



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

FILED
WASHTENAW COUNTY, MI

FOR OFFICIAL USE ONLY

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

2011 MAY 31 A 9:33

<p>1. Committee I.D. Number B-2009-004</p>		<p>3. This Statement covers From: 4-18-11 To 5-23-11</p>	
<p>2. Committee Name FRIENDS OF Education</p>		<p>4. Committee's Mailing Address REGISTER 410 Jim Magyar, Treasurer 3855 Pineview Drive Dexter, MI 48130 Area Code and Phone 734-971-0277 <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small></p>	
<p>5. Treasurer's Name and Residential Address Jim Magyar 3855 Pineview Drive Dexter, MI 48130 Area Code and Phone 734 971 0277</p>			
<p>6. Treasurer's Business Address Ann Arbor Center For INDEPENDENT LIVING 3941 Research Park Dr. Ann Arbor, MI 48108 Area Code and Phone 734 395 1731</p>		<p>7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) SUE KLIMEX 859 PLANK ST. DUNDEE, MI 48131 Area Code and Phone 734 529 3321</p>	
<p>8. TYPE OF STATEMENT:</p> <p>8a. <input type="checkbox"/> PRE- ELECTION OR 8b. <input checked="" type="checkbox"/> POST- ELECTION</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL</p> <p>Date of Election: 5-3-2011</p>		<p>8c. <input type="checkbox"/> ANNUAL STATEMENT (_____ Coverage Year)</p> <p>8d. <input type="checkbox"/> QUALIFICATION OR <input type="checkbox"/> NON-QUALIFICATION STATEMENT (Required of State-wide Ballot Question Committees Only)</p> <p>Date of Qualification or Non- Qualification: _____</p>	
		<p>8e. <input type="checkbox"/> AMENDMENT TO CAMPAIGN STATEMENT <small>(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)</small></p> <p>8f. <input type="checkbox"/> DISSOLUTION OF COMMITTEE Effective Date of Dissolution _____</p> <p><small>By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.</small></p>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold.</p> <p>If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.</p>			
<p>9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.</p>			
<p>Current Treasurer or Designated Record Keeper SUE KLIMEX Type or Print Name</p>		<p>Sue Klimex Date 5-25-11 Signature</p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

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

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>3,286.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>3,286.00</u>	(18.) \$ <u>29,522.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>3,286.00</u>	(20.) \$ <u>29,522.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>-</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>-</u>	(21.) \$ <u>-</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>22,826.03</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>-</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>-</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>-</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>22,826.03</u>	(22.) \$ <u>24,082.08</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>-</u>	(23.) \$ <u>-</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>22,826.03</u>	(24.) \$ <u>24,082.08</u>
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>-</u>	(25.) \$ <u>-</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>-</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>25,987.72</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>3,286.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>29,273.72</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>22,826.03</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>6,447.69</u>	

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>auDRIDGE, Mary</u> <u>8970 Whittaker</u> <u>YPSICANTI, MI 48197</u>		4. Date of Receipt <u>4-23-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Allen, Sally</u> <u>2224 Applewood Ct.</u> <u>Ann Arbor, MI 48102</u>		4. Date of Receipt <u>4-30-11</u>	\$ <u>50</u> \$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>ARNOLD, Audrey</u> <u>5791 S. Ashford Way</u> <u>Ypsicanti, MI 48197</u>		4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>BAILEY, SUSAN</u> <u>691 Scio Meadows</u> <u>Ann Arbor, MI 48103</u>		4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u> \$ <u>10</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

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Grand Total of All Schedules 4A
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Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
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3. Contribution # 1 4. Date of Receipt 4-30-11
Name & Address:
Bates, Lydia
828 Ash Gray Dr
Ann Arbor, MI 48105
\$ 50 \$ 50
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 4-30-11
Name & Address:
Benczarski, Michael
9572 Crest Line
Plymouth, MI 48169
\$ 50 \$ 50
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 4-27-11
Name & Address:
Brolini, Christina
800 Soule Blvd
Ann Arbor, MI 48103
\$ 10 \$ 10
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 4-23-11
Name & Address:
Borgeson, Carol
3245 Sunny Wood Dr
Ann Arbor, MI 48103
\$ 10 \$ 10
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2009-004
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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial. 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 4-30-11
Name & Address:
Boshoven, John
17719 Old US 12
Chelsea, MI 48118 \$ 25 \$ 25

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 4-30-11
Name & Address:
Bradley Sarah
3105 Kensington
Dexter, MI 48130 \$ 50 \$ 50

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 4-30-11
Name & Address:
Brown, Mari Fran
17325 Ely Rd
Man Chester, MI 48158 \$ 20 \$ 20

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 4-18-11
Name & Address:
BUNTER, Sarah
313 N. Harris
Saune, MI 48176 \$ 10 \$ 10

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>BURKE T, LINDA</u> <u>4250 PEARL COURT</u> <u>DEXTER, MI 48130</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>CATHERMAN, SUSAN</u> <u>1472 CARSTON LN</u> <u>CHELSEA, MI 48118</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>73</u>	\$ <u>73</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>CHRISTENSEN D</u> <u>2785 INDIAN TRAIL</u> <u>PINCKNEY, MI 48169</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>8</u>	\$ <u>8</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>CIEGLO, CATHERINE</u> <u>2621 EMERALD</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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3. Contribution # 1 Name & Address: <u>CLIFFORD, DAVID</u> <u>2201 Delaware Dr</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>DAMRON, MICHAEL</u> <u>44777 OREGON TRAIL</u> <u>OLY MOUTH, MI 48120</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>DOUGLAS, BYRON</u> <u>8553 WINDSOR CT</u> <u>SUPERIOR TWP, MI 48198</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>DOXEY, Kyle</u> <u>1935 INDUSTRIAL</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>4-18-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>EDWARDS, KAYNA</u> <u>440 SHARA</u> <u>CANTON, MI 48107</u>	4. Date of Receipt <u>4-27-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>ELLIOTT, CHERYL</u> <u>2121 WALLINGFORD</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>FURNAS, MICHAEL</u> <u>10194 ASHLEYS MEADOW</u> <u>GRANGER IN 46530</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>GIRBACH, BRYAN</u> <u>333 ANN MARIE</u> <u>MILAN, MI 48160</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>110</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPT</u> Employer <u>MILAN SCHOOLS</u> Business Address <u>100 BIG RED DRIVE MILAN, MI 48160</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Goven, Donald</u> <u>232 Fairhills</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>HANCHAK, Charlene</u> <u>4165 W. Coch Alpine Dr</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>4-26-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>HATHAWAY, STEVE</u> <u>1405 WAKEFIELD</u> <u>ANN ARBOR MI 48103</u>	4. Date of Receipt <u>4-18-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>HENRY, ROBERT</u> <u>10526 Heenan</u> <u>Whitmore Lake, MI 48189</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>KASS, JEFFREY</u> <u>1118 GRANGER</u> <u>ANN ARBOR, MI 48104</u>	4. Date of Receipt <u>4-18-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Kellman, Leslie</u> <u>1526 Hanover</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-26-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Learning From the Heart</u> <u>1201 Snyder</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-18-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>LINCOLN EDUCATION ASSOCIATION</u> <u>8990 WHITTAKER</u> <u>Ypsilanti MI 48197</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>620</u>	\$ <u>970</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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3. Contribution # 1 4. Date of Receipt 4-30-11
Name & Address: LONG, MARGARET
1513 MARTINA AVE
ANN ARBOR MI 48103 \$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 4-30-11
Name & Address: MAYLE BEN, John
9290 wildwood Lake
Whitmore Lake, MI 48189 \$ 50 \$ 50

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 4-30-11
Name & Address: mccalla, craig
1663 oreo CT.
Ann Arbor, MI 48103 \$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 4-23-11
Name & Address: MCCOY, CARL
500 BERKLEY
ANN ARBOR MI 48103 \$ 50 \$ 50

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

300

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

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>McGINN, Jill</u> <u>1715 GLASTONBURG</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>McNally, Beth</u> <u>2700 White Oak</u> <u>ANN ARBOR MI 48103</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Miller, Gregory</u> <u>2601 Oak Hills</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-29-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Miller, Marianne</u> <u>208 Montgomery</u> <u>ANN ARBOR MI 48103</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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105

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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<p>3. Contribution # 1 Name & Address: <u>Miller, Meira</u> <u>1955 IVYWOOD</u> <u>ANN ARBOR, MI 48103</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>4. Date of Receipt <u>4-30-11</u></p> <p>\$ <u>10</u> \$ <u>10</u></p> <p>Click Here for Memo Itemization</p>
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<p>3. Contribution # 2 Name & Address: <u>Mohrlock, Carol</u> <u>1306 PRESCOTT</u> <u>ANN ARBOR, MI 48103</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>4. Date of Receipt <u>4-30-11</u></p> <p>\$ <u>10</u> \$ <u>10</u></p> <p>Click Here for Memo Itemization</p>
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<p>3. Contribution # 3 Name & Address: <u>Osterwisch, Jennifer</u> <u>1515 Montclair PL</u> <u>ANN ARBOR, MI 48104</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>4. Date of Receipt <u>4-18-11</u></p> <p>\$ <u>15</u> \$ <u>15</u></p> <p>Click Here for Memo Itemization</p>
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<p>3. Contribution # 4 Name & Address: <u>Pepper, ELIZABETH</u> <u>3941 Research Park Dr.</u> <u>ANN ARBOR, MI 48108</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>4. Date of Receipt <u>4-26-11</u></p> <p>\$ <u>20</u> \$ <u>20</u></p> <p>Click Here for Memo Itemization</p>
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Page Subtotal

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

2. Committee Name Friends of Education

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Perry, Susan</u> <u>388 Greentree</u> <u>MILAN, MI 48160</u>			
4. Date of Receipt <u>4-23-11</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Peters, Melissa</u> <u>15751 Euclid</u> <u>Allen Park, MI 48101</u>			
4. Date of Receipt <u>4-30-11</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Petzak, Jeff</u> <u>5789 Blue Spruce Dr.</u> <u>Ypsilanti, MI 48197</u>			
4. Date of Receipt <u>4-23-11</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Roberts, Chris</u> <u>507 W. Canell</u> <u>Tecumseh, MI 49286</u>			
4. Date of Receipt <u>4-23-11</u>		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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140

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>POSSI, JANE</u> <u>6670 Heatheridge</u> <u>SALINE, MI 48176</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>SARD, GLEN</u> <u>309 E CROSS</u> <u>YPSILANTI, MI 48198</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>SCHREIBER, Penelope</u> <u>922 Pleasant</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Schroeder, Cheryl</u> <u>2286 Moss Rose Court</u> <u>Ann Arbor MI 48103</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>SONG, AILEEN</u> <u>3450 RIVER GRES</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Stapleton, ROBBIE</u> <u>528 SUNSET</u> <u>ANN ARBOR MI 48103</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>STRITE, JON</u> <u>1019 W. WASHINGTON</u> <u>ANN ARBOR, MI 48103</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>SULLIVAN, SUSAN</u> <u>1823 ARLINGTON BLVD</u> <u>ANN ARBOR MI 48104</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>JACKETT, SHANNON</u> <u>7990 Sharon Hollow</u> <u>Manchester, MI 48159</u>		4. Date of Receipt <u>4-18-11</u> \$ <u>25</u> \$ <u>25</u> Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>THORPE, SCOTT</u> <u>1010 N. CONGRESS</u> <u>YPSILANTI, MI 48197</u>		4. Date of Receipt <u>4-30-11</u> \$ <u>10</u> \$ <u>10</u> Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>TOMAKOWSKI, DIANE</u> <u>9058 Posey Dr.</u> <u>Whitmore Lake, MI 48129</u>		4. Date of Receipt <u>4-23-11</u> \$ <u>25</u> \$ <u>25</u> Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>TURNER, ANNE MAE</u> <u>6314 Winans Lake Rd</u> <u>BRIGHTON, MI 48116</u>		4. Date of Receipt <u>4-30-11</u> \$ <u>10</u> \$ <u>10</u> Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Weaver, Terry</u> <u>158 Garden Court</u> <u>Whitmore Lake, MI 48109</u>	4. Date of Receipt <u>4-30-11</u>	\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Weber, ERIN</u> <u>1221 N. Orange Dr. #314</u> <u>Los Angeles CA 90038</u>	4. Date of Receipt <u>4-28-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Williams, Dawn</u> <u>861 Maximilian Court</u> <u>Chelsea, MI 48118</u>	4. Date of Receipt <u>4-23-11</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>home maker</u> Employer _____ Business Address <u>861 Maximilian Court, Chelsea MI 48118</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>DeKeyser, Tom</u> <u>7811 Winfield Dr.</u> <u>Brighton, MI 48116</u>	4. Date of Receipt <u>4-24-11</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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570

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

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

2. Committee Name FRIENDS OF EDUCATION

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1	4. Date of Receipt <u>5-6-11</u>		
Name & Address: <u>JUNG, SANDY</u> <u>750 SCION Meadows Dr.</u> <u>ANN ARBOR, MI 48103</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 2	4. Date of Receipt <u>5-6-11</u>		
Name & Address: <u>Peoples, Gregory</u> <u>5445 SCOTT CT.</u> <u>YPSICANTI, MI 48199</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 3	4. Date of Receipt _____		
Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 4	4. Date of Receipt _____		
Name & Address:		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal	<u>100</u>
Grand Total of All Schedules 4A (Complete on last page of Schedule)	<u>3,286</u>
Enter this total on line 3a of Summary Page	



**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE**

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

2. Committee Name FRIENDS OF EDUCATION

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>Pay Pal. com</u>	4. Purpose: <u>INTERNET BANK FEES</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u> County: <u>WASH TENAW</u>	<u>5-23-11</u> Date of Expenditure	<u>\$ 18.21</u>	<u>\$1244.20</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>UNIT PACKAGING</u> <u>119 ENTERPRISE DRIVE</u> <u>ANN ARBOR, MI 48103</u>	4. Purpose: <u>Printing + mailing</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u> County: <u>WASH TENAW</u>	<u>4-21-11</u> Date of Expenditure	<u>\$ 6956.00</u>	<u>\$9230.20</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>FIRST IMPRESSIONS PRINTING</u> <u>4109 JACKSON RD.</u> <u>ANN ARBOR MI 48103</u>	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u> County: <u>WASH TENAW</u>	<u>4-21-11</u> Date of Expenditure	<u>\$ 1552.90</u>	<u>\$9983.10</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>UNIT PACKAGING</u> <u>119 ENTERPRISE DRIVE</u> <u>ANN ARBOR, MI 48103</u>	4. Purpose: <u>MAILING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. MILLAGE</u> County: <u>WASH TENAW</u>	<u>4-25-11</u> Date of Expenditure	<u>\$ 4114.60</u>	<u>\$13897.70</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page 12,641.71

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

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

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>Glenn Nelson</u> <u>1323 S. Forest</u> <u>Ann Arbor, MI 48104</u>	4. Purpose: <u>STAMPS, FLYERS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u>	<u>4-25-11</u>	<u>\$269.88</u>	<u>\$416.64</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>Sawicki + Sons</u> <u>1521 W. Lafayette</u> <u>Detroit, MI 48216</u>	4. Purpose: <u>YARD SIGNS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u>	<u>4-25-11</u>	<u>\$4346.00</u>	<u>\$8573.64</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Stones' Phones Inc.</u> <u>41-750 Rancho Las Palmas</u> <u>Rancho Mirage, CA</u> <u>92270</u>	4. Purpose: <u>AUTO CALLS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u>	<u>4-30-11</u>	<u>\$625.86</u>	<u>\$19139.50</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>UNIT PACKAGING</u> <u>119 ENTERPRISE DR.</u> <u>ANN-ARBOR, MI 48103</u>	4. Purpose: <u>DATA PROCESSING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. Ed. millage</u>	<u>5-2-11</u>	<u>\$611.85</u>	<u>\$19751.35</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page 5853.59
 Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

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

2. Committee Name FRIENDS OF EDUCATION

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>FIRST IMPRESSION PRINTING</u> <u>4109 JACKSON RD</u> <u>ANN ARBOR, MI 48103</u>	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u>	<u>5-2-11</u>	<u>\$1208.61</u>	<u>\$20959.96</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>Kim Woods</u> <u>3918 Beech Dr.</u> <u>Ypsilanti, MI 48197</u>	4. Purpose: <u>REFRESHMENTS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u>	<u>5-2-11</u>	<u>\$104.97</u>	<u>\$21064.93</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Kim Woods</u> <u>3918 Beech Dr.</u> <u>Ypsilanti, MI 48197</u>	4. Purpose: <u>REFRESHMENTS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u>	<u>5-6-11</u>	<u>\$28.74</u>	<u>\$21093.67</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>Geraldine Allen</u> <u>3705 LOPE TREE RD.</u> <u>MILFORD, MI 48380</u>	4. Purpose: <u>PIZZA</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u>	<u>5-6-11</u>	<u>\$77.03</u>	<u>\$21170.70</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure Click for Memo Itemization Type		

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1419.35

Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

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

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>UNIT PACKAGING</u> <u>119 ENTERPRISE</u> <u>ANN ARBOR, MI 48103</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>MAILING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-8-11</u> Date of Expenditure	<u>\$ 361.80</u>	<u>\$21532.50</u>
Expenditure # 2 Name & Address: <u>ANN ARBOR, CON</u> <u>301 E. LIBERTY</u> <u>ANN ARBOR, MI 48104</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Ad</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-10-11</u> Date of Expenditure	<u>\$ 1021.02</u>	<u>\$22553.52</u>
Expenditure # 3 Name & Address: <u>WEST LIBERTY INFORMATION</u> <u>3840 MICHAEL RD. N</u> <u>ANN ARBOR, MI 48103</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>MAILING LISTS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-16-11</u> Date of Expenditure	<u>\$ 1130.70</u>	<u>\$23684.22</u>
Expenditure # 4 Name & Address: <u>ANN ARBOR CENTER FOR</u> <u>INDEPENDENT LIVING</u> <u>3941 RESEARCH PARK DR.</u> <u>ANN ARBOR, MI 48108</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>refreshments</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-16-11</u> Date of Expenditure	<u>\$ 79.95</u>	<u>\$23764.17</u>

Subtotal this page 2593.47
Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

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

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: <u>UNIT PACKAGING</u> <u>119 EXTENSIVE</u> <u>ANN ARBOR, MI 48103</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>POSTCARDS</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-18-11</u> Date of Expenditure	<u>\$ 165.27</u>	<u>\$ 23929.44</u>
Expenditure # 2 Name & Address: <u>FIRST IMPRESSION PRINTING</u> <u>4109 JACKSON RD</u> <u>ANN ARBOR, MI 48103</u> <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>PRINTING</u> 5. Ballot Proposal: <u>WISD</u> <u>SP. ED. MILLAGE</u> County: <u>WASHTENAW</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	<u>5-20-11</u> Date of Expenditure	<u>\$ 152.64</u>	<u>\$ 24082.08</u>
Expenditure # 3 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: _____ \$ _____ \$ _____ County: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure	\$ _____	\$ _____
Expenditure # 4 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: _____ \$ _____ \$ _____ County: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Date of Expenditure	\$ _____	\$ _____

Subtotal this page 317.91
 Grand Total of Schedules 4B
 (Complete on last page of Schedule) 22826.03

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