



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 07/22/19 To 08/26/19

1. Committee I.D. Number **B2009-004**

4. Committee's Mailing Address **Friends of Education
PO Box 2109
Ann Arbor, MI 48106**

2. Committee Name
Friends of Education

Area Code and Phone: _____
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.

5. Treasurer's Name and Residential Address
**Neal Elyakin
1300 Red Oak
Ann Arbor, MI 48103**
Area Code and Phone **(734) 417-6094**

7. Designated Record Keeper's Name and Mailing Address
(If the committee has a Designated Record Keeper)
**Sherri Papazoglou
46551 Brookridge
Canton, MI 48187**
Area Code and Phone **(313) 999-5188**

6. Treasurer's Business Address
**1300 Red Oak
Ann Arbor, MI 48103**
Area Code and Phone **(734) 417-6094**

8. TYPE OF STATEMENT:

8a. PRE- ELECTION
OR
 POST- ELECTION

Pre-Election or Post-Election Statement relates to:

PRIMARY
 GENERAL
 SCHOOL
 SPECIAL
 OTHER: _____

Date of Election:
08/06/19

8b.
 FEBRUARY STATEMENT
 APRIL STATEMENT
 JULY STATEMENT
 OCTOBER STATEMENT

8c. ANNUAL STATEMENT
(_____ Coverage Year)

8d:
 Post Petition Sample Filing under MCL 168.483a

(Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition)

8e. AMENDMENT TO CAMPAIGN STATEMENT
(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)

8f. DISSOLUTION OF COMMITTEE REQUEST

Effective Date of Dissolution _____

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.

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. 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.**

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record Keeper Sherri Papazoglou
Type or Print Name Signature

FILED
WASHTENAW COUNTY, MI
SEP - 5 P 12:30
CLERK/REGISTER



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B2009004

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: Neal Elyakin 1300 Red Oak Ann Arbor, MI 48103 <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>Reimb for yard signs</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	07/23/19 Date of Expenditure	\$ <u>837.40</u>	\$ <u>1009.08</u> Click for Memo Itemization Type
Expenditure # 2 Name & Address: Jordan Miller 1701 Hanover Road Ann Arbor, MI 48103 <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>Strategy Consulting/Meetings</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	07/23/19 Date of Expenditure	\$ <u>240.00</u>	\$ <u>1249.08</u> Click for Memo Itemization Type
Expenditure # 3 Name & Address: Lynn Graphics LLC 26354 Van Buren Dearborn Heights, MI 48127 <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>Graphic Design Work</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	08/04/19 Date of Expenditure	\$ <u>360.00</u>	\$ <u>1609.08</u> Click for Memo Itemization Type
Expenditure # 4 Name & Address: Ashley Kryscynski 2765 Windwood Dr., Apt 193 Ann Arbor, MI 48105 <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>Reimb Facebook Ads</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	08/11/19 Date of Expenditure	\$ <u>741.60</u>	\$ <u>2350.68</u> Click for Memo Itemization Type

Subtotal this page

\$2,179.00

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

Enter this total on Line 8a of the Summary Page



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

1. Committee I. D. Number B2009004

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: Brad O'Furey PO Box 970581 Ypsilanti, MI 48197 <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>Design & Consulting Services</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	08/14/19 Date of Expenditure	\$ <u>500.00</u>	\$ <u>2850.68</u> Click for Memo Itemization Type
Expenditure # 2 Name & Address: Margy Long 1513 Martha Ave Ann Arbor, MI 48103 <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>Reimb Printing & Mailing</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	08/25/19 Date of Expenditure	\$ <u>3999.38</u>	\$ <u>6850.06</u> Click for Memo Itemization Type
Expenditure # 3 Name & Address: Margy Long 1513 Martha Ave Ann Arbor, MI 48103 <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>Reimb Google Online Ads</u> 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	08/25/19 Date of Expenditure	\$ <u>1581.78</u>	\$ <u>8431.84</u> Click for Memo Itemization Type
Expenditure # 4 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: <u>High Point Bond Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	_____ Date of Expenditure	\$ _____	\$ _____ Click for Memo Itemization Type

Subtotal this page **\$6,081.16**
 Grand Total of Schedules 4B (Complete on last page of Schedule) **\$8,260.16**

Enter this total on Line 8a of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number B2009004

2. Committee Name Friends of Education

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Huron Valley Area Labor Federation, AFL-CIO 3435 Brentwood Ct. Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation Not Applicable Employer Name & Address: Not Applicable <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>07/29/19</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Facebook, Inc. 1601 Willow Road Menlo Park, CA 94025-1452	\$ <u>50.00</u>	\$ <u>50.00</u>
Contribution #2 Name & Address: Huron Valley Area Labor Federation, AFL-CIO 3435 Brentwood Ct. Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation Not Applicable Employer Name & Address: Not Applicable <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>07/31/19</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Facebook, Inc. 1601 Willow Road Menlo Park, CA 94025-1452	\$ <u>29.18</u>	\$ <u>79.18</u>
Contribution #3 Name & Address: Huron Valley Area Labor Federation, AFL-CIO 3435 Brentwood Ct. Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation Not Applicable Employer Name & Address: Not Applicable <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>08/01/19</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Facebook, Inc. 1601 Willow Road Menlo Park, CA 94025-1452	\$ <u>50.00</u>	\$ <u>129.18</u>

Page Subtotal **\$129.18**

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

Enter this total on
line 6a of
Summary Page



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BUREAU OF ELECTIONS

**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number B2009004

2. Committee Name Friends of Education

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Huron Valley Area Labor Federation, AFL-CIO 3435 Brentwood Ct. Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation Not Applicable Employer Name & Address: Not Applicable <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>08/06/19</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Facebook, Inc. 1601 Willow Road Menlo Park, CA 94025-1452	\$ <u>50.00</u>	\$ <u>179.18</u>
Contribution #2 Name & Address: Huron Valley Area Labor Federation, AFL-CIO 3435 Brentwood Ct. Ann Arbor, MI 48108 If over \$100.00 cumulative, please provide: Occupation Not Applicable Employer Name & Address: Not Applicable <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>08/16/19</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Facebook, Inc. 1601 Willow Road Menlo Park, CA 94025-1452	\$ <u>70.83</u>	\$ <u>250.01</u>
Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address: <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____

Page Subtotal **\$120.83**

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule) **\$250.01**

Enter this total on
line 6a of
Summary Page