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: 05/23/09	To	10/18/09	
1. Committee I.D. Number B-114418		4. Committee's Mailing Addr	PU BOX 6		1 8107-8131	
2. Committee Name						
Citizens Millage Committee		Area Code and Phone (734) If the address in this box is dithe Statement of Organizatio official.	ifferent from the comr	nittee m o this ad	ailing address on Idress by the filing	
5. Treasurer's Name and Residential Address William W. Wa 2020 Wiltshire Ann Arbor, MI	Ct	3				
Area Code and Phone (734) 769-2609					700	
6. Treasurer's Business Address	7.	Designated Record Keeper's (If the committee has a Desig	Name and Mailing Ad	ldress		
Same	1	en J Norton	nated Necord Neeper	,	8	
		Olivia Ave			2	
	Ann .	Arbor, MI 48104			ω .	
Area Code and Phone	Area	Code and Phone (734) 995	-5934		T	
8. TYPE OF STATEMENT:	8c.	ANNUAL STATEMENT	8e. DAMENDMEN STATEME	IT TO C	AMPAIGN =	
8a. PRE- ELECTION		(Coverage Year)	(Complete Item 8	a. 8b. 8c	CO = : ` ` ` c 8d. or 8f to	
OR	8d.	QUALIFICATION	indicate which State	ment is	being amended)	
8b. POST-ELECTION		OR	8f. DISSOLUTION	ON OF	COMMITTEE	
Pre-Election or Post-Election Statement relates to:	□ ;	ON-QUALIFICATION	Effective Da	ate of Di	issolution	
☐ PRIMARY ☑ GENERAL		FEMENT (Required of -wide Ballot Question				
☑ SPECIAL		mittees Only)				
Date of Election: 11/03/09	Dat	e of Qualification or Non- Qualification:	By checking this iten committee has no as including late filing fo of residual funds mu 4B and the Summar	n, I certi ssets or ees. <u>No</u> st be re y Page.	fy that the outstanding debts, te: The disposition ported on Schedule	
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. 4.						
Current Treasurer or Designated Record Keeper William Wade Type or Print Name	<u></u>	William H. D Signature	lade Date	10/2	23/09	

SUMMARY PAGE

1. Committee I.D. Number B-114418

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens Millage Committee RECEIPTS Column I Column II This Period Cumulative for Election Cycle 3. Contributions (3a.) <u>\$</u>21,684.00 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (3b.) \$ NOT APPLICABLE (less than \$20.01 - no Schedule) (3c.) \$ 21,684.00 c, Subtotal of Contributions (18.) \$ _____ (4.) \$ 1,677.56 4. Other Receipts (Schedule 4A-1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$ 23,361.56 (Add Line 3 c + Line 4) (20.) \$ _____ IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a. Itemized In-Kind Contributions (6a.) \$ 400.00 (Schedule 4-IK, Column 7) b. Unitemized (less than \$20.01 each - no Schedule) (6b.) \$ NOT APPLICABLE 7. TOTAL IN-KIND CONTRIBUTIONS (7.) \$ 400.00 (Add Line 6a + Line 6b) (21.) \$ **EXPENDITURES** 8. Expenditures (8a.) \$ 12,931.57 a. Itemized Direct Expenditures (Schedule 4B, Column 7) (8b.) \$_____ b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6) c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7) (8c.) \$_____ d. Unitemized Expenditures (\$50.00 or less-no Schedule) (8d.) \$ (8e.) \$ 12,931.57 e. Subtotal of Expenditures (22.) \$ _____ (9.) \$ _____ 9. Independent Expenditures (Schedule 4B-1, Column 7) (23.) \$ ____ 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) (10.) \$ 12,931.57 (24.) \$ ___ IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8) (11.) \$ _____ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.)\$ ____ a. Owed by the Committee (Schedule 4E) (12b.) \$_ b. Owed to the Committee (Schedule 4E) **BALANCE STATEMENT** 13. Ending Balance of last report filed (13.) \$ 43.09 (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (14.) + 23,361.56(Line 5, Column I, Total Contributions & Other Receipts) (15.) = 23,404.65 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Line 10, Column I, Total Expenditures) (16.) - 12,931.57 ENDING BALANCE (17.) \$ 10,473.08 (Subtract line 16 from line 15)

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



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-114418

Page

2. Committee Name Citizens Millage Committee **BALLOT QUESTION COMMITTEE** + 7. Cumulative for Please enter contributors name and address. If contribution is from an individual, enter last name, first name, 6. Amount Election Cycle for Each middle initial. Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 05/23/09 Name & Address: Dr. Glenn Nelson _s 200 _s 200 1323 S Forest Ann Arbor, MI 48104 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation economic consultant Employer self-employed **Business Address** √ Direct Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 2 4. Date of Receipt 07/15/09 Name & Address: Ms Christine M Stead _s 200 _s 200 515 Huronview Blvd Ann Arbor, MI 48103 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer Computer Sciences Corp. Occupation Consultant **Business Address** ✓ Direct Fund Raiser Type of Contribution: Loan from a person 3. Contribution #3 4. Date of Receipt 07/27/09 Name & Address: **Brit Satchwell** s 100 _s 100 2202 Rivenoak Ct Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_Teacher Ann Arbor Public Schools Employer_ **Business Address** Type of Contribution: 🗸 Fund Raiser Direct Loan from a person Contribution # 4 Name & Address: 4. Date of Receipt 07/28/09 Steven J Norton _s 250 1217 Olivia Ave s 250 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Okno Group Occupation Consultant Employer Business Address _same Fund Raiser Type of Contribution: ✓ Direct Loan from a person \$750.00 Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Page 1 of 35 Enter this total on line 3a of Summary



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE 3. Committee

1. Committee I.D. Number	B-114418
1. Committee i.D. Ivaliabel	

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens N	Aillage Committee	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	ne, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 07/29/09		
Ann Arbor Administrators Association	_{\$} 2500	_{\$} 2500
5. If over \$100.00 cumulative, please provide:	Click Here for M	emo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2		
AAEA 4141 Jackson Rd Ann Arbor, MI 48103	_{\$} 2000	_{\$} _2000
5. If over \$100.00 cumulative, please provide:	O#=1.11=== 6== 3.4=	
Occupation Employer	Click Here for Me	mo itemization
Business Address	-	
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #3 4. Date of Receipt 08/20/09		
Name & Address:		
Bradford Mellor		
2927 Oakdale Drive	_{\$_} 50	_{\$} 50
Ann Arbor, MI 48108		
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
OccupationEmployer	-	
Business Address —		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #4 4. Date of Receipt 09/01/09 Name & Address:		
Donna Lasinski		
4977 St Annes Ct	_s 200	_{\$} 200
Ann Arbor, MI 48103	\$ 200	\$
. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation self-employed Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	stal \$4,750.00	
Grand Total of All Schedules	4A	
(Complete on last page of Sched	·	
Page 2 of 35	Enter this total on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

	Committee	I.D.	Number	B-1'	144	18
-	Commiπee	LU.	Number		·	•

BALLOT QUESTION COMMITTEE 2. Committee Name Citize	ns Millage Committee	2
Please enter contributors name and address. If contribution is from an individual, enter last name, first middle initial.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 09/03/09 Name & Address:	-	
Liz Margolis 1389 King George Blvd. Ann Arbor, MI 48104	_{\$} 75	_{\$} _75
5. If over \$100.00 cumulative, please provide:	Click Here for M	emo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	 r	
3. Contribution # 2 4. Date of Receipt 09/03/09 Name & Address:		
Arleen Song 3480 River Pines Dr An Arbor, MI 48103	_{\$} 150	_{\$} 150
5. If over \$100.00 cumulative, please provide: Occupation Physician Employer Univ of Michigan	Click Here for Me	mo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 09/03/09 Name & Address:		
Todd Roberts 3480 River Pines Dr Ann Arbor, MI 48103	_{\$} 150	_{\$} _150
5. If over \$100.00 cumulative, please provide: Occupation Superintendent Employer AAPS	Click Here for Men	no Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution # 4 4. Date of Receipt 09/08/09 Name & Address:		
Paula Greeno 100 Dhu Varren Rd Ann Arbor, MI 48105	_{\$} _75	_{\$} _75
. If over \$100.00 cumulative, please provide:	Click Here for Men	o Itemization
Occupation Employer		, o no, nazadoji
Business Address	 -	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page S Grand Total of All Schedu (Complete on last page of Schage $\frac{3}{}$ of $\frac{35}{}$		

Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION CO	MMITTEE 2. Comm	_{nittee Name} Citizens Mill	age Committee	
Please enter contributors name and address. I middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	4. Date of Receipt 09/13/09		······································	vale of receipt/
Matthew Toschlog 803 Sycamore PI			_{\$} 100	_{\$} _100
Ann Arbor, MI 48104			Click Here for I	Memo Itemization
5. If over \$100.00 cumulative, please provide	_		Chek Here for I	werno itemization
Occupation Manager En	_{lployer} Quantum Signal L	LC		
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 09/14/09			
Amy Shepherd 725 Arlington Blvd. Ann Arbor, MI 48104			_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Horo for M	ome New to disc
	_{ployer} None		Click Here for M	ento Remization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address; 4	Date of Receipt 09/15/09		****	101
Lewis Fulcher	•		50	
1928 Ridge Ave Ann Arbor, MI 48104			_{\$} 50	_{\$} _50
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Em	ployer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
B. Contribution # 4 4. Name & Address:	Date of Receipt 09/15/09			
Janice & Andy Lieberman				
1504 Shadford Road			_{\$} 50	_s 50
Ann Arbor, MI 48104			\$	\$
. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Decupation Emp	loyer			
Business Address				
Type of Contribution: 🗹 Direct	Loan from a person	Fund Raiser		
	_	Page Subtotal	\$300.00	
1,		d Total of All Schedules 4A te on last page of Schedule)		ļ
rage 4 of 35		,	Enter this total on line 3a of Summary	1
			Page	



ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number	B-114418
T. COMMINGEO I.D. HOSTING	

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens M	illage Committee	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 A. Date of Receipt 09/17/09 Name & Address:		
Jennifer Brogno 1821 Harley Dr. Ann Arbor, MI 48103	_{\$} 35	_{\$} 35
5. If over \$100.00 cumulative, please provide:	Click Here for N	lemo Itemization
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 09/18/09 Name & Address:		7,00
Courtney Kiley 1315 Franklin Blvd Ann Arbor, MI 48103	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 09/19/09 Name & Address:	····	
Dan Ezekiel 523 4th St. Ann Arbor, MI 48103	_{\$} 50	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
OccupationEmployer		
Business Address —		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 4. Date of Receipt 09/19/09 Name & Address:		
Marian Tanau 1407 Ferdon Rd. Ann Arbor, MI 48104	_{\$} 150	_{\$} 150
i. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation musician Employer Detroit Symphony Orchestras		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtot Grand Total of All Schedules 4 (Complete on last page of Schedu	A	



ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number	B-114418

BALLOT QUESTION COM	MITTEE 2. Committ	_{ee Name} <u>Citizens Milla</u>	ge Committee	
Please enter contributors name and address. If c middle initial.	· · · · · · · · · · · · · · · · · · ·		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 09/21/09			
Sara Aeschbach 620 Trego Circle Ann Arbor, MI 48103			_{\$} 50	ş <u>50</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
	loyer			
Business Address		·····		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 09/21/09			
Laurie Barnett 3425 Vintage Valley Rd Ann Arbor, MI 48105			_{\$} _250	_{\$} 250
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
	_{oyer} self-employed			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 4. Name & Address:	Date of Receipt 09/21/09			
Johnson Controls PO Box 2012 Milwaukee, WI 53201			_{\$} 1000	_{\$} _1000
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	o Itemization
OccupationEmp	loyer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		***
. Contribution # 4 4. [Name & Address:	Date of Receipt 09/22/09			
Eleanor Hoag 1719 Waltham Drive Ann Arbor, MI 48103			_{\$} 25	_{\$} 25
If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Emplo	oyer			
Susiness Address				
Type of Contribution: 🗹 Direct	Loan from a person	Fund Raiser		
_{age} 6 of 35		Page Subtotal d Total of All Schedules 4A e on last page of Schedule)	\$1,325.00 Enter this total on line 3a of Summary Page	



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

1. Committee I.D. Num

ber	₿-	1	1	4.	4	1	8	
-----	----	---	---	----	---	---	---	--

Page

2. Committee Name Citizens Millage Committee Please enter contributors name and address. If contribution is from an individual, enter last name, first name, 7. Cumulative for 6. Amount middle initial. Election Cycle for Each Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 09/22/09 Name & Address: Letitia J Byrd 421 Brookside Dr _s 100 100 Ann Arbor, Mi 48105 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation retired **Business Address** Type of Contribution: Loan from a person Fund Raiser 3. Contribution # 2 4. Date of Receipt 09/22/09 Name & Address: Robin Wax 3093 Overridge Drive _s 200 ، 200 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation retired Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 4. Date of Receipt 09/22/09 Name & Address: Norman Herbert 3681 Wagner Ridge Ct. s 250 ູ 250 Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation financial consultant Employer self-employed Business Address Type of Contribution: Direct Loan from a person Fund Raiser Contribution # 4 Name & Address; 4. Date of Receipt 09/22/09 Wendy Correll 2956 Provincial Drive _s 100 100 Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation self employed Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser \$650.00 Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Page 7 of 35Enter this total on line 3a of Summary



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTE

Please and contributors name and address. It contribution is from an individual, enter test name, first name, middle initial. A. Date of Receipt 08/23/09 Name & Address Paul Morrison Ann Arbor, MI 48103 6. If ever \$100.00 cumulative, please provide: Occupation AAEA Executive Director Employer MEA Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. To ever \$100.00 cumulative, please provide: Occupation AAA Address Matt Hilton 4. Date of Receipt 09/25/09 Business Address Type of Contribution: Direct Loan from a person Fund Raiser 4. Date of Receipt 09/25/09 Business Address Type of Contribution: Direct Loan from a person Fund Raiser 5. To ever \$100.00 cumulative, please provide: Occupation eAU cator Business Address Type of Contribution: Direct Loan from a person Fund Raiser 5. To ever \$100.00 cumulative, please provide: Occupation eAU cator Business Address Type of Contribution: Direct Loan from a person Fund Raiser 5. To ever \$100.00 cumulative, please provide: Occupation Click Here for Memo Itemization Click Here for Memo Itemizat	BALLOT QUESTION	I COMMITTI	EE 2. Commi	ittee Name Citizens Milla	ge Committee	<u> </u>
Name & Address: State Sta		ess, If contribu				7. Cumulative for Election Cycle for Each Contributor (Through
Paul Morrison 4141 Jackson 4141 Jackson Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation AAEA Executive Director Employer MEA Business Address Type of Contribution: Virtual Direct Loan from a person Fund Raiser 1		4. Date o	of Receipt 09/23/09			
Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation AAEA Executive Director Employer MEA Business Address John Arbor, MI 48108 3. Contribution: John Abdress: In over \$100.00 cumulative, please provide: Occupation educator Employer Ann Arbor Public Schools Business Address Type of Contribution: John Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation educator Employer Ann Arbor Public Schools Business Address Name & Address: Matt Hilton 4. Date of Receipt 09/25/09 Name & Address Name & Address Type of Contribution: To Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization S 100 s 100 S 100 S 100 S 200 s 200 S 200 S 200 Click Here for Memo Itemization Click Here for Memo Item	Paul Morrison				<u>.</u> 100	_s 100
5. If over \$100.00 cumulative, please provide: Occupation AAEA Executive Director Employer MEA Business Address Type of Contribution: Direct						
Business Address Type of Contribution:		rovide:			Click Here for N	Memo Itemization
Business Address Type of Contribution:			MEA			
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 2 4. Date of Receipt 09/25/09 Name & Address 1. for yet \$100.00 cumulative, please provide: Cocupation # 2 4. Date of Receipt 09/25/09 Server \$100.00 cumulative, please provide: Cocupation # 2 4. Date of Receipt 09/25/09 Russiness Address Type of Contribution: Direct Loan from a person Fund Raiser 1. For yet \$100.00 cumulative, please provide: Click Here for Memo Itemization Click Here for Memo Itemi		Employer _		-		
A. Date of Receipt 09/25/09 Name & Address: Lee Ann Dickinson-Kelley 3371 Breckland Ct. Ann Arbor, MI 48108 S. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization S. Contribution # 3 A. Date of Receipt 09/25/09 Name & Address: Type of Contribution: Click Here for Memo Itemization Click Here for						
Name & Address: Lee Ann Dickinson-Keilley 3371 Breckland Ct. Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation educator Employer Ann Arbor Public Schools Business Address Type of Contribution: A Date of Receipt 09/25/09 Name & Address: Matt Hilton 4. Date of Receipt 09/25/09 Name & Address: Matt Hilton 4. Spilling Meadow Ln. Ypsillanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Employer Ann Arbor Public Schools Business Address Type of Contribution: Occupation Employer Ann Arbor Public Schools Business Address Type of Contribution: I Direct Loan from a person Fund Ralser S 200 S 200 Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Occupation Employer Business Address Type of Contribution: Occupation Employer Business Address Type of Contribution: Fund Ralser Page Subtotal Page Subtotal Fund Ralser Page Subtotal Fund Ralser Page Subtotal Fund Ralser Page Subtotal Fund Ralser Page Subtotal Firer this total on line 3a of	Type of Contribution: ✓ Direct			rund Raiser		
3371 Breckland Ct. Ann Arbor, MI 48108 5. If over \$100.00 cumulative, please provide: Occupation # 3 Name & Address Type of Contribution:		4. Date o	of Receipt 09/25/09			
S. If over \$100.00 cumulative, please provide: Occupation educator Employer Ann Arbor Public Schools Business Address Type of Contribution: □ Direct Loan from a person 4. Date of Receipt 09/25/09 Name & Address: Matt Hilton 4159 Rolling Meadow Ln. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: □ Direct Loan from a person Fund Raiser Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here	3371 Breckland Ct.				_{\$} 100	_{\$} 100
Occupation educator Employer Ann Arbor Public Schools Business Address Type of Contribution:	· ·				00 / 11 4 14	I It imation
Business Address Type of Contribution:			A Aubau Dublia	Coboolo	Click Here for iv	iemo itemization
Type of Contribution:	Occupation educator	Employer _	Ann Arbor Public	Schools		
A. Date of Receipt 09/25/09 Name & Address: Matt Hilton 4159 Rolling Meadow Ln. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Coccupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser A. Date of Receipt 09/27/09 Name & Address: Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Coccupation # 4 Coccupation # 5 Coccupation # 5 Coccupation # 6 Coccupation # 6 Coccupation # 7 Coccupation # 7 Coccupation # 8 Coccupation # 8 Coccupation # 8 Coccupation # 9 Coccupation # 9 Coccupation # 9 Coccupation # 100 Coccupation #	Business Address					
Matt Hilton 4159 Rolling Meadow Ln. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution # 4 A. Date of Receipt 09/27/09 Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser Page Subtotal Grand Totat of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of	Type of Contribution: Virect	Lo	an from a person	Fund Raiser		
Matt Hilton 4159 Rolling Meadow Ln. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser 8. Contribution # 4 Ann Arbor Public Schools Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of		4. Date of	of Receipt 09/25/09			
4159 Rolling Meadow Ln. Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: Direct Ann Arbor Public Schools Business Address: Type of Contribution: Direct Ann Arbor Public Schools Fund Raiser 4. Date of Receipt 09/27/09 Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of						
Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution # 4 Name & Address: Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of					_s 100	_s 100
5. If over \$100.00 cumulative, please provide: Occupation Educator Employer Ann Arbor Public Schools Business Address Type of Contribution: ✓ Direct A. Date of Receipt 09/27/09 Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser Click Here for Memo Itemization Click Here for Memo Itemization Fund Raiser Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of						
Business Address Type of Contribution: Direct	•	provide:			Click Here for M	emo Itemization
Type of Contribution:		Employer_	Ann Arbor Public	Schools		
A. Date of Receipt 09/27/09 Michael Dempsey 2167 Stone Valley Dr Ann Arbor, 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 Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of	Business Address —					
Michael Dempsey 2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation	Type of Contribution: V Direct	Lo	an from a person	Fund Raiser		
2167 Stone Valley Dr Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Type of Contribution: Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of	3. Contribution # 4 Name & Address:	4. Date o	of Receipt 09/27/09			
S. If over \$100.00 cumulative, please provide: Occupation	2167 Stone Valley Dr				s_200	_{\$} 200
Occupation Employer	•	rovide:			Okala Hana San S	taura kamainatian
Business Address Type of Contribution: Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of					Click here for it	sellio iteliazation
Type of Contribution: Direct Loan from a person Fund Raiser	Occupation	Employer _	MARKY	1180		
Page Subtotal \$500.00 Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of				П		
Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of	Type of Contribution: ✓ Direct		Loan from a person	Fund Raiser	1.	
(Complete on last page of Schedule) Enter this total on line 3a of				Page Subtotal	\$500.00	
Enter this total on line 3a of					1	
Page 0 of 50 on line 3a of	0 25		(Comp	olete on last page of Schedule		
Page	Page <u>ð</u> of <u>55</u>				on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1.	Committee I.D. Number	B-114418	

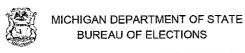
BALLOT QUESTION COM	MITTEE 2. Committee N	_{lame} Citizens Millag	ge Committee	3
Please enter contributors name and address. If c middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 4. Name & Address:	Date of Receipt 09/28/09			
Deborah Beuche 1063 Young Place Ann Arbor, MI 48105			_{\$} 100	\$_100
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation community volunteer Empl	self employed			
Occupation Emp	oyer			
Business Address				
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 09/28/09			
Leah Gunn 1308 East Stadium Blvd. Ann Arbor, MI 48104			_{\$} 100	ş <u>100</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation County Commissioner Empl	Washtenaw County			
	oyer			
Business Address Type of Contribution: Direct	Loan from a norman	Fund Raiser		
	Loan from a person	runa Kaisei		, , , , , , , , , , , , , , , , , , , ,
Name & Address:	Date of Receipt 09/28/09			
Ann Arbor Administrators Associa	ation		0500	F000
			s 2500	_{\$} 5000
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
OccupationEmp	loyer			
	,			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
	Date of Receipt 09/28/09	J		
Name & Address:		,		
Scott Westerman Jr 1926 Hampton Ct Ann Arbor, MI 48103			_{\$} _500	_{\$} _500
5. If over \$100.00 cumulative, please provide:			Click Here for Men	ao Itamization
Occupation retired Empl	oyer		Chick Field to Men	io remization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Page 9 of 35		Page Subtotal otal of All Schedules 4A n last page of Schedule)	\$3,200.00 Enter this total on line 3a of Summary	
			Page	

DEPARTMENT OF STATE REAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number	B-114418	

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens Mills	age Committee	<u> </u>
enter contributors name and address. If contribution is from an individual, enter last name, first name, fire initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 09/28/09 Name & Address:		
Myrna Miller 1050 Scott Pl Ann Arbor, MI 48105	_{\$} <u>25</u>	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here for M	iemo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 09/29/09 Name & Address:		
Christina Perros 2710 Englave Dr	_{\$} 100	s 100
Ann Arbor, MI 48103	Click Here for Me	emo Itemization
5. If over \$100.00 cumulative, please provide:	Click riele to livie	sho hemzaton
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 09/29/09 Name & Address:		
Deborah Tirico 2320 Tall Oaks Dr Ann Arbor, MI 48103	_{\$} 100 ,	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser	······································	
3. Contribution # 4 4. Date of Receipt 09/30/09 Name & Address:		
Griff Mc Donald 3906 Penberton Drive Ann Arbor, MI 48105	_{\$} 150	_{\$} 150
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Investment Advisor Employer Retirement Income Solutions		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	·····	
Page Subtota Grand Total of Ali Schedules 4. (Complete on last page of Schedule Page 10 of 35	Enter this total on line 3a of	
	Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-114418

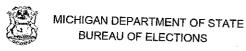
SCHEDULE 4A			
BALLOT QUESTION COMMITTEE 2. Committee Name	Citizens Millag	e Committee	4
Please enter contributors name and address. If contribution is from an individual, enter last namiddle initial.	ame, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 09/30/09 Name & Address:			
Helen Starman 2201 Brockman Blvd		_{\$} 200	_{\$} 200
Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide:		Click Here for Men	no Itemization
Occupation Development Director Employer Interfaith Hospitality Network of Washte	naw County		
Business Address			
	nd Raiser		
3. Contribution # 2 4. Date of Receipt 09/30/09 Name & Address:	19-4-y-1		
Patricia O'Connor 1210 Wisteria #411		_{\$} _50	_{\$} _50
Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide:		Click Here for Memo	o Itemization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person Func	d Raiser		
3. Contribution #3 4. Date of Receipt 09/30/09 Name & Address:			
Susan Chandler 2211 Devonshire Rd. Ann Arbor, MI 48104		§ 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	d Raiser		
3. Contribution #4 4. Date of Receipt 10/02/09	1 1/9/201		
Name & Address:	· 		
Jody Taratuta 832 Sliman Street Ferndale, MI 48220		_{\$} _1000	_{\$} _1000
5. If over \$100.00 cumulative, please provide:		Click Here for Memo	o Itomization
Occupation District Manager Employer Chartwells	***************************************	Click Here to twelli	o itemization
Business Address			
Type of Contribution: 🗸 Direct Loan from a person Fu	und Raiser		
	Page Subtotal	\$1,300.00	
	f All Schedules 4A page of Schedule)		
Page 11 of 35	. • • • • • • • • • • • • • • • • • • •	Enter this total on line 3a of	

on line 3a of Summary Page



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

Please enter contributors name and	address. If contribution is from an individual, e	tee Name Citizens Mil	- 3 - 3 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
middle initial. 3. Contribution # 1		nter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Ea Contributor (Through date of receipt)
Name & Address:	4. Date of Receipt 10/02/09			Tacke or receipt)
Joyce Hunter				
1676 Coburn Dr.			_s 100	_s 100
Ann Arbor, MI 48108			3	φ
5. If over \$100.00 cumulative, pleas	e provide:		Click Here for M	emo Itemization
Occupation Administrator	_{Employer} Ann Arbor Public S	chools		
Business Address				
Type of Contribution: V Direct	Loan from a person			
3. Contribution # 2		Fund Raiser		
Name & Address:	4. Date of Receipt 10/05/09			
William Dunifon 5590 Creekview Drive				
Ann Arbor, MI 48108			_s 250	s 250
				<u> </u>
5. If over \$100.00 cumulative, please			Click Here for Mer	no Itemization
Occupation Consultant	_{Employer} _self-employed			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3	4. Date of Receipt 10/06/09		· · · · · · · · · · · · · · · · · · ·	
Name & Address: Betsy and Ben McCallister				
1021 Belmont Rd				
Ann Arbor, MI 48104			_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please	Provide:			
Doccupation Physician			Click Here for Memo	Itemization
	_{Employer} Michigan Heart			
usiness Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 4 vame & Address:	4. Date of Receipt 10/06/09	=		
Poris H Sperling				
265 Lincolnshire				
nn Arbor, MI 48103			_{\$} _50	_{\$} 50
If over \$100.00 cumulative, please p	rovide:			71
ccupation	Employer		Click Here for Memo	Itemization
siness Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
				· · · · · · · · · · · · · · · · · · ·
		Page Subtotal	\$650.00	
10	Grand To (Complete o	otal of All Schedules 4A		
ge <u>12</u> of <u>35</u>	(Samplete O	r was hade of ocueditie) [Enter this total	
			on line 3a of Summary	
			Summary Page	

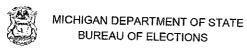


ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-114418

Please enter contributors name and add			2. Commit	tee Name Citizens	Millage Committe	ee •
Please enter contributors name and add middle initial.	ress. If c	ontribution is fron	n an individual, e	nter last name, first na	me, 6. Amount	7. Cumulative for Election Cycle for E Contributor (Through
Contribution # 1 Name & Address:	4.	Date of Receipt	10/06/09			date of receipt)
Dan & Kay Long 1524 Warwick Ct				110	_s 100	_s 100
Ann Arbor, MI 48103						
5. If over \$100.00 cumulative, please p					Click Here for	Memo Itemization
Occupation	Emplo	oyer				
Business Address						
Type of Contribution: ✓ Direct		Loan from a	person	Fund Raiser		
Contribution # 2 Name & Address:	4. [Date of Receipt _	10/06/09			
Margaret & John Faulkner						
2200 Navarre Circle			•		ູ 100	s 100
Ann Arbor, MI 48104					\$	_
i. If over \$100.00 cumulative, please pro	vide:				Click Here for N	femo Itemization
Occupation	Emplo	yer				
Business Address				-		
Type of Contribution: 🗸 Direct		Loan from a pe	rson	Fund Raiser	-	
3. Contribution # 3 Name & Address:	4. D	ate of Receipt 10	/06/09			
Janet & Louis Callaway						
1562 Cross Creek Dr					400	400
Ann Arbor, MI 48108					_{\$} 100	_ \$ 100
i. If over \$100.00 cumulative, please pro	vide:				Clinte Harris & Ad	
Occupation	Employ	er_			Click Here for Me	mo Itemization
usiness Address ——————						
ype of Contribution: 🗸 Direct		Loan from a pers	ion [] =		
Contribution # 4		e of Receipt 10/		Fund Raiser		
lame & Address: Malcom & Juanita Cox			00/09			
11 N Ashley						
nn Arbor, MI 48104					_{\$} 100	_s 100
lf over \$100.00 cumulative, please provi	đe:					Ψ
cupation	Employe	r			Click Here for Me	mo Itemization
siness Address	, , ,	***************************************	"	-		
Type of Contribution: V Direct		Loan from a pe	erson	Fund Raiser		
					0.600.00	T
				Page Subtota	[47 5 5 1 5 5	
19 05			Grand To (Complete o	otal of All Schedules 4/ n last page of Schedule		
_{ge} <u>13</u> _{of} <u>35</u>			, . .	,ge - Concoun	Enter this total	1
					on line 3a of Summary	

Page



SCHEDULE 4A

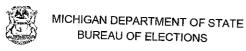
BALLOT QUESTION COMMITTEE

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens Mil	lage Committee	
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
3. Contribution # 1 4. Date of Receipt 10/06/09		date of receipt)
Cheryl & Bruce Elliott		
2121 Wallingford	_s 200	_s 200
Ann Arbor, 48104	\$	3
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 10/06/09 Name & Address:		
Carl A Brauer Jr		
1200 Earhart Rd Ann Arbor, MI	_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	Itemization
Occupation Employer	- WOLL TO TO! WICHTE	nernizatjoji
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 10/06/09 Name & Address:	V	
Charles & Linda Borgsdorf 409 Argo Dr Ann Arbor, MI 48105	ş <u>200</u>	_{\$} _200
5. If over \$100.00 cumulative, please provide: Description Employer	Click Here for Memo I	temization
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 10/07/09 Name & Address:		
Pamela Guenzel		
703 Morton Avenue	s 100	100
Ann Arbor, MI 48104	\$ 100 \$	100
If over \$100.00 cumulative, please provide:	Click Here for Memo I	temization
Education Consultant Employer self-employed		
Isiness Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	\$600.00	
Grand Total of All Schedules 4A		
ge 14 of 35 (Complete on last page of Schedule)	Enter this total	
ge <u>' '</u> of	on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

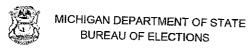
Please onto contribute 2. Committee Name Citizens M	illage Committee	<u> </u>
Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	e, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/07/09		date of receipt)
Kristie Keeton		
211 South Revena Blvd	_s 200	。200
Ann Arbor, MI 48103	\$ 200	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here for N	demo Itemization
Occupation Physician Employer IHA		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 2 An Date of Receipt 10/07/09 Name & Address:		
Kate Share 1225 Fair Oaks Pkwy Ann Arbor, MI 48104	_{\$} _100	_{\$_} 100
5. If over \$100.00 cumulative, please provide:		
Occupation Nutritionist Employer The Corner Health Center	Click Here for Me	emo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Variation 4. Date of Receipt 10/07/09 4. Date of Receipt 10/07/09		
Cynthia Page Bogen 1081 Bandera Dr Ann Arbor, MI 48103	_{\$_} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	Click Here for Men	no Itemization
Business Address —————		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 4 Name & Address: 4. Date of Receipt 10/08/09		
Johnson Brothers Construction		
209 South Fourth Ave Ann Arbor, MI 48104	s 400	_{\$} 400
If over \$100.00 cumulative, please provide:	\$	\$
ccupationEmployer	Click Here for Mem	o Itemization
usiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	\$750.00 Enter this total on line 3a of Summary Page	



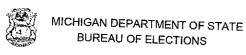
Please enter contributors name and address. If contribution if the second second in the second secon	Illage Committe	e <u></u>
Please enter contributors name and address. If contribution is from an individual, enter last name, first name and address. If contribution is from an individual, enter last name, first name and address. If contribution is from an individual, enter last name, first name and address. If contribution is from an individual, enter last name, first name and address.	e, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
Name & Address: 4. Date of Receipt 10/08/09		date of receipt)
Dale Magee		
621 Sunset	_{\$} 50	_s 50
Ann Arbor, MI 48103	\$	- \$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 2 Name & Address: Violet Loan from a person Fund Raiser 4. Date of Receipt 10/08/09		
Joyce & George Schlecht		
1818 Waltham	_s 150	ູ 150
Ann Arbor, MI 48103	\$	- \$ 100
. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		Sino Remization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
. Contribution # 3 4. Date of Receipt 10/08/09		
Lola & Lee Jones I325 Pepper Pike Ann Arbor, MI 48105 If over \$100.00 cumulative, please provide: Docupation Employer	\$ 100	\$ 100
usiness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 10/09/09		<u> </u>
ristin E. Johnson 655 Deake St	75	
nn Arbor, MI 48108	_{\$} _75	_{\$_} 75
lf over \$100.00 cumulative, please provide:	Official	
cupation Employer	Click Here for Mem	o Itemization
siness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		,
Page Subtotal	\$375.00	
Grand Total of All Schedules 4A	70.0.00	
c 16 of 35 (Complete on last page of Schedule)		
e · · · of · · · of · · · · · · · · · · ·	Enter this total on line 3a of	
	Summary Page	



	2. Committee Name Citizens Mills	age Committee	±
	address. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
Contribution # 1 Name & Address:	4. Date of Receipt 10/09/09		date of receipt)
Laurita Thomas 14 Eastbury Court Ann Arbor, MI 48105		_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, pleas	an manufal.	Click Here for Me	
Occupation Human Resource	es provide: Employer U of M	Click Hele tot Me	mo itemization
Business Address			
Type of Contribution: Direct	Loan from a person Fund Raiser		
Contribution # 2 Name & Address:	4. Date of Receipt 10/09/09	****	. <u>. </u>
Theresa & Bradford Angeli	ini		
1315 Beechwood Dr Ann Arbor, MI 48103		\$ <u>100</u>	_{\$_} 100
5. If over \$100.00 cumulative, please	provide:	Oliver to the	
Occupation	Employer	Click Here for Memo	Itemization
Business Address			
Type of Contribution: V Direct	Loan from a person Fund Raiser		
Contribution # 3 Name & Address:	4. Date of Receipt 10/09/09		
Doug & Mary Kelley 910 Sunset Rd Ann Arbor, MI 48103		s 25	_s 25
			D
5. If over \$100.00 cumulative, please	(Click Here for Memo I	Itemization
Occupation	Employer		
Business Address — ✓ Direct			
	Loan from a person Fund Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 10/09/09		· · · · · · · · · · · · · · · · · · ·
Richard & Nancy Darnell 1001 Pomona Rd		40	10
Ann Arbor, MI 48103		<u> </u>	10
If over \$100.00 cumulative, please pr occupation	C	Click Here for Memo I	temization
usiness Address	Employer		
Type of Contribution: V Direct	Loan from a person Fund Raiser		
	, and reduct		
	<u>1</u>	\$235.00	
17 00	Grand Total of All Schedules 4A (Complete on last page of Schedule)		
age <u>17</u> of <u>35</u>	E	nter this total	
	Si	on line 3a of ummary age	



Please enter contributors name and addres middle initial.	2. Committees in from a first to the second	ee Name Citizens Mi	iiage Committe	e <u>B</u>
		ter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
Contribution # 1 Name & Address:	4. Date of Receipt 10/12/09			date of receipt)
Eileen Freed				
2575 Bedford Road			_{\$} 35	_{\$} 35
Ann Arbor, MI 48104			\$	\$
If over \$100.00 cumulative, please prov	ide:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: VDirect	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address;	4. Date of Receipt 10/12/09			
Madeline Drake				
1421 Culver			_s 50	_s 50
Ann Arbor, MI 48103			Φ	3
. If over \$100.00 cumulative, please provid	le:		Click Here for M	lemo Itemization
Occupation	Employer			iomo (iomizago);
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
. Contribution # 3 Name & Address:	4. Date of Receipt 10/13/09	T and t aloo		
Sheila Carpenter 3490 Oak Hollow Dr Ann Arbor, MI 48103			_{\$} 150	_{\$} 150
. If over \$100.00 cumulative, please provide Accupation_CONSUITANT E	_{le: _{mployer}Fidelity Investments}		Click Here for Me	mo Itemization
usiness Address ype of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 4 ame & Address:	4. Date of Receipt 10/13/09	J. and reason		
athy Shakespeare	-			
06 N Revena Blvd			150	150
nn Arbor, MI 48103			_{\$} 150	_{\$} _150
If over \$100.00 cumulative, please provide:			Click Here for Me	Mo Itemization
cupation Assistant Professor of Accounting En	nployer University of Michigan	<u>1</u>		TO TELLISARON
ype of Contribution: 🗸 Direct	Loan from a person	Fund Raiser Page Subtotal	\$385.00	
e 18 of 35	Grand To (Complete on	tal of All Schedules 4A last page of Schedule)	Enter this total on line 3a of Summary	
			Summary Page	



Please enter contributors name and address. If contribution is from an individual, ente middle initial.	Name Citizens Mii	llage Committe	ee <u>n</u>
	r last name, first name,	6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/13/09			date of receipt)
George Schumacher 1408 Bardstown Trail Ann Arbor, MI 48105		_{\$} _35	_{\$} 35
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer		Onor Tiele 301	wello remization
Business Address			
Type of Contributions (/p)			
3. Contribution # 2 4 Date of Receipt 40/40/00	Fund Raiser		
Name & Address: 10/13/09 Douglas D Freeth			
2128 Melrose Ave Ann Arbor, MI 48104		_{\$} 100	_{\$_} 100
5. If over \$100.00 cumulative, please provide:			
Occupation		Click Here for M	emo Itemization
Business AddressEmployer			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address: 4. Date of Receipt 10/14/09	runu raiser	·	
Kate Higgins 1511 Morton Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide:		\$ 10 Click Here for Mer	\$ 10
OccupationEmployer			
usiness Address Type of Contribution: Direct Loan from a person	und Raiser		
Contribution # 4 Name & Address: 4. Date of Receipt 10/14/09			
Craig Beery 1531 N Shore Vhitmore Lake, MI 48189		_{\$_} 35	_{\$_} 35
If over \$100.00 cumulative, please provide:		Click Word for Ma-	
coupation Employer		Click Here for Men	no itemization
siness Address			
Type of Contribution: V Direct Loan from a person	Fund Raiser		
Grand Total (Complete on las	of All Schedules 4A st page of Schedule)	\$180.00	



Please enter contributors name and address. If contribution is from an individual, enter last name, first middle initial.	- minde committe	
	name, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/14/09		date of receipt)
Erin Borges		
475 Hollywood Drive	20	20
Saline, MI 48176	_{\$} <u>20</u>	
5. If over \$100.00 cumulative, please provide:	Click Here for N	Viemo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	-	
Contribution # 2 4. Date of Receipt 10/14/09		
Kenneth Weesterman		
715 Granger Ave	_{\$} 99	_{\$} 99
Ann Arbor, MI 48104	\$	\$
If over \$100.00 cumulative, please provide:	Click Harrista	
DecupationEmployer	Click Here for Me	emo Itemization
usiness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Contribution #3		
lame & Address: /illiam F Brinkerhoff		
O11 Lincoln Ave		
nn Arbor, MI 48104	_{\$} 300	s 300
If over \$100.00 cumulative, please provide:		
Managara	Click Here for Mem	o Itemization
cupation_Ivianagement Employer_Cerenis Therapeutics		
siness Address ———————————————————————————————————		
pe of Contribution: Direct Loan from a person Fund Raiser	-	
Contribution # 4 4. Date of Receipt 10/14/09		
ck & Rita Nowland		
22 Alpine	4 = =	
n Arbor, MI 48108	_{\$_} 100	_{\$} 100
over \$100.00 cumulative, please provide:		
eupation retired Employer	Click Here for Mem	o Itemization
iness Address		
ype of Contribution: ✓ Direct Loan from a person Fund Raiser		1
Page Subt	total \$519.00	
	L 1	
Grand Total of All Schedules (Complete on last page of Schedules)	4A dule)	
20 of 35	Enter this total	
	on line 3a of Summary	
	Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

Please enter contributors name and address. If contribution is from an individual, enter last name, first name	e, 6. Amount	
	e, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution #1 4. Date of Receipt 10/14/09		date of receipt)
Herb & Carol Amster		
2601 Heatherway	_s 250	ູ 250
Ann Arbor, MI 48104	\$ 200	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	mo Itemization
Occupation Consultary Employer Self-employed		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 2 Name & Address: 4. Date of Receipt 10/14/09		
Judie & Jerry Lax		
1015 Berkshire	_s 100	_s 100
Ann Arbor, MI 48104	3	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	Itemization
Occupation GHorney Employer		THE CHIEF THE CH
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 10/14/09 Name & Address:		
Nancy & Phil Margolis		
228 Riverview Dr	400	4
Ann Arbor, MI 48104	\$_100	_{\$} _100
5. If over \$100.00 cumulative, please provide:		
Occupation Shysician Employer Chir. of Michigan	Click Here for Memo I	temization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 10/14/09		
Jeffrey Irwin		
2542 Bellwod Ave	400	
Ann Arbor, MI 48104	\$ 100 \$	100
If over \$100.00 cumulative, please provide:	Olivia I taman e a a a a a	
Occupation Co. Commissionar Employer Lashtonaw Co.	Click Here for Memo It	temization
usiness Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal	\$550.00	
	Ψ330.00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)		
ge 21 of 35 (Complete on last page of Schedule)	Enter this total	
	on line 3a of Summary Page	

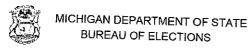


ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

Please enter contributors name and address 15	Citizens Millage Committee	
Please enter contributors name and address. If contribution is from an individual, enter last n middle initial.	ame, first name, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/14/09		date of receipt)
Nicole Brittis		
2818 Walnut Ridge Drive	_s 150	ູ 150
Ann Arbor, MI 48103	\$ 100	* 130
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation homemaker Employer		
Business Address		
Type of Contribution: / Dis	.15	
3. Contribution # 2 Name & Address: 4. Date of Receipt 10/14/09	nd Raiser	
Anthony A Derezinski		
1345 Glendaloch Circle Ann Arbor, MI 48104	_{\$} _100	_{\$} _100
5. If over \$100.00 cumulative, please provide:	-	
Occupation retired Employer	Click Here for Mem	o Itemization
Business Address	······································	
Type of Contribution: Direct Loan from a person Fund	Raiser	
3. Contribution # 3 4. Date of Receipt 10/14/09 Name & Address:		
Dale E Heikkinen		
1914 Wayne St	s 100	_{\$} 100
Ann Arbor, MI 48104	\$ 100	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	Itemization
Docupation Piano technician Employer self employed		
usiness Address		
Type of Contribution: ✓ Direct Loan from a person Fund R		
Contribution # 4 Name & Address: 4. Date of Receipt 10/14/09		
Ruth Moscow-Cohen		
101 Berkshire Rd	400	400
nn Arbor, MI 48104	\$ <u>100</u> \$	100
If over \$100.00 cumulative, please provide:	Click Here for Memo	14
ccupation Clinical social worker Employer self-employed	Ottow Liete 101 Mettin	Remization
isiness Address	· · · · · · · · · · · · · · · · · · ·	
Type of Contribution: 🗸 Direct Loan from a person Fund	Raiser	
	Page Subtotal \$450.00	
Grand Total of All		
ge 22 of 35 (Complete on last pag	re of Schedule)	
ge of	Enter this total on line 3a of	
	Summary Page	



Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	lillage Committe	e 5
	e, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/14/09		date of receipt)
Melinda & Wayne Colquitt 1908 Austin	100	_ε 100
Ann Arbor, MI 48104	_{\$} 100	_ \$
5. If over \$100.00 cumulative, please provide:	Click Here for !	Memo Itemization
Occupation retired Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 10/14/09		
Kate & Howard Markel		
1522 Granger Ave Ann Arbor, MI 48104	_{\$} _100	_{\$} 100
If over \$100.00 cumulative, please provide:	Clink Ham & te	
Occupation Grants officer Employer McGregor Fund	Click Here for Me	emo Itemization
usiness Address		
ype of Contribution:		
Contribution # 3 4. Date of Receipt 10/14/09		
eter & Sarah Allen 224 Applewood Ct nn Arbor, MI 48103	ş 200	_{\$} _200
If over \$100.00 cumulative, please provide: Coupation Developer Employer self employed	Click Here for Men	no Itemization
siness Address		
pe of Contribution: V Direct Loan from a person Fund Raiser		į
Contribution # 4 4. Date of Receipt 10/14/09		
nnifer A Williams 35 Oakleigh Place n Arbor, MI 48103		
Over \$100.00 aumulati	\$ 200	_{\$} _200
over \$100.00 cumulative, please provide:	Click Here for Mem	0 Itemization
ness Address Employer _ IHA, Ann Arbor	or Midlis	III
/pe of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	\$600.00 Enter this total on line 3a of Summary	



BALLOT QUESTION COMMITTEE	2. Committee Name Citizens Mill	age Committee	
Please enter contributors name and address. If contribution is from an i middle initial.	ndividual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Eacl Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/	14/09		date of receipt)
Joetta Mial	14/09		
1200 Minglewood		400	100
Ann Arbor, MI 48103		_{\$} _100	_{\$} _100
5. If over \$100.00 cumulative, please provide:		Click Here for Men	no Itemization
Occupation retired Employer			
Business Address			
Type of Contribution:	on Fund Raiser		
3. Contribution # 2 Name & Address: Dr Glenn Nelson 1323 S Forest Ann Arbor, MI 48104		_{\$} 100	s 300
5 Hover \$100.00 avenue.		Ψ	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo	Itemization
Occupation economic consultant Employer self employed	ed		
Business Address			
Type of Contribution: V Direct Loan from a person	Fund Raiser		
Contribution #3 A. Date of Receipt 10/14/0 Name & Address:	09		
Matthew D Shapiro 2024 Vinewood Blvd Ann Arbor, MI 48104 5. If over \$100.00 cumulative, please provide:		s 100	100
OccupationEmployer	1	Click Here for Memo It	temization
Business Address —			
Type of Castrib dia 1			
	Fund Raiser		
Name & Address: 4. Date of Receipt 10/14/0 Simone Lightfoot 3263 Chelsea Cir	9	100	
Ann Arbor, MI 48108	3	_{\$_} 100\$_	100
. If over \$100.00 cumulative, please provide:	(Click Here for Memo Ite	
Occupation Employer		Nick Here for Memo Ite	emization
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
age <u>24</u> of <u>35</u>	Grand Total of Ali Schedules 4A Complete on last page of Schedule)	\$400.00 Inter this total on line 3a of ummary	
		age	

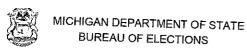


ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-114418

Page

BALLOT QUESTION Please enter contributors name and add			Z. Committee Name N	CitiZetts Will	laye Committee	E
Please enter contributors name and addr middle initial.	ess. If co	ontri	bution is from an individual, enter last nar	ne, first name,	6. Amount	7. Cumulative for Election Cycle for Contributor (Throu
Contribution # 1 Name & Address:	4.	Date	of Receipt 10/14/09			date of receipt)
Penelope & Paul Schreiber			741.1700			
922 Pleasant Drive					_{\$} 100	, 100
Ypsilanti, MI 48197					\$_100	\$_100
5. If over \$100.00 cumulative, please pr	ovide:				Click Here for Me	emo Itemization
Occupation	_ Emplo	yer	<u> </u>			
Business Address						
Type of Contribution: Virect			Loan from a person Fund	Raiser		
Contribution # 2 Name & Address:	4. [Date	of Receipt 10/14/09	Taloci		
Lloyd E Powell						
PO Box 7722					ູ 100	_s 100
Ann Arbor, MI 48107					9	\$
5. If over \$100.00 cumulative, please pro	vide:				Click Here for Mem	o Itemization
Occupation	Employ	yer_				
Business Address						
Type of Contribution: V Direct		Lo	an from a person Fund Ra	aiser		
Contribution # 3 Name & Address:	4. D	ate d	of Receipt 10/14/09	"L. "		
Mike & Cindy Masini				_		
2950 Hickory Ln					s 50	_s 50
Ann Arbor, MI 48104					\$ 00	\$ 00
5. If over \$100.00 cumulative, please pro	vide:				Click Here for Memo	Itemization
Occupation	Employ	er_				
usiness Address —						
Type of Contribution: V Direct		Loa	n from a person Fund Raj	iser		
Contribution # 4 Name & Address:	4. Dat	e of	Receipt 10/14/09	· · · · · · · · · · · · · · · · · · ·		
Christopher Taylor				-		
505 Brooklyn Ave					400	4.5.5
nn Arbor, MI 48104					\$ 100 _{\$}	100
If over \$100.00 cumulative, please provi	de:				Click Here for Memo	la
ccupation attorney	Employe	r			Olick Here for Mellio	itemization
usiness Address						
Type of Contribution: Direct		L	oan from a person Fund Ra	aiser		
			Pa	age Subtotal	\$350.00	
			Grand Total of All So	chedules 4A		
ge <u>25 of 35</u>			(Complete on last page	of Schedule)		
ge of No					Enter this total on fine 3a of Summary	



Please enter contributors name and add middle initial.	ress. If contribution is from an indivi-	Committee Name Citizens Mi	G A	
-	- Total and migraph	dual, enter last name, first name	, 6. Amount	7. Cumulative for Election Cycle for Ea Contributor (Through
Contribution # 1 Name & Address:	4. Date of Receipt 10/14/0)9		date of receipt)
Kenneth & Margaret Guire		-		
2108 Shadford			100	ູ 100
Ann Arbor, MI 48104			_{\$} 100	_ \$
5. If over \$100.00 cumulative, please p	rovide:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 10/15/09	······································		
Monique Uzelac				
1875 Timber Trail			_s 75	_s 75
Ann Arbor, MI 48103			J	\$ <u></u>
. If over \$100.00 cumulative, please pro	ovide:		Click Here for M	emo Itemization
Occupation	Employer	- <u></u> -		
Business Address				
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	4. Date of Receipt 10/15/09			
lulia Koli				
755 Warner Rd			25	0.5
Saline, MI 48176			_{\$} 35	_{\$} 35
. If over \$100.00 cumulative, please pro	vide:		Click Hora for 54	
ccupation	Employer		Click Here for Mer	no Itemization
Isiness Address —	-			
ype of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Contribution # 4 ame & Address:	4. Date of Receipt 10/15/09	T dired register		
onald Fear				
57 Plum Village Drive				
onroe, MI 48161			_{\$} 50	_s 50
lf over \$100.00 cumulative, please provi	de:			
cupation	Employer		Click Here for Men	no Itemization
siness Address				
ype of Contribution: V Direct	Loan from a person	Fund Raiser		
···			\$000.00	
	0	Page Subtotal	\$260.00	
0/ 20	Gr. (Comp	and Total of All Schedules 4A plete on last page of Schedule)		
<u>26 of 35</u>		. 0	Enter this total	
			on line 3a of Summary	
			Page	



Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	age committee	
	e, 6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/15/09		date of receipt)
Alex Leydenfrost		
905 Hutchins Avenue	_{\$} 50	_{\$} 50
Ann Arbor, 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: Loan from a person Fund Raiser 4. Date of Receipt 10/15/09		<u> </u>
Michael Smith		
508 Second Street Ann Arbor, MI 48103	_{\$} _75	_{\$} 75
5. If over \$100.00 cumulative, please provide:	0 11 + + + =	
Occupation Employer	Click Here for M	emo Itemization
Business Address		
Type of Contribution:		
3. Contribution # 3 4. Date of Receipt 10/16/09 Name & Address:		
David Coupland 804 Mt. Vernon Ann Arbor, MI 48103	_{\$_} 50	\$ <u>50</u>
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		
Contribution # 4 Name & Address: 4. Date of Receipt 10/16/09	·	-
Richard Landau 5340 Plymouth Rd. Ste. 200 Ann Arbor, MI 48105	_{\$} 150	_s 150
If over \$100.00 cumulative, please provide:		
CCUpation Attorney Employer RJ Landau Partners PLLC	Click Here for Men	no Itemization
June of Contribution		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal	\$325.00	
Grand Total of All Schedules 4A		
ge 27 of 35 (Complete on last page of Schedule)		
ge of	Enter this total on line 3a of	
	Summary Page	



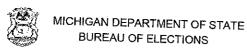
ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-114418

BALLOT QUESTION COMMITTEE 2. Committee Name Citizens Millage Committee Please enter contributors name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through 3. Contribution # 1 date of receipt) 4. Date of Receipt Name & Address: 10/16/09 Shannon & Daniel Stewart 3052 Cottontail Ct _s 100 100 Ann Arbor, MI 48103 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 10/16/09 Name & Address: David D Arsen 300 Linda Vista Ave _s 100 s 100 Ann Arbor, MI 48103 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Professor Employer Michigan State Univ **Business Address** Type of Contribution: 🗸 Direct Loan from a person Fund Raiser 3. Contribution #3 4. Date of Receipt 10/16/09 Name & Address: Suzanne L DeVine 860 S Zeeb Road s 100 s 100 Ann Arbor, 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 Contribution # 4 Name & Address: 4. Date of Receipt 10/16/09 Abigail S Alwin 112 Fairview St s 150 Ann Arbor, MI 48103 _s 150 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 \$450.00 Grand Total of All Schedules 4A (Complete on last page of Schedule)

Page 28 of 35

Enter this total on line 3a of Summary Page



Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.	J c .	
	, 6. Amount	7. Cumulative for Election Cycle for I Contributor (Through
3. Contribution # 1 4. Date of Receipt 10/16/09		date of receipt)
Ernest W Poortinga		
1415 E. Stadium Blvd	00	00
Ann Arbor, MI 48104	_{\$} <u>30</u>	_{\$} _30
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 10/16/09 Name & Address:		
Jill & David Thacher		
1108 Belmar Place	_{\$} 50	_s 50
Ann Arbor, Mi 48103	\$	- \$
. If over \$100.00 cumulative, please provide:	Click Horo for 1 4	long Barrin (1
Occupation Employer	Click Here for M	erno Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 3 4. Date of Receipt 10/16/09		
Ann S Telfer		
82 Boston Ct	400	
nn Arbor, MI 48103	_{\$} 100	_{_ \$_} 100
. If over \$100.00 cumulative, please provide:		
ccupation Employer	Click Here for Mei	mo Itemization
siness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 10/16/09		
riends of Liz Brater		
O Box 7955	400	4.5.5
nn Arbor, Mi 48107	_{\$} _100	_{\$_} 100
f over \$100.00 cumulative, please provide:		
cupation Employer	Click Here for Men	no Itemization
iness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$280.00	
	Ψ200.00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)		
© (Complete on last page of Schedule)	Enter this total	
	on line 3a of Summary	
	Page	



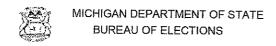
ITEMIZED CONTRIBUTIONS SCHEDULE 4A **BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-114418

BALL	OT QUESTION	COM	VITTEE	2. Comm	nittee Na	_{ime} Citizens Mi	llage Commi	ttee _
Please enter contributo middle initial.	rs name and addre	ss. If co	ntribution is fron	n an individual,	, enter la	st name, first name	, 6. Amoun	
						, , , , , , , , , , , , , , , , , , , ,		Election Cycle for Eacl Contributor (Through
Contribution # 1 Name & Address:		4. [Date of Receipt	10/17/09			<u></u>	date of receipt)
Carl Spina								
235 Old Creek E)r						40	_{\$} 40
Saline, MI 48176							_{\$} 40	\$
5. If over \$100.00 cum		vide:					Click Here	for Memo Itemization
Occupation		Emplo	yer					
Business Address								
Type of Contribution:	√ Direct		Loan from a	person		Fund Raiser		
3. Contribution # 2	-	4. D	ate of Receipt					
Name & Address:								
							\$	\$
5. If over \$100.00 cumu	ative, please prov	ide:					Clink Hora f-	m B Samue II
Onnum ation			(or				Click Here to	r Memo Itemization
Business Address		_ =p.(0)	/er					
Type of Contribution:	Direct		Loan from a pe					
3. Contribution # 3 Name & Address:	<u></u>	4. Da	ate of Receipt	35011		and Raiser	· · · · · · · · · · · · · · · · · · ·	
							\$	_
							<u> </u>	<u> </u>
5. If over \$100.00 cumu	ative, please prov	ide:					Click Here for	Memo Itemization
Occupation		Employ	er					Normal Cons
usiness Address ———								
Type of Contribution:	Direct		Loan from a per	rson	l e	nd Raiser		
Contribution # 4			e of Receipt		П, "			
Name & Address:			— —					
							\$	\$
If over \$100.00 cumula	iive, please provid	le:					***************************************	
ccupation		Employe:	F				Click Here for	Memo Itemization
usiness Address		. •						1
Type of Contribution:	Direct	Γ	Loan from a p	person	F	und Raiser		
			<u> </u>				040.55	
						Page Subtotal	\$40.00	
<u> </u>				Grand (Complete	d Total of	f All Schedules 4A page of Schedule)	\$21/21	
_{ge} <u>30 _{of} 35</u>				\ _ = P1010	1431	page of ocheque)	Enter this total	<u>f</u>
5 VI							on line 3a of	

Page 30 of 35

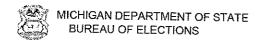
on line 3a of Summary Page



ITEMIZED OTHER RECEIPTS SCHEDULE 4A-1 **BALLOT QUESTION COMMITTEE**

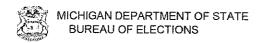
1. Committee I.D. Number B-114418 Citizens Millage Committee

		2. Committee Na	ame Citazotio Williago	Committee	
Name & Address From Whom Received Receipt		4. Date of	5. Type of Receipt	t	6. Amount
Receipt #1 Name & Address:	Date of Receipt	10/07/09	Loan from a Ler	nding Institution	\$ 1677.56
Washtenaw Friends of Education P.O. Box 157			Interest Refund\Rebate	Click Here for Mer	no Itemization Type
Dexter, MI 48130		Fund Raiser	Other (Specify)	cost sharing	
Receipt #2 Name & Address;	Date of Receipt		Loan from a Lei	nding Institution	\$
			Interest Refund\Rebate	Click Here for Men	no Itemization Type
		Fund Raiser	Other (Specify)		
Receipt #3 Name & Address:	Date of Receipt		Loan from a Le	nding Institution	\$
			Interest Refund\Rebate	Click Here for Mem	
		Fund Raiser	Other (Specify)		
Receipt #4 Name & Address:	Date of Receipt	Trund Raiser	Loan from a Len	ding Institution	\$
			Interest Refund\Rebate	Click Here for Mem	o Itemization Type
		Fund Raiser	Other (Specify)		
Receipt #5 Name & Address:	Date of Receipt		Loan from a Len	ding Institution	\$
			Interest Refund\Rebate	Click Here for Memo	o Itemization Type
	F	und Raiser	Other (Specify)		
Receipt #6 lame & Address:	Date of Receipt		Loan from a Lend	ling Institution	\$
			<u></u>	Olick Here for Memo	Itemization Type
		und Raiser	Other (Specify)		
			Crand Table t All		\$1,677.56
			Grand Total of All (Complete on last p	age of Schedule)	\$1,677.56
<u>31 of 35</u>				!	Enter this total on ine 4 of Summary Page



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B BALLOT QUESTION COMMITTEE

Name and address of person to whom paid	Committee Name Citizens M		tee		
·	State purpose of experion Identify the ballot proported indicate whether supported in the supported	sal involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:	о от оррозоц.		<u> </u>	
Dollar Bill Copying	Flier printing				
611 Church Street			08/28/09	264 42	004.40
Ann Arbor, MI 48104	5. Ballot Proposal:		Date of	_{\$} 361.13	_{\$361.13}
	WISD Proposal	Expenditure			
Chack hav if avacaditus is	County: Washtenaw		Click f	or Memo Itemizatio	an Tuna
Check box if expenditure is payment of debt or obligation reported on previous statement			Ollow Ji	or Mendo Henrizalit	л туре
Fund Raiser	Support Statewide	Oppose			
Expenditure # 2	4. Purpose:	✓ Local			
Name & Address;	yard sign printin	a			
Sawicki & Son	5. Ballot Proposal:	<u> </u>			
1521 W. Lafayette Detroit, MI 48216	WISD Proposal I		09/28/09	^{2236.60}	s 2236.60
Detroit, 1911 402 16	WIOD Floposal I		Date of	Ψ	<u> </u>
	County: Washtenaw		Expenditure		
Check box if expenditure is payment of debt or obligation			Click for	Memo Itemization	Type
reported on previous statement	√ Support	Oppose			. 7 44
Fund Raiser	Statewide	Local			
Expenditure # 3 Name & Address:	4. Purpose:				
Dollar Bill Copying	flier and letterhead	printing			
311 Church Street	5. Ballot Proposal:		09/28/09	_s 769.41	1130.54
Ann Arbor, MI 48104	WISD Proposal I		Date of	\$ 700.11	\$
			Expenditure		
7.	County: Washtenaw		Click for	Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			7,7
Fund Raiser	Statewide				
xpenditure # 4	4. Purpose:	√ Local		7-1	
reame & Address.	flier printing				
Oollar Bill Copying			09/28/09	_{\$} 521.40	1651.04
11 Church Street onn Arbor, MI 48104	5. Ballot Proposal:			\$	_{\$} 1651.94
1111 AIDOI, 1911 40 104	WISD Proposal I		Date of Expenditure		
 -	County: Washtenaw		Click for	Memo Itemization	Tyne
Check box if expenditure is payment of debt or obligation					,,,,,,
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	✓ Local			
		Subto	tal this page	\$3,888.54	
	C	chedules 4B			
	(Comple	of Schedule)			
20 0-				inter this total	
<u>, 32</u> of <u>35</u>			th	n Line 8a of ne Summary	
				age	



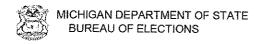
ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-114418

	Committee Name Citizens Mill	age Committe	е		
Name and address of person to whom paid	State purpose of expenditure. Identify the ballot proposal involved. Indicate whether supported or opposed.		6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:		···••	· ·····	<u> </u>
Sawicki & Son	campaign buttor				
1521 W. Lafayette	5. Ballot Proposal:		09/28/09	_s 505.62	_s 2742.22
Detroit, MI 48216			Date of	_ \$ <u></u>	\$,
,	WISD Proposal I		Expenditure	•	
	County: Washtenaw		Click for Memo Itemization Type		
Check box if expenditure is payment of debt or obligation reported on previous statement					
Fund Raiser	Support Statewide	Oppose			
Expenditure # 2	4. Purpose:	✓ Local			
Name & Address:	yard sign printing	1			
Sawicki & Son	5. Ballot Proposal:				
1521 W. Lafayette	WISD Proposal I		09/29/09	_{\$} 2236.60	_{\$} 4978.82
Detroit, MI 48216	viob i loposari		Date of		
	County: Washtenaw		Expenditure		
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose	Click fo	r Memo Itemization	Туре
Fund Raiser	Statewide	Local			
Expenditure # 3	4. Purpose:				
Name & Address:	mail piece printing)			
White Pine Printers	5. Ballot Proposal:		10/08/09	1600 10	4600 40
5204 Jackson Road	,			\$ 1699.18	\$
Ann Arbor, Michigan 48103	WISD Proposal I		Date of Expenditure		
	County: Washtenaw		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:				
Unit Packaging Corp.	mailing postage				
119 Enterprise Dr	5. Ballot Proposal:		10/08/09	_{\$} 4435.40	_{\$} 4435.40
Ann Arbor, MI 48103-9557	WISD Proposal I		Date of Expenditure		
 1	County: Washtenaw	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			
· · · · · · · · · · · · · · · · · · ·	Subtotal this page \$8,876.80				····
	Grand Total of Schedules 4B (Complete on last page of Schedule)			18112,765.04	

 $\mathsf{Page}\,\underline{33}\,\,\mathsf{of}\,\,\underline{35}$

Enter this total on Line 8a of the Summary Page



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

1. Committee I. D. Number_B-114418

	Committee Name Ci	tizens Millage Committe	e			
Name and address of person to whom paid	State purpose Identify the balindicate whether	of expenditure. Ilot proposal involved. supported or opposed.	6. Date	7. Amount	8. Cumulativ for election	
Expenditure # 1 Name & Address:	4. Purpose:				·	
PayPal Inc.	payment _l	processing fees				
2211 N. First St.				° 166.23	_s 166.23	
San Jose, CA 95131	5. Ballot Proposal: WISD Proposal I		Date of	_	<u> </u>	
	V V V V V V V V V V V V V V V V V V V		Expenditure	1		
Check box if expenditure is payment of debt or obligation	County: Washte	County: Washtenaw		Click for Memo Itemization Type		
reported on previous statement	Support	Oppose				
Fund Raiser	Statewide	Local				
Expenditure # 2 Name & Address:	4. Purpose:				****	
Name a / agrees.						
	5. Ballot Proposa	al;				
			Dete of	\$	\$	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date of Expenditure			
	County:					
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose	Click to	r Memo Itemization	Туре	
Fund Raiser	Statewide	Local				
Expenditure #3	4. Purpose:	LILOCAI				
Name & Address:	·					
	5. Ballot Proposal					
	o. ballot i roposal			. \$	\$	
			Date of Expenditure			
	County:		Click for Memo Itemization Type			
Check box if expenditure is payment of debt or obligation	Support	По	Oilor io	i wemo kemization	ı ype	
reported on previous statement		Oppose				
Fund Raiser Expenditure # 4	Statewide	Local				
Name & Address:	4. Purpose:					
	V					
	5. Bailot Proposal:		Data of	\$. \$	
			Date of Expenditure			
	County:		Click fo	r Memo Itemization	Type	
Check box if expenditure is payment of debt or obligation				· · · · · · · · · · · · · · · · · · ·	1,700	
reported on previous statement	Support	Oppose				
Fund Raiser	Statewide	✓ Local				
· - 		Subtotal this pag		\$166.23		
		Grand Total of Schedules 4B			-	
		(Complete on last page		\$12,931.57		
4. ~			•	Enter this total on Line 8a of	•	
24 25				on Line oa or		

Page 37 of 35

the Summary Page



Committee I. D. Number

B-114418

2. Committee Name

Citizens Millage Committee

Type of In-Kind Contribution (Check applicable box)	7. Amount or Fair	8. Cumulative		
Date of Receipt Name & Address of Vendor from whom goods or	Market Value	for Election Cycle (Through		
general and the second		date in Item 5)		
<u></u>				
	di .			
✓ Goods or Services Purchased by Others				
Goods or Services Purchased by Others - LOAN	_s 400	_{\$} 400		
Description meeting space rental	'			
5. DATE OF RECEIPT: 08/04/09				
Click Here for Memo Itemization				
· · · · · · · · · · · · · · · · · ·				
Ann Arbor, MI 48104				
Part I				
4. Loan endorsement or guarantee				
Goods Donated or loaned Services Donated				
Goods or Services Purchased by Others				
Goods or Services Purchased by Others - LOAN				
Description	\$	\$		
Once There for Memo Remissation				
O. VERDOR TRAINE & ADDRESS.				
4. Loan endorsement or guarantee				
Goods Donated or loaned Services Donated				
Goods or Services Purchased by Others				
Goods or Services Purchased by Others - LOAN				
Description	\$	\$		
	Click Here for Memo Itemization			
6. V⊨NDOR NAME & ADDRESS:				
Page Subtotal	\$400.00			
_	5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased 4.	5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased 4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Meeting space rental 5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS: MITC Conference Center 1000 Oakbrook Dr Ann Arbor, MI 48104 4. Loan endorsement or guarantee Goods or Services Purchased by Others Goods or Services Purchased by Others Click Here for Memo Ite Goods or Services Purchased by Others Goods or Services Purchased by Others Goods Onated or Ioaned Services Donated Goods or Services Purchased by Others Goods Onated or Ioaned Services Donated Goods or Services Purchased by Others Goods Onated or Ioaned Services Donated Goods or Services Purchased by Others Click Here for Memo Iter		

rage Subibial

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

9400.00

\$400.00

Enter this total on line 6a of Summary Page