			190 Enter this total on line 3a of Summary Page	



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

Page

BALLOT QUESTIO	N COMMITTEE 2. Com	mittee Name Fi) ex 7	os of Explation
Please enter contributors name and add middle initial.	ress. If contribution is from an individua	I, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Occupation			Click Here for Memo Itemization
Business Address			
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MAGYAR, James			
3851 Pinenew	Pr		\$ 100 \$ 100
Dexter, m; 4 5. If over \$100.00 cumulative, please pi	181.38		Click Here for Memo Itemization
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age <u>23</u> of <u>73</u>	Gra (Compl	Page Subtotal and Total of All Schedules 4A ete on last page of Schedule	100



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B- 200 9-084

2. Committee Name 1101153	or Obuca	1100
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 3-3-1/		
MASCEL BOICED BO		<b>~</b>
MARCEL BOIRN 9135 HOBEShoe Bend	\$ <u>Zoo</u>	\$ 600
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation AST SUPT. Employer WASHTENOW INT. SCHOOLS Business Address 1819 S. WAGNET, ANN DEROF, MI 48163		
Business Address 1819 5 WAGNET, ANN DIRON MI 48103		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 3-11		
mars Hall, mary		
2700 n. Parker	\$_100	\$ 100
Dutes, MI 48/38 5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address:		
MARTIN, DED FICK 5763 PINE VIEW DF YPSI LANTI, NI 48197 5. If over \$100.00 cumulative, please provide:	\$	\$
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 3-0/-1/ Name & Address:		
MARTIN, JONET		
920 North ST.	. 2.	
mil An, mi 48166  If over \$100.00 cumulative, please provide:	\$ 30	30
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

Committee I.D. Number	3-	200	9-00	Y

BALLOT QUE	STION COMMIT	TEE 2. Comm	ittee Na	ame Fiens	SOF E	DUCATION
Please enter contributors name a middle initial.	and address. If contri	oution is from an individual,	enter la	st name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Matinoch, J 301 n. 6006 5. If over \$100.00 cumulative, p	Tuse Ph M1 4819 Ilease provide:	p			\$ <u>50</u> Click Here for M	\$ <u>50</u>
Occupation						
Business Address						
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Occupation	Employer				Click Here lot ivie	nio itemization
Business Address	Employer					
Type of Contribution: Direct		oan from a person		Fund Raiser		
3. Contribution #3 Name & Address:  McGehel, 50  Go Box 579		of Receipt 3-20-1		·	s <i>Zoo</i>	\$ 200
WIIIS, MI 4 5. If over \$100.00 cumulative, p					Click Here for Mer	
Occupation EDUCATO	Employer	Uncoln Co	1) 80	lidated	Schools	
Business Address <b>\$970</b> Type of Contribution: Direct		er, YesilAi pan from a person		<i>M 1 48/9</i> und Raiser	37	
. Contribution # 4 Name & Address:	4. Date	of Receipt 3-28-	11			
Mearows, Br 410 n. Har 17 SILANT? If over \$ 100.00 cumulative, ple		7198			\$ / 60 Click Here for Mer	\$
Occupation	Employer					•
usiness Address  Type of Contribution: X Dire	ct	Loan from a person		Fund Raiser		
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-7009-004

OF GOCCATION 2. Committee Name FIPADS Please enter contributors name and address. If contribution is from an individual, enter last name, first name. Election Cycle for Each middle initial Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 3-14-11 Name & Address: MEDVED, DI Shore Dr Ann ArBON MI Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Business Address . Type of Contribution: Loan from a person Fund Raiser 3. Contribution #2 4. Date of Receipt Name & Address: Mexicotte, Debra
Zlobo YOST
ANN AKBON, MI 48104
5. If over \$100.00 cumulative, please provide: s 100 Click Here for Memo Itemization Occupation Employer Business Address \_ Type of Contribution: | V | Direct Loan from a person Fund Raiser 4. Date of Receipt 3-2/-// 3. Contribution #3 Name & Address: MICH. Educ ASSOCIATION - PAC

1716 Kendace BLVD CAM SIN 6 MI 48826 r\$100.00 cumulative, please provide:

2,800 \$ 2,000

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Occupation Business Address -

Type of Contribution: # Direct

Loan from a person

Fund Raiser

. Contribution # 4 Name & Address: 4. Date of Receipt

Name & Address:

MISH, Bamela

41304 Ivy wood Lu

2111 mouth. MI 48170

\$ 100

OLY MOUTH 15. If over \$100.00 cumulative, please provide:

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Occupation

Employer

Business Address \_ Type of Contribution: H Direct

Loan from a person

Fund Raiser

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Summary Page

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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

Committee I.D. Number	B-	200	9-00	y

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BALLOT QUESTION COMMI	ITEE 2.	Committee Na	me <u>Ment</u>	S OF C	DUCATION
Please enter contributors name and address. If cont middle initial.	ribution is from an indi	vidual, enter las	st name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Moran, William 632 Honey Suckle	(N	3-2/-1		\$ 58	s 50
m1CPm, m) 48 10 5. If over \$100.00 cumulative, please provide:	0			Click Here for M	emo Itemization
Occupation Employe	er				
Business Address					
Type of Contribution: Direct	Loan from a person		Fund Raiser		
Name & Address:		3-21-11			
Mortous, Kathy 1745 weather Hill Dr	-			s 50	\$ 50
Devrer, MI 48138 5. If over \$100.00 cumulative, please provide:				Click Here for Me	emo Itemization
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MANCHESTEL, MI 481. 5. If over \$100.00 cumulative, please provide:	SP			Click Here for Mer	no Itemization
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3. Contribution # 4 4. Dat Name & Address:	e of Receipt	3-14-1		-	
Nelson, Glenn 1323 S. Forest		•			
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Ann ALBO MI 4 810; If over \$100.00 cumulative, please provide:				Click Here for Me	mo Itemization
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

BALLOT QUESTION C	OMMITTEE 2.	. Committee Name <b>メノタ</b> た	S OF COUL	callow
Please enter contributors name and address middle initial.		ividual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  New man, Sharon 26 48 Roseland Do Ann Aran mi 5. If over \$100.00 cumulative, please provi	48102 ide:	228-11	\$\$ Click Here for Me	
Occupation	Employer			
Business Address  Type of Contribution: Direct	Loan from a persor	n Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt	48-11		
NICKELS, Karen 311 N. WallAce 5. If over \$100.00 cumulative, please provide	- B1U 3 48197 de:		\$\$O	\$s
	Employer			
Business Address				
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3. Contribution # 3 Name & Address:	4. Date of Receipt	3-9-11		
norton, Steven 1717 OUVIA AN	E		\$ 500	\$ 500

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Exec. Employer MICh Presents For Schools Business Address 12/1 Type of Contribution: // Direct Loan from a person Fund Raiser 3. Contribution # 4 Name & Address: 4. Date of Receipt

NOWLAND- MARGOLLS, CIZA BETH 1389 KING GEOGGE BLVD

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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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

Committee i.D. Number	B-2009-004

Page

BALLOT QUESTION (	COMMITTEE 2. Com	nmittee Name <u>Fn end</u>	s of Cy	veation
Please enter contributors name and addres middle initial.	s. If contribution is from an individua	al, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  OUSEN, Steve +  OO BOX 203	4. Date of Receipt 3-2	21-11	. 50	s 50
5. If over \$100.00 cumulative, please pro-	/ <b>8</b> // <b>8</b> vide:		Click Here for Me	¥
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		•	\$ 200	\$ 200
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295 BUTTOUGLE			\$ 17	\$ 16
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Page <u>29</u> of <u>13</u>			Enter this total on line 3a of Summary	



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

1. Committee I.D.

Number	B-	200	9-80	4

BALLOT QUESTION COM	MITTEE 2. Committee	ee Name <u>Frem</u>	os of E	BUCETION
Please enter contributors name and address. If c middle initial.	ontribution is from an individual, en	ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address: QUEENER, CECILIA 46131 VILLAGE GRE	Date of Receipt 3-78-		\$ <u>383</u>	s_38-3
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Occupation HC D/C. Empl Business Address 235 Spencies	oyer Willow Run.	Schools		
Business Address 235 Spencies  Type of Contribution: Direct	Loan from a person	<i>m</i> / <i>48</i> /47 Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 3-14-11			
Rull, Pat 6979 SUN CREAT Salme, MI 48176 5. If over \$100.00 cumulative, please provide:			\$ 20	\$ 28
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908/ Camerable Sayne, m, 4017 5. If over \$100.00 cumulative, please provide:			Click Here for Memo	\$
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Business Address Type of Contribution Direct	Loan from a person	Fund Raiser		
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Rentschler, Lisa 116 Green Valley MILAN MI 48160 i. If over \$100.00 cumulative, please provide:	Do.			\$ 28
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#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COM	2. Committee	Name MIETTO	= OF CX	UCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Name & Address:  Riymlo, Jul	Date of Receipt 4-3-1/		2.4	
218 LYN ANDECT			\$ 300	\$ 200
Ann Arson Mi 40103 5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation President Emp	loyer bertle Educatio	n ASSOCIAN	'on	
Business Address 7558 4th CX	· Dexter, mi			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 3-/3-//			
Rosen-leacher, Beth	7		\$ 100	\$ 100
MILAN, M, 48160 5. If over \$100.00 cumulative, please provide:			Click Here for Mem	
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1300 Campus OKWY			\$ 2,010	. 2 110
• •			\$2,000	\$ 41010
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	Itemization
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SAMUELSON, KIMBERLY	/			
1394 SPY GLASS C	K		\$ 25	
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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

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

Page

BALLOT QUESTION CON	MITTEE 2. Committee	Name Wilnus	OF LAU	cation
Please enter contributors name and address. If a middle initial.	contribution is from an individual, ente	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4 Name & Address:  SATCH WELL, ROBERT 3404 BUBAK	Date of Receipt 218	2-11		
	8105		\$ 108	\$ 100
Ann Arror, mi 4 5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Emp	ployer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	. Date of Receipt 3-14	1-11		
SAUNDERS, PAULA 1394 JUDD RA SAUNE, M 4817; 5. If over \$100.00 cumulative, please provide:	,		\$ 20	\$ 20
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Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
	Date of Receipt 3-22-11	und Ivalser	<u>, 5.</u>	
ScHAFFner, RicHarz	>			
6459 Trial Crown	lane		\$ 50	\$ 50
5. If over \$100.00 cumulative, please provide:	15		Click Here for Memo	Itemization
Occupation Emp	oloyer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 3-2/-1/			
Schumacher, Julie 7619 Kinffisher CT	•		s <i>5</i> 0	s 50
DEXTEN MI 48.  If over \$100.00 cumulative, please provide:	130			
Occupation Empl			Click Here for Mem	temization
Business Address				
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#### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

MITTEE 2. Commit	tee Name <i>Frends</i>	OF CB	veation_
		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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		\$ 150	\$ 150
8103		Click Here for Mo	emo Itemization
loyer WASHTChaw	Int. School	15	
ner, Ann Arva	Dr. MI 4816	23	
Loan from a person	Fund Raiser		
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		s_25	\$ <u>25</u>
19210		Click Here for Me	mo Itemization
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Loan from a person	Fund Raiser		
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Loan from a person	Fund Raiser		
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number \_\_\_

B 2009-004

BALLOT QUESTION	COMMITTEE 2. Committee Name 2000	DS OF EX UCATION
Please enter contributors name and addres middle initial.	s. If contribution is from an individual, enter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  SIMON, BOUG + J  ST37 CIERKIEU  Ann ATBO, M  5. If over \$100.00 cumulative, please pro  Occupation	<i>j 48108</i> vide:	\$\$0 \$\$ Click Here for Memo Itemization
Business Address		
Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2 Name & Address:  Sm! Hh, MAK 107 E MCKAY 5. If over \$100.00 cumulative, please prov Occupation  Business Address  Type of Contribution: #Direct	4. Date of Receipt 3-19-11  Pride:  Employer  Loan from a person Fund Raiser	\$\$
3. Contribution # 3	<u></u>	
Name & Address:  Snapke, Amel 964 Hamleton 5. If over \$100.00 cumulative, please pro Occupation  Business Address  Type of Contribution: HDirect	<7	\$ /5 \$ /5 Click Here for Memo Itemization
. Contribution # 4 Name & Address:	4. Date of Receipt 3/4-//	
SPICKARD, Shan 2150 MILKEY SAUNC, MILKEY If over \$100.00 cumulative, please province Occupation	176 ide:	\$ 30 \$ 30
	Employer	
Susiness Address	Loan from a person Fund Raiser	
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## **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A

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

BALLOT QUESTION COMMITTEE 2. Committee Name 11 end	S OF EDU	cellon
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:  SOING, Court  235 OUD Creek Rd	\$ <u>5</u> 70_	\$ 50
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	mo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2  A. Date of Receipt  2-251		
Stead Christine 575 Hum View BLVD.	s. 200_	\$ 200
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Consultant Employer CSC		
Business Address 350 & CLY Mak, Chica 60, To 40616  Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 3  4. Date of Receipt 3-6-11  Name & Address:		
Stewart, Dorothy 1989 MAnchester Dr	\$ 200	s_200
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	ltemization
Occupation ASSO C Dean Employer UNIV. of Detroit Mercy		
Business Address 4001 W. McNichols, total mi 4822	/	
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 Address: 4. Date of Receipt 43-1/		
TASSIN, MARCO 2882 AUDIA ANN ALBO!, MI 48105 If over \$100.00 cumulative, please provide:	\$ 15	\$ 15
. If over \$100.00 cumulative, please provide:	Click Here for Memo	ltemization
Occupation Employer		, Korriizatior,
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number

BALLOT QUESTION COM	MMITTEE 2	. Committee Name	- Mien	DS OF	ES UCATION
Please enter contributors name and address. If middle initial.	contribution is from an ind	lividual, enter last r	name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Tercala, William 2809 Oak pale D	I. Date of Receipt	44-11		\$ 30	s 30
AMM ALBOG, MI 48				Click Here for N	femo Itemization
5. If over \$100.00 cumulative, please provide:					
OccupationEm	ployer				
Business Address  Type of Contribution:     V   Direct   Direct   V   Direct   V   Direct   D	Loan from a persor	n Fi	Ind Raiser		
3. Contribution #2 Name & Address:  THO MOS, AMDY  1425 W STADIUM  AMN ALBON, MI 4  i. If over \$100.00 cumulative, please provide:	1. Date of Receipt  8 L V 5  8 / 0 - 3	2-25-11		\$ / 00	\$ 108
	ployer				The termination
Business Address					
Type of Contribution:   Direct	Loan from a person	Fun	d Raiser		
3. Contribution # 3 Name & Address;	. Date of Receipt	-14-11		:	
TOM KIE WICZ, DEN 10100 WATNER RC MILAN, MI 4816 5. If over \$100.00 cumulative, please provide:				\$ 20	\$ 26
OccupationEm	ployer				
Business Address  Type of Contribution: Direct	Loan from a person	Func	d Raiser		
TO Dell, KATHY + BO. 36 EAVA NAUGH	Rd	1-11		s //)	s 10
CHELLLA, MI 48/1 If over \$100.00 cumulative, please provide:	2	·		Click Here for Me	,
DecupationEmp	loyer			CHOK TIOTO TOT WIC	THO RETHIZATION
usiness Address					
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

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Please enter contributors name and address. If c middle initial.		<del></del>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:  VANNA TER, Ca & L  9140 PLATT R>	Date of Receipt 3-22-1	1	\$ 108	\$ 100
MILAN, MI 48160 5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Emp	loyer			
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		· · · ·
Name & Address: VANNA TTER, Chesie 1765 Saline-Ann A		<u>/</u>	\$ <u>99</u>	\$ <u>99</u>
SAUNC, m 5. If over \$100.00 cumulative, please provide:	12176		Click Here for Mem	o Itemization
Occupation Emp	loyer			
Business Address	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 4441		·	
WAGNER, BILL + MC 307 S. MACOMB MAN CHESTET, M 5. If over \$100.00 cumulative, please provide:			\$/_OO	\$
Occupation Emp	loyer			
Business Address Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Contribution #4 Name & Address:  WALTON, Brian  1/37 & Maple  Grand Bl Anc, mi  If over \$100.00 cumulative, please provide:	Date of Receipt 2-25-11		\$	\$ 206
Decupation Empl			Click Here for Mem	o Itemization
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Page 31 of 13		Page Subtotal otal of All Schedules 4A in last page of Schedule)	Enter this total on line 3a of Summary Page	



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE 2. Committee Name 21610		
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	Cumulative for     Election Cycle for Each     Contributor (Through     date of receipt)
3. Contribution #1 4. Date of Receipt 3-6-11 Name & Address:		
WATHER Janice 5758 E. SILO RIDGE	\$ 50	\$ 50
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: 1 Direct Loan from a person Fund Raiser	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3. Contribution # 2  Name & Address:  4. Date of Receipt  43-//		
WARPEHOSKI, Charles	. 50	\$ 50
136 Tappan	\$	<b>3</b> -
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Occupation Employer		·
Business Address		į
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 3  Name & Address:  4. Date of Receipt  3-7/1		
Westerman, W. SCOTT 1976 HAMP TON CT. ANN AT BOT, MI 48103 5. If over \$100.00 cumulative, please provide:	\$ 200	\$ 200
Occupation Re Hres Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 3-W11		
Jenkins, Delores 235 Spencer Lane	s_200	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation OFFICE Employer Willow Run Admin. ASSOC.	•	
Business Address 1253 Holmes, 1psilanty my 9199		
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

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

BALLOT QUEST	ION COMMITTEE	2. Committee Name F1ev	1725 OF ES	ucation
Please enter contributors name and a middle initial.	address. If contribution is from an in	ndividual, enter last name, first nam	ne, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  WWTMAN, J	4. Date of Receipt  Cannette	3-14-11	\$ 150	s 150
2535 Meade Ann AfBor, 5. If over \$100.00 cumulative, pleas	<i>MI 4 8105</i> se provide:		Click Here for Me	
Occupation Env Cat of  Business Address 1819 5  Type of Contribution: X Direct	WAGNES, ANN	ASBOC, MI 4810		
3. Contribution # 2 Name & Address:  WOOD H AMS, J.  3415 Yellow.  Ann ALBOY.  5. If over \$100.00 cumulative, pleas	stool pr-		\$ / OS  Click Here for Men	\$/Oo no Itemization
Occupation	EmployerLoan from a persor	Fund Raiser	- -	
3. Contribution # 3 Name & Address:  VomTooB, You  2384 Glen &  River woo De  5. If over \$100.00 cumulative, please  Occupation	se provide:	3-6-11	\$	\$ 160 temization
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
Contribution # 4 Name & Address:  MACTIN, DLAC  5063 PINE VI  VPCILA NT, If over \$100.00 cumulative, please Decupation Susiness Address 1885 Pirect		TO PUBLIC Sch	\$ <u>806</u> Click Here for Men 2012 197	\$906 no Itemization
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

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

BALLOT QUESTION COMM	AITTEE 2. Commi	ttee Name <i></i>	s ar copu	Ca 120n
Please enter contributors name and address. If co middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Zenz, Jim 4220 E. MICHIGAN	Date of Receipt 3-2/	-11	s 20	\$_20
Grass Lake, M1 492 5. If over \$100.00 cumulative, please provide:	240		Click Here for Me	emo Itemization
Occupation Empire	oyer			
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser	·	
Name & Address:	Date of Receipt 3-2/-	1/		
Frayer, Chis			, 20	s 20
13920 RUSHEN.	137		Ψ	
5. If over \$100.00 cumulative, please provide:	,,,,		Click Here for Mer	mo Itemization
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Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 3-14-1	<u>'</u>		•
ZI rinsky, BILL				,
ZI rinsky, BILL 1038 BALD WIN AVE	2.		\$ 500	\$ 500
Ann Arr307, and 4.5. If over \$100.00 cumulative, please provide:	18104		Click Here for Men	no Itemization
Occupation OW NES Emplo	oyer Crazy Wis	DOM BOOKSTO	ore	
Business Address 114 S. Main	ANN ANBOR,	m1 48104		
Type of Contribution: Y Direct	Loan from a person	Fund Raiser		
Name & Address:	ate of Receipt 3-2/-/	<u> </u>		
Zweifler, Andrew 1906 S. University Ann Arbor, mi				
1706 S. Universit	y all		s 20	\$ 20
AMN AFBUT, MI	48109			
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Business Address				
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

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

2. Committee Name Frence OF Crocation

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Name & Address:	SAMULL		0	s 50
20 Heather 126e  Ann Al Bor, ml  5. If over \$100.00 cumulative, please provide:	48104		\$Click Here for Mer	Ψ
Occupation Emplo	oyer			
Business Address	Loan from a person	Fund Raiser		
, hims	Date of Receipt 4/1/1/			
ALWIN, ABBY 117 FAITHEW ANN ATBOT, MI 48 5. If over \$100.00 cumulative, please provide:	°10 3		\$SO	s <u>50</u> o Itemization
Occupation Emplo				
Business Address				
Type of Contribution: Y Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 4/1/	<u>'/</u> .		
Carney, Kevin 119 QXFOP			\$ 25	\$ 25
5. If over \$100.00 cumulative, please provide:	77		Click Here for Memo	o Itemization
Occupation Emplo	oyer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Pate of Receipt 411	-1/		
DIADDONA, PAKA 1631 DICKEN DI	<u>-</u>			
Ann Arbor, MI	4 8103		\$ <u>10</u>	\$ 10
5. If over \$100.00 cumulative, please provide:	7 000		Click Here for Mem	o Itomization
Occupation Emplo	ver		CRCK Here for Meth	o nemzadon
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		1
Page 41 of <u>73</u>	Grand To	Page Subtotal otal of All Schedules 4A n last page of Schedule)	Enter this total on line 3a of Summary	
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## **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A

BALLOT QUESTION CO	MMITTEE 2. Committee	ee Name <i>Fnen</i> D	S OF E	& veation
Please enter contributors name and address. I middle initial.	f contribution is from an individual, en	ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Bates, PAVID 1708 Place ST		1-11	s 50	\$ 50
5. If over \$100.00 cumulative, please provide	48197		Click Here for Me	mo Itemization
Occupation En	nployer			
Business Address	· • • • • • • • • • • • • • • • • • • •			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 4/1/			
BLEVINS, Patrice 1876 Grass Rd SMINE, M, 481  5. If over \$100.00 cumulative, please provide	a		\$ <u>10</u>	\$ <i>10</i>
5. If over \$100.00 cumulative, please provide	:		Click Here for Men	no Itemization
OccupationEr	mployer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:  Bowler, Bost Johnson  And Arbor Moor  5. If over \$100.00 cumulative, please provide	4. Date of Receipt  R  R  11 4.8163 e:		\$SClick Here for Mem	\$
OccupationE	mployer	******		
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
3. Contribution # 4	4. Date of Receipt 4-11-41	•		
Name & Address:  POYCE, Amy  716 S. WASHING  YPSI (Any, M) Y  5. If over \$100.00 cumulative, please provide			\$ / 60 Click Here for Men	\$ 100
Occupation En	nployer	·		
Business Address			•	
Type of Contribution: H Direct	Loan from a person	Fund Raiser		
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number \_\_

BALLOT QUESTION COMMITTEE 2. Committee Name	35 OF CA OCATION
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 91111	
Drew, Mary Anne 8 HAVER HILL COURT Ann ANBON MI 4 8105 5. If over \$100.00 cumulative, please provide:	\$\$ \$\$ Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution: Loan from a person Fund Raiser	
3. Contribution # 2 4. Date of Receipt   Name & Address:	
Ferrell, Kimberrey 1918 Ramblewood ST	\$ 50 \$ 50
YPSICANTI, m) 48197  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution:  Loan from a person  Fund Raiser	
3. Contribution #3 Name & Address:  FIELD LS, MONY 403 E, MONS  Manch Stes, mi 48/59  5. If over \$100.00 cumulative, please provide:	\$ 300 \$ 300  Click Here for Memo Itemization
Occupation Teacher Employer Manchester Schools	i M
Business Address  Type of Contribution: Direct   . 3 &	
3. Contribution #4 Name & Address:  HENDICK, Sanice 1908 Ponyac Traic Ann Arbon M1 48 105.  5. If over \$100.00 cumulative, please provide:	\$
Occupation Employer	
Business Address  Type of Contribution:  Loan from a person Fund Raiser	
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A RALLOT QUESTION COMMITTE

1. Committee I.D. Number

B-2009-004

BALLOT QUESTION COM	MITTEE 2. C	Committee Name	ends of co	bucatton
Please enter contributors name and address. If middle initial.	contribution is from an indivi	dual, enter last name, first na	ame, 6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address: Henes, Patti 5186 Austru SAUNE, MI 40.	Date of Receipt	(1-11-1)	\$ <u>5</u> 0	\$ <u>.50</u>
SAUNE, MI YV. 5. If over \$100.00 cumulative, please provide	176		Click Here for Me	emo Itemization
Occupation Em	ployer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address: HILTON, MATT 3409 Ferry	4. Date of Receipt	11-11	s 20	s 20
Ann Arbut, William is if over \$100.00 cumulative, please provide:	46103		Click Here for Me	mo-Itemization
Occupation Em	ployer			
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:  HOLST, MOUSY POT 1402 FIELD STORE  ANN ASBOC, M1 5. If over \$100.00 cumulative, please provide	4. Date of Receipt  CT  4. 8108	411	\$\$Click Here for Mer	\$ <u>\$ 3</u>
OccupationEn			<u></u>	
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:  HOS PADARUK, B 837 DUNCAN S ANN AKBON, MI 5. If over \$100.00 cumulative, please provide:	48103.	<del>-/1/-</del> 11	\$	\$ <u>// 6</u>
	ployer		Click Here to live	no temzator
Business Address			_	
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Si	100	

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

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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number

B- 2009-004

BALLOT QUESTION COMMITTEE 2. Committee Name Fren	BS OF EDUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, niddle initial.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:  Havatter, Diane  III64 FAR Rd-  MILAN, MI 48160  if over \$100.00 cumulative, please provide:	\$\$ \$\$ Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution: Fund Raiser  Loan from a person Fund Raiser	
S. Contribution #2  4. Date of Receipt  Address:	
Korey, Kim Berlee 6756 Fleming Creek Dr. Superior Tw B. MI 48198 Hover \$100.00 cumulative, please provide:	\$\$
Occupation Employer	
Business Address  Type of Contribution:   Direct   Loan from a person   Fund Raiser	
A. Date of Receipt  4. Date of Receipt  4. Date of Receipt  4////  Lowe, Panela  1715 SCID Church Rd  Ann Ar Bor, M1 49 103  5. If over \$100.00 cumulative, please provide:  Decupation Employer	\$\$\$\$Click Here for Memo Itemization
Rusiness Address  Type of Contribution: Direct Loan from a person Fund Raiser	
Contribution #4 Name & Address:  MC CONNELL, EDWARD  YY33 CANTERBURY  ANN ARBOR, MI Y 8103.  If over \$100.00 cumulative, please provide:	\$ 10 \$ 18
Decupation Employer	Click Here for Memo Itemization
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
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Grand Total of All Schedules 4A complete on last page of Schedule

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

1. Committee I.D. Number B-7009-004

2. Committee Name Frents of Esucation

Please enter contributors name and address middle initial.	. If contribution is from an individual, enter	last name, first name,	6. Amount	Cumulative for     Election Cycle for Each     Contributor (Through     date of receipt)
3. Contribution #1 Name & Address:  MC DONALD, GMF 3 906 Bem BENTON  ANN AN BUN MI  5. If over \$100.00 cumulative, please prov	48103	<u>/</u>	\$ 50	\$ <b>S</b> O
Occupation	Employer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		<u>.</u>
3. Contribution # 2 Name & Address:	4. Date of Receipt			
MCLEAN POLTICO 1010 PEAR ST 4011 CANY, MIS 5. If over \$100.00 cumulative, please provi	K 48197 de:		\$S	\$ 50
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3. Contribution # 3 Name & Address:  Plan nous Denise 7/36 Charcer 7 Ann Arron mi 5. If over \$100.00 cumulative, please prov	40 103 ride:		\$/ SClick Here for Mem	\$
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3. Contribution #4 Name & Address:  Shack, 6 wen 3119 wh 100/e  JACK 501 m1 5. If over \$100.00 cumulative, please provi	4. Date of Receipt 4-12-1	<u>/</u>	\$ 35	\$ 35
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Page <u>46</u> of <u>13</u>		Page Subtotal otal of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of	

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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

1. Committee I.D. Number 13-7009-004

BALLOT QUESTION COMMITTEE 2. Committee Name 2	nends of Ebucation
Please enter contributors name and address. If contribution is from an individual, enter last name middle initial.	e, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1  Name & Address:  SLOTTEN, Koeren  22/2 Chestart crescent	\$ 20 \$ 28
Saune, MI 47/76  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u> </u>
Business Address	
Type of Contribution: Direct Loan from a person Fund R	Raiser
3. Contribution # 2 4. Date of Receipt 4/1/-// Name & Address:	<del></del>
TCHACO, C. P. 14 Scham	\$
whith Me Lake, MI 48189  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: X Direct Loan from a person Fund Ra	aiser
Thomas, Clarence 879 WICK FIELD CT Ann ArBUC, MI 48105 5. If over \$100.00 cumulative, please provide:	\$ 100 \$ 100 Click Here for Memo Itemization
OccupationEmployer	
Business Address  Type of Contribution: Direct Loan from a person Fund Ra	uiser
3. Contribution # 4 4. Date of Receipt 4/1-4	Nova.
Thomas, Eileen 2909 Brock man Blub Ann Arbor, m. 49104. 5. If over \$100.00 cumulative, please provide:	\$ // \$ // 6  Click Here for Memo Itemization
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number 3-2009-009

SCHEDULE 4/ BALLOT QUESTION (		2. Commi	itee Name <u>In en t</u>	S OF	Es wanin
Please enter contributors name and addres middle initial.	s. If contribution is fr			6, Amount	Cumulative for     Election Cycle for Each     Contributor (Through     date of receipt)
3. Contribution # 1 Name & Address:  WMBHT, DayL  176 South ST  chelse, M1 5. If over \$100.00 cumulative, please pro	4. Date of Receip  4  4  4  7  8  1/8  vide:	pt 411-	-//		\$ 100 Memo Itemization
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Business Address  Type of Contribution: Direct	Loan fro	rm a person	Fund Raiser		
3. Contribution # 2 Name & Address: Statler-SHOCK 406 WILDER RX ANN AVBOR MI	4. Date of Recei		<u>/-1/</u>	s 2	\$_2
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3. Contribution # 3 Name & Address:  Be HMBS, Kevin  1465 Fockstone  AMN ATBOT, M)  5. If over \$100.00 cumulative, please pro	4 8108	ipt <u>4-11-1</u>		\$	\$\$ lemo Itemization
Occupation	Employer				
Business Address  Type of Contribution: Direct	Loan from	ı a person	Fund Raiser		
3. Contribution # 4 Name & Address:  COM PTON, GREGO I  13 98 LUCH MUST  YPSILA NTI, MI  5. If over \$100.00 cumulative, please pro	4. Date of Received April 197 48197 vide:	ipt 4141	/	\$ 10	\$\$
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Business Address Direct	Loan fr	rom a person	Fund Raiser		
Page 47 of 23			Page Subtota and Total of All Schedules 4 <i>F</i> lete on last page of Schedule	100	



## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

1. Committee I.D. Number <u>B- 200 9-004</u>

BALLOT QUE	STION COMMIT	TEE 2. Comm	nittee Name	Fnen	MS OF E	Asuca non
Please enter contributors name a middle initial.	nd address. If contrib	ution is from an individual,	enter last na	ime, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  COUPLAND, DAV 2552 n. Man AMA ANBUR; 5. If over \$100.00 cumulative, p	1D XE M1 48103	of Receipt 41	1/-11		\$ Click Here for Mer	
Occupation	Employer				•	
Business Address						
Type of Contribution:	ct:	Loan from a person	Fur	nd Raiser		
3. Contribution # 2 Name & Address:  DUNNELLY, S 3112 NO BLE DEXTER, M1 5. If over \$100.00 cumulative, pl	ulie e pr	of Receipt 4/1-	4		\$	\$s
				·		
Business Address						
Type of Contribution: Direct	L	oan from a person	Fund	l Raiser		
3. Contribution # 3 Name & Address:  KIMMPY, DAN 1596 SCIO R ANN AMBUT  5. If over \$100.00 cumulative, p	186 176e Rd M1 4810	of Receipt 4/1	- <u>  </u>		\$	\$
Occupation						
Business Address Type of Contribution: Direct		oan from a person	Fund	Raiser		
3. Contribution # 4 Name & Address:  MAC ATTHUM, Z  2600 ROSELA  Ann ATT  5. If over \$100.00 cumulative, placed and a contribution	sames no pr	6 Receipt 4-12	2-11		\$ 20 Click Here for Mem	\$ <u>26</u> to Itemization
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

1. Committee I.D. Number \_\_\_

BALLOT QUESTION COM	MITTEE 2. Committee	Name Friend	SOF	Exucation
Please enter contributors name and address. If o middle initial.	ontribution is from an individual, ente	r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Nama P Address:	Date of Receipt 412	2-11	<u> </u>	
Nathans, ELI 1210 CLAGUE AVE AMN AMBOR, MI	48103		\$ 250	
5. If over \$100.00 cumulative, please provide:			Click Here for Me	emo Itemization
Occupation ASSOC POF: Emp Business Address #51 Rich monds	loyer University of	western C	mario	.*
Business Address //5/ Rich monds	Or Lordon, C	ontano Ca	xada	
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 411-11			
PASQUE, PETER 4311 TEXTILE YPSIC ANYI, MI 4819 5. If over \$100.00 cumulative, please provide:	71		\$	\$sno Itemization
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Business Address				•
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Sheets, Cathy 3150 wolverne	7108		s	\$ 10
Ann Arbon mi 45 5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
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Contribution # 4 4. Name & Address:	Date of Receipt 44/11			
SOCATI, AMME 2555 State ST. AMM ARBOY, MI YO	8104		\$ 10	\$
. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Empl	loyer			
Business Address  Type of Contribution:   Direct	Loan from a person	Fund Raiser		
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Page 50 of 13		Fotal of All Schedules 4A on last page of Schedule)		
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Numbe

B-2009 204

SCHED	7LL 4A	
BALLOT QUES	TION COMMITTEE 2. Committee Name	Frends of Coucation
Please enter contributors name and middle initial.	address. If contribution is from an individual, enter last na	me, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt  4/1/1	
Suthercamp, E 492 Everest	<b>S</b> T	\$ 20 \$ 20
MILAN, MI 5. If over \$100.00 cumulative, plea	49160 ase provide:	Click Here for Memo Itemization
Occupation	Employer	
Business Address  Type of Contribution: #Direct	Loan from a person	d Raiser
3. Contribution # 2 Name & Address:	4. Date of Receipt 4/1/1	
1596 SCIO RIT Ann ATBOT 5. If over \$100.00 cumulative, plea Occupation		\$ / \( \begin{align*}
Business Address		
Type of Contribution: Direct	Loan from a person Fund	Raiser
3. Contribution # 3 Name & Address:	4. Date of Receipt 4/10-11	
Think Stretch 339 E. UBERT AMN AVBOR, X 5. If over \$100.00 cumulative, ple	UC 4 #346 n1 48104 ase provide:	\$\$\$\$\$
Occupation	Employer	a-Mora Biblion control to this debilishm
Business Address		
Type of Contribution: HDirect	Loan from a person Fund	Raiser
3. Contribution # 4 Name & Address:	4. Date of Receipt 4/1/1/	-

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

Fund Raiser

Loan from a person

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Page <u>51</u> of <u>73</u>

Type of Contribution: Direct

Occupation

Business Address ,

TUZINSKY, Marci 2005 Brampton CT. Ann ArBor, m. 40103 5. If over \$100.00 cumulative, please provide:



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

SCHEDULE 4/	Α	· · · · · · · · · · · · · · · · · · ·
BALLOT QUESTION (	COMMITTEE 2. Committee Name	rps of Epucation
Please enter contributors name and addres middle initial.	ss. If contribution is from an individual, enter last name, first nam	
3. Contribution # 1 Name & Address:	4. Date of Receipt 4/1-1/	
Whitcomb, Kris 1632 Kirtland Ann Arbon mi	4911 <u>3</u>	\$\$
5. If over \$100.00 cumulative, please pro	ovide:	
Occupation	Employer	
Business Address		
Type of Contribution: Direct	Loan from a person Fund Raiser	
Contribution # 2     Name & Address:	4. Date of Receipt <u>3-15-11</u>	
Bowen, Annett	E Pd	s10 s10
Bowen, Anneth 9188 Moon Saline, M 5. If over \$100.00 cumulative, please pro	M1 4816 vide:	Click Here for Memo Itemization
Occupation		_
Business Address	palety	_
Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution #3 Name & Address:  Berman, Kirac  1177 Pearl ST  1177 Pearl ST  1178 Pearl ST  1178 Pearl ST  1178 Pearl ST	4. Date of Receipt 4/5/11  M 1 48191  ovide:	\$\$\$\$Click Here for Memo Itemization
Occupation	Employer	_
Business Address —		<u>-</u>
Type of Contribution: Direct	Loan from a person Fund Raiser	
Contribution # 4     Name & Address:	4. Date of Receipt 4/16-11	
Anbell, Julie 2139 Rossevelt		\$ 16 \$ 10
5. If over \$100.00 cumulative, please pro	48191 ·	Click Here for Memo Itemization
Occupation	Employer	_
Business Address		_
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Page <u>52</u> of <u>13</u>	•	on line 3a of Summary



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A RALLOT OUESTION COMMITTE

1. Committee I.D. Number

B-2009-004

BALLOT QUESTION CO	DMMITTEE 2. Committee Name	DS OF C	bucarion
Please enter contributors name and address. middle initial.	If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
. Contribution # 1 Name & Address:  ARNOLD, SAMIC	4. Date of Receipt 4-16-11	_	
1209 West moorell	ZAD	\$ <u>20</u>	\$_20
S. If over \$100.00 cumulative, please provi	<i>48197</i> de:	Click Here for Me	emo Itemization
Occupationi	Employer		
Business Address  Type of Contribution:	Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address:  BASSET, Theres  2015 ROCK RID  ANN AN BON, MI  5. If over \$100.00 cumulative, please providence.	98103	\$	\$ /6
Occupation	Employer		
Business Address Type of Contribution:	Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: Blzlau, Anne 10343 Wasnes MILAN, MI 45 5. If over \$100.00 cumulative, please prov	1160	\$S	ss

Loan from a person

48103

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4. Date of Receipt

Employer

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Fund Raiser

Fund Raiser

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Page <u>53</u> of <u>13</u>

Occupation,

Business Address

Contribution # 4
 Name & Address:

Occupation

Business Address \_

Type of Contribution:

Type of Contribution:

BINDER, STEVE HODI PRATTRO.

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

ArBUM

Direct



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number \_\_

BALLOT QUESTION COM		
Please enter contributors name and address. If niddle initial.	contribution is from an individual, enter last name, f	first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
. COMINDATION # 1	Date of Receipt 4-16-11	
Bowles, Danielle 1965 Forth ST		\$ <u>10</u> \$ <u>10</u>
Devter, MI 4 8/2 5. If over \$100.00 cumulative, please provide	<b>3</b> 0 :	Click Here for Memo Itemization
Occupation En	ployer	<del></del>
Business Address  Type of Contribution: Direct	Loan from a person Fund R	aiser
3. Contribution # 2	4. Date of Receipt 4-16-11	·
Bowning, mary	/	s 40 s 40
1729 WINES AMN AJBON 5. If over \$100.00 cumulative, please provide	40103	Click Here for Memo Itemization
OccupationE		·
Business Address  Type of Contribution: Direct	Loan from a person Fund Ra	aiser
3. Contribution # 3	4. Date of Receipt 4-16-11	
BUDDIN, Sharine 5947 PARVIEW		\$ 30 \$ 30
JOSICANTI, MI 4 5. If over \$100.00 cumulative, please provide	<i>8197</i> le:	Click Here for Memo Itemization
Occupation	Employer	
Business Address Type of Contribution: Direct	Loan from a person Fund R	aiser
3. Contribution # 4 Name & Address:	4. Date of Receipt 416-11	
Cain, Toni 8256 GARY A	ve.	s 10 s 10
5. If over \$100.00 cumulative, please provide	4 8185 · e:	Click Here for Memo Itemization
Occupation	Employer	
Business Address	Loan from a person Fund	i Raiser
Type of Contribution: # Direct	Loan nom a person	Page Subtotal 90
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number B-200 9-004
2. Committee Name FNends of Enucation

Please enter contributors name and address middle initial.	ss. If contribution is from an individual, enter last name, first nam	e 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt	1 ( date of 1000.ps)
Cole, Roberta 425 Harris		\$ 10 \$ 16
475 Halls  475 Halls  475 Halls  5. If over \$100.00 cumulative, please pro	42198 ovide:	Click Here for Memo Itemization
Occupation		•
Business Address		
Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2 Name & Address:	4. Date of Receipt 416-11	
Causey, Court ne	2y	s 10 s 10
8340 Park K	1000	
5. If over \$100.00 cumulative, please pro	48138 ovide:	Click Here for Memo Itemization
Occupation	Employer	<del>-</del>
Business Address	Fund Raiser	<del>-</del>
Type of Contribution: HDirect	Edail (16) in a portion	
3. Contribution #3 Name & Address:  CZUCH nowsky,  3386 Gittsu	4. Date of Receipt 4-16-11  Lasisa	
3380 GIHSU	Que Ir.	s 10 s 10
Ann ArBO7  5. If over \$100.00 cumulative, please p	M) 4 8108	Click Here for Memo Itemization
Occupation	Employer	<del>_</del>
Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 4	4. Date of Receipt 4-16-11	
Name & Address:  Duckee, Kend 2115 Board  Ann ArBor,	ra ualk ualk	s <u>10</u> s <u>10</u>
5. If over \$100.00 cumulative, please p	rovide:	Click Here for Memo Itemization
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Page <u>55</u> of <u>13</u>		Enter this total on line 3a of Summary Page



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number

B-2009-004

BALLOT QUESTION COMMITTEE 2. Committee Name	Frenos of Education
Please enter contributors name and address. If contribution is from an individual, enter last in middle initial.	name, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:  EMMENDOFFER, JOANN  516 GOTT ST.	\$ 50 \$ 50
Ann Arbor, MI 4810_3 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	<u> </u>
Business Address  Type of Contribution: Direct Loan from a person	und Raiser
3. Contribution #2  Name & Address:  EnGUSh, Jon 3413 STRAND	\$ <u>5</u> 8 \$ 50
AMM ACBOO MI 48105  If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution: Loan from a person Fu	nd Raiser
3. Contribution # 3 Name & Address:  Georbe, Ramona 1305 Bell mar PL.  Ann Arbor, m1 48103 5. If over \$100.00 cumulative, please provide:	\$ /5 \$ /5 Click Here for Memo Itemization
OccupationEmployer	
Type of Contribution: Direct Loan from a person Fu	nd Raiser
Contribution #4 Name & Address:  Gay, Brenze 2111 ABCOT	
3111 ASCOT AND AND MI 48103  If over \$100.00 cumulative, please provide:	\$ 20 \$ 20 Click Here for Memo Itemization
Occupation Employer	
Type of Contribution: Direct Loan from a person	Fund Raiser
Grand Total	Page Subtotal 135

Page 56 13

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

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## **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A

1. Committee I.D. Number \_

BALLOT QUESTION COM	IMITTEE 2. Committee	e Name <i>Foen</i>	os of Ca	50 Caylow
Please enter contributors name and address. If a middle initial.	contribution is from an individual, ent	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4 Name & Address:	. Date of Receipt 4/1	16-11		
GREDEN, LEIGH 2860 GLADSTONE			s_25	\$ <b>2</b> 5
Ann Arbor, M, 5. If over \$100.00 cumulative, please provide:	48104		Click Here for M	emo Itemization
Occupation Em	ployer			
Business Address	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt 4/lone			
HAFELT, Carol 1500 ArBo New R Ann ArBor, MI 5. If over \$100.00 cumulative, please provide:	48103		\$	\$ 16
Occupation Em	ployer	· · · · · · · · · · · · · · · · · · ·		
Business Address		:		
Type of Contribution: Tipect	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:  Hell man, Janet  7130 Poplar Dr.  YPSILANTI, ML 48 5. If over \$100.00 cumulative, please provide		16-11	\$ /5	\$ 15 mo Itemization
OccupationEm				
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
HOLE FKA, DEBOAH		16-11	\$ 10	. \$ 16
CHELSEA MI 5. If over \$100.00 cumulative, please provide:	48118 .		Click Here for Me	emo Itemization
	ployer			
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Grand Total of All Schedules 4A (Complete on last page of Schedule)

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

Summary Page

BALLOT QUESTION CON	MITTEE 3 Committee	e Name <u>FNend</u>	S OF E	DUCA TION
Please enter contributors name and address. If middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  HOPKINS, Ellew 1465 FOIK STONE CT AMM ACBOC, MI 5. If over \$100.00 cumulative, please provide:  Occupation	48105	16-11	\$	
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
Name & Address:  HUGHES, MATT  2403 PITSFIELD  AND AFBOT, MI  5. If over \$100.00 cumulative, please provide:	<u> </u>	6-11	\$	\$ /6 no Itemization
Type of Contribution: #Direct  3. Contribution #3 Name & Address:  SALGER, Meli & Contribution #3  **Parameter ** Summer First **  **Ann Arbor, **  5. If over \$100.00 cumulative, please provide	48103	Fund Raiser	\$	\$
Occupation Em  Business Address  Type of Contribution: #Direct	Loan from a person	Fund Raiser		
3. Contribution #4 4 Name & Address:  Sarosz, Patti 5369 MArshu Ham Burb Twp, 5. If over \$100.00 cumulative, please provide:	. Date of Receipt 4-16- 4 ND CT MI 4-8189	-1/	\$ / 0	
Occupation Em  Business Address Direct	Loan from a person	Fund Raiser	-	
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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number

B-2009-804

BALLOT QUESTION COM	MITTEE 2. Committee	Name Frends	OF ED	ucation
Please enter contributors name and address. If c middle initial.	ontribution is from an individual, ente	r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	Date of Receipt 4/	6-11		
Johnston, Tyra 610 GOTT ST.			\$ 10	\$
5. If over \$100.00 cumulative, please provide:	8103		Click Here for Me	mo Iternization
Occupation Emp	loyer			
Business Address				•
Type of Contribution: 1 Direct	Loan from a person	Fund Raiser		
3. Contribution #2  Name & Address:  JUPGE, Kristin  6082 Vineyard A  Ann AMBOC M1  5. If over \$100.00 cumulative, please provide:	Date of Receipt 4-16 WE 48108		\$	
Occupation Emp	loyer			
Business Address			·	·
Type of Contribution: #Direct	Loan from a person	Fund Raiser		
Name & Address:  JUSTYNA, Candida 3227 Dunwoodi	Date of Receipt 4/6- R B 4 810 5	<u>-(/</u>	\$Click Here for Mem	\$
OccupationEmp	loyer			
Business Address  Type of Contribution:   Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. Name & Address:	Date of Receipt 4/6-	11		
Keith, Sarah	on 18843 .		\$ 10	\$ <u>10</u>
Occupation Empl	over		Click Here for Men	o Itemization
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Type of Contribution: Direct	Loan from a person	Fund Raiser		
Page <u>59</u> of <u>13</u>		Page Subtotal Total of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of	



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

SCHEDULE 4A		س.	. ^
BALLOT QUESTION C	OMMITTEE 2. Commit	tiee Name <i>Friend</i>	S OF EDUCATION
Please enter contributors name and address middle initial.	. If contribution is from an individual, e	nter last name, first name,	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  Killewald, Barb		16-11	
5186 Green FIELD	_		\$\$
Brish Hon, M.	4 8114 ide:		Click Here for Memo Itemization
Occupation	Employer		
Business Address			
Type of Contribution: Direct	Loan from a person	Fund Raiser	
3. Contribution # 2 Name & Address:  Killips, DAVID	4. Date of Receipt	0-11	00 100
1901 Reeves Re			\$ 73 \$ 172
5. If over \$100.00 cumulative, please provi			Click Here for Memo Itemization
Occupation SUPT.	Employer <u>Chelsea</u> S	chools	_
Business Address 500 WASH	inston, chesse	eg, MI 4811.	
Type of Contribution: Direct	Loan from a person	Fund Raiser	
3. Contribution #3 Name & Address;  KLEIN, Kathryn 631 E. FIRST	4.0.40	<i>&gt;− [  </i>	\$ 10 s 16
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Page 60 of 13		Page Subtota nd Total of All Schedules 4 <i>f</i> ete on last page of Schedule	



## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number

BALLOT QUESTION COMMITTEE 2. Committee Name	news of EDUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name middle initial.	e, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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KLINK, Gena 9121 watercoo- MUNITH	\$\$ <u></u>
67965 Lake, M) 49246 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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LAVER, Shannon	\$10\$18
WSICANH m, 48198 5. If over \$100.00 cumulative, please provide:	
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Type of Contribution: Loan from a person Fund Re	aiser
3. Contribution # 3 4. Date of Receipt 4-16-11 Name & Address:	_
MCDORALD, LAUREL 2882 Burtch	\$ 10 \$ 10
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Page 6/ of 13

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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

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

2. Committee Name Transcriptor Committee Name Tra

BALLOT QUESTION COMMITTEE 2. Committee Name Fren	OS OF EBUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first nam middle initial.	
3. Contribution #1 Name & Address:  Landry, Lavel 315 Zed St, Ann Ayron, MI 48103 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 Name & Address:  Low ther, Leshe  4. Date of Receipt  4/16-11  Low ther, Leshe  4. Date of Receipt  4/16-11	\$\$\$S
3. Contribution #3 Name & Address:  Levine, ELAna 1450 millBrook Trail Amn ArBo mill 48108 5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$\$\$\$Click Here for Memo Itemization
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Page <u>(22</u> of <u>13</u>

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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

<b>BALLOT</b>	QUESTION	COMMITTEE

FRANCISTE STUDIO

	2. Committee Name	DS OF CO	o cano
Please enter contributors name and address. middle initial.	If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt 4/16-11		
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Page 63 of 73		Enter this total	

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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE

2. Committee Name	Frenos	OF	EDUCATION

Please enter contributors name and address. middle initial.	lf contribution is from an individual, en	ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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### **ITEMIZED CONTRIBUTIONS SCHEDULE 4A** BALLOT QUESTION COMMITTEE

BALLOT QUESTION CO	MMITTEE 2. Committee Name <u>Hileno S</u>	OF EDUCATION
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3. Contribution # 1 Name & Address:  MOON, Heather  7625 ARROW WOOT  AMN ANSON, MI 5 5. If over \$100.00 cumulative, please provide	4. Date of Receipt	\$\$
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Business Address  Type of Contribution: Direct	Loan from a person Fund Raiser	
3. Contribution # 2 Name & Address:  Morris, Stephen  260 Brooks ite  Ann Arbo, m;  5. If over \$100.00 cumulative, please provide		\$\$ \$\$ Click Here for Memo Itemization
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Name & Address:  MULICE, DIBORA 3 958 MAJBLE WOO AMA ANSON MI L 5. If over \$100.00 cumulative, please provide	18105 e:	\$ 10 \$ 16
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Business Address Type of Contribution:   Direct	Loan from a person Fund Raiser	
3. Contribution # 4 Name & Address:	4. Date of Receipt 4764	
O' Malley, Ellen 809 FIFTH ST. Ann Arbor, Mi 5. If over \$100.00 cumulative, please provide	48103	\$ 20 \$ 20 Click Here for Memo Itemization
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COM	MITTEE 2. Committe	e Name <i>Frien</i>	S OF G	oucation
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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

B-2009-004 Committee I.D. Number \_\_\_\_

FRENTOS OF EDUCATION **BALLOT QUESTION COMMITTEE** 2. Committee Name Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. Election Cycle for Each Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 4-16-11 Name & Address: Peterson. Amy 3400, millwood Ct. s 10 s 10 48185 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Business Address \_ HDirect Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 2 4. Date of Receipt Name & Address: RAY, Dairia 8349 Lakenew 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 4-16-11 Name & Address: Rowan, Katte BUVD. GEOGETOWN 10 8 10 ACRO MI Ann 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation\_ Business Address -Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 4. Date of Receipt 4-16-11 SADLIER, RALLIGH 10 \$ 10 Ann Arbon mi 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation \_\_ Employer Business Address \_ Type of Contribution: 1 Direct Loan from a person Fund Raiser 40 Page Subtotal Grand Total of All Schedules 4A

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## ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number \_\_\_

B-2009-004

Freeze enter contributors name and address. If contribution is from an individual, onter last name, first name.  6. Amount 7. Curvillatine for Contribution # 1. Date of Receipt 4/6-1/  S. Constitution # 1 Name & Address:  S. ADCH, SUS AM.  318	BALLOT QUESTION COMMITTEE 2. Committee Name Filen	IS OF EDUCATION
Name & Address:  SANCH, SUS AM 318 N. Walkace BUVD.  SpauAnth n. 1 48/97  S. If over \$100.00 cumulative, please provide:  Cocupation  Employer  Business Address  Type of Contribution:  Loan from a person  Employer  Susiness Address  Type of Contribution:  Loan from a person  Fund Raiser  Fund Raiser  Sanc Address  Click Here for Memo Itemization  Cocupation  Loan from a person  Fund Raiser  Click Here for Memo Itemization  Cocupation  Employer  Loan from a person  Fund Raiser  Click Here for Memo Itemization	middle initial.	Election Cycle for Eac Contributor (Through
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Business Address Type of Contribution: Direct   Loan from a person   Fund Raiser  3. Contribution # 3   4. Date of Receipt   4/16-11    SCHAPLER, Nancy   4231   JUDD Pa.   S 10   10    5. If over \$100.00 cumulative, please provide:   Click Here for Memo Itemization    Cocupation   Employer   Fund Raiser    3. Contribution # 3   A. Date of Receipt   4/16-11    Schaper   Address   A. Date of Receipt   4/16-11    SCHAPLER, Name & Address   A. Date of Receipt   4/16-11    SCHAPLER, Name & Address   A. Date of Receipt   4/16-11    SCHAPER   SUSAN   S 9   S 9    If over \$100.00 cumulative, please provide:   Click Here for Memo Itemization    Cocupation   Employer   Susan   48189    If over \$100.00 cumulative, please provide:   Click Here for Memo Itemization    Cocupation   Employer   Susan   Click Here for Memo Itemization    Susiness Address   Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fund Raiser    Type of Contribution: Direct   Loan from a person   Fun	SATCHWELL, STEPHAMIE 2202 RIVENOUX CT.	<b>4</b>
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SChnerder, Susan  11952 n. main st.  Whitmore Lake, mi 48189  Whitmore Lake, mi 48189  Click Here for Memo Itemization  Coccupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	3. Contribution #3 Name & Address:  SCHAFER, Nancy 4231 JUDD Ra.  MILAN M1 48100 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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Grand Total of All Schedules 4A (Complete on last page of Schedule)

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## **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number 3-200 9-004

DALEGI QUESTION CO	2. Committee	Name	s of co	DUCAY 1010
Please enter contributors name and address. middle initial.		r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  Sch netder, Teres  60) w. Stadium  Ann Arbor, Mi  5. If over \$100.00 cumulative, please provide	48103	<del></del>	\$	\$
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	la x		\$	2 2 2
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTEE** 

1. Committee I.D. Number 3-2009

B-2009-004

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BALLOT QUESTION COMMITTEE 2, Committee Name Filent	S OF E	SUCATION
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 Eac Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  Stein Haven, Kelly 1504 E. Bark Pl  Ann Arbor, MI 48104  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$	\$ / / O
Business Address		
Type of Contribution: #Direct Loan from a person Fund Raiser  3. Contribution # 2  Name & Address:  Stokes, Teresa  9242 Reynochs Ct.		
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MILVAN, MI Y8160  5. If over \$100.00 cumulative, please provide:  Occupation Employer	Click Here for Me	emo Itemization
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OccupationEmployer		
Type of Contribution: Loan from a person Fund Raiser		
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

1. Committee I.D. Number

BALLOT QUESTION COMMITTEE 2. Committee Name	FILENDS OF EDUCATION
Please enter contributors name and address. If contribution is from an individual, enter last nam middle initial.	e, first name,  6. Amount  7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  WARR, ANGELA 300 3 CLAWSON AVE  ROYAL OAK, M, 48073  5. If over \$100.00 cumulative, please provide:	\$3 5\$3.5 Click Here for Memo Itemization
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Business Address	Raiser
3. Contribution # 2 Name & Address:  Wells, Usa 8873 Lake way  781 Uant, m;  18 over \$100.00 cumulative, please provide:	\$\$ \$\$ Click Here for Memo Itemization
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3. Contribution #3  Name & Address:  WEST Brocks, Susan  105 9 0 Heim Pd  CHel Seq. m., 4811 P  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Hoirect Loan from a person Fund Ra	
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## **ITEMIZED CONTRIBUTIONS SCHEDULE 4A**

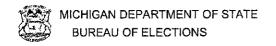
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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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WRIGHT, Dayle 126 SOUTH ST.	\$ 158	\$ 258
Chelseq, M1 48118 5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation DIETITIAN Employer ALLEGIANCE HEALTH		
Business Address 205 n. EAST AVE. JACKSON, M, 49201		
Type of Contribution:  Loan from a person Fund Raiser		
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## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

**BALLOT QUESTION COMMITTER** 

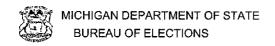
BALLOT QUESTIC		2. Committee Name Ment	S OF E	Lucation
Please enter contributors name and ad middle initial.	dress. If contribution is from an i	ndividual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1     Name & Address:	4. Date of Receipt	4-15-11		T date of receipt)
mars Hall, Mary 2200 n. Park	er –		. 100	\$ 200
Dexter, mi			\$	
5. If over \$100.00 cumulative, please			Click Here for M	emo Itemization
Occupation SUPT.	Employer Dexter	Schools		
Business Address 2714 An	n Arbor ST. 7	sexter, mi 48130	3	
Type of Contribution: Direct	Loan from a pers	son Fund Raiser		
Contribution # 2     Name & Address;	4. Date of Receipt	4-16-11		
PRODOCK, ERIC				
Peacock, Escic 305 IDEAL			\$ 100	\$ 100
mllan, m; 481 5. If over \$100.00 cumulative, please p	6 8 provide:		Click Here for Mer	mo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a persor	n Fund Raiser		
3. Contribution #3 Name & Address: WeID, Corey 13 913 ABECTSEEN	Date of Receipt	4-16-11		
61860TY, MI 48			s 10	\$ 10
5. If over \$100.00 cumulative, please	provide:		Click Here for Mem	a liameterally
Occupation			Click Here for Wern	io itemization
Business Address  Type of Contribution: Direct	Пина			
3. Contribution # 4	Loan from a person	Fund Raiser		
Name & Address:	Date of Receipt	***		
	•			
			\$	\$
. If over \$100.00 cumulative, please pr	ovide:		Click Here for Mem	o Itomization
Occupation	Employer		Chick Flete for Meli	to iternization
Business Address				
Type of Contribution: Direct	Loan from a pers	on Fund Raiser		
		Page Subtotal	210	
		Grand Total of All Schedules 4A		
12 12		(Complete on last page of Schedule)	26,236	
Page 13 of 13			Enter this total on line 3a of Summary	



## ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

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

		or Coucation
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:	4. Purpose:	
Pay Pal. Com	INTERNET BANK FEE	4
7007 7	5. Ballot Proposal: W15 > SPec.	
	EDUC Millage	Date of Expenditure
Check box if expenditure is payment of debt or obligation	County: WASHTENOW	Click for Memo Itemization Type
reported on previous statement	Support Oppose	
Fund Raiser Expenditure # 2	StatewideLocal 4. Purpose:	
Name & Address:	PO BOX RENT	
near Elyakin	5. Ballot Proposal: WIS⊅	
1300 Red Oak	spec. Ed. millage	3-3-11 \$ 40.00 \$222.05
Ann Ar Bor, m1 48103	3/00.00.711/10/70	Date of Expenditure
· 	County: WASHTENaw	Olish for Money the selection T
Check box if expenditure is payment of debt or obligation reported on previous statement	Support Oppose	Click for Memo Itemization Type
Fund Raiser	Statewide Local	
Expenditure # 3	4. Purpose:	
Name & Address:  AFTH THIED BANK	BANK Fee	
2090 W. Stabium	5. Ballot Proposal: WISD	2-1-11 \$ 5,00 \$227,05
2070 00. 5700 81010	spec. Ed. millage	Date of
Ann Ar Bur, m, 48103		Experionale
	County: WASHTEN OU	Click for Memo Itemization Type
Check box if expenditure is payment of debt or obligation reported on previous statement	Support Oppose	•
Fund Raiser	Statewide Local	
Expenditure # 4 Name & Address:	4. Purpose:	
near ElyAKIn	PRINTING	
Name & Address:  Nequ ElyaKin  1800 Reb OAK  Ann ArBor, MI 48103	5. Ballot Proposal: W/SD	3-14-11 \$564.00 \$ 791.05 Date of
1 1 200 MI 48103	Spec. Ed. millage	Expenditure
Ann Hisol	County: WASHTENau	Click for Memo Itemization Type
Check box if expenditure is payment of debt or obligation		
reported on previous statement	Support Oppose	
Fund Raiser	StatewideLocal	<u> </u>
	Sub	total this page 291. US
	Grand Total of (Complete on last pag	Schedules 4B
	(Complete on last pag	Enter this total
. 2		on Line 8a of the Summary
age of		Page



### ITEMIZED DIRECT EXPENDITURES **SCHEDULE 4B**

1. Committee I. D. Number **BALLOT QUESTION COMMITTEE** of Education 2. Committee Name Friends 3. Name and address of person to whom paid 4. State purpose of expenditure. 8. Cumulative 5. Identify the ballot proposal involved. for election Indicate whether supported or opposed. Expenditure # 1 4. Purpose: Name & Address Neal Elyakin 1300 Res Oak Ann Armor, m. 48103 PRINTING 5. Ballot Proposal: WISD \$100800 3-28-11 \$ 217.60 Spec. Ed. millage Expenditure County: WASHTEREW Click for Memo Itemization Type Check box if expenditure is payment of debt or obligation reported on previous statement Support Fund Raiser Statewide Expenditure # 2 4. Purpose: Name & Address: Ann ArBor Center For PRINTING Interentent LIVING 5. Ballot Proposal: WISD 3941 Research Park Dr. Spec. Ed. m. Wage 4-13-11 8 248,00 81256-08 Expenditure ACBOT, MI 48108 Ann County: WASHTE naw Click for Memo Itemization Type Check box if expenditure is payment of debt or obligation Support Oppose reported on previous statement Fund Raiser Statewide Local Expenditure #3 4. Purpose: Name & Address: 5. Ballot Proposal: Date of Expenditure County: Click for Memo Itemization Type Check box if expenditure is payment of debt or obligation Support Oppose reported on previous statement Fund Raiser Statewide Local Expenditure # 4 4. Purpose: Name & Address: 5. Ballot Proposal: Date of Expenditure Click for Memo Itemization Type County: Check box if expenditure is payment of debt or obligation Support Oppose reported on previous statement Statewide Fund Raiser Local Subtotal this page 465,00 Grand Total of Schedules 4B (Complete on last page of Schedule) 256.05 Enter this total on Line 8a of Page 2 of 2 the Summary

B 2009-004