



**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: 01/01/12 To 04/22/12

1. Committee I.D. Number **B-114418**

2. Committee Name
Ann Arbor Citizens Millage Committee

4. Committee's Mailing Address
**PO Box 8131
Ann Arbor, MI 48107**

Area Code and Phone (734) 730-2216
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
**Steven J Norton
1217 Olivia Ave
Ann Arbor, MI 48104**

Area Code and Phone (734) 761-1478

6. Treasurer's Business Address
Same as above

Area Code and Phone (734) 995-5934

7. Designated Record Keeper's Name and Mailing Address
(If the committee has a Designated Record Keeper)

Area Code and Phone

FILED
 WASHINGTON COUNTY, MI
 2012 APR 27 P 4:18
 CLERK OF CIRCUIT COURT

8. TYPE OF STATEMENT:

8a. PRE- ELECTION
OR
8b. POST- ELECTION

Pre-Election or Post-Election Statement relates to:

PRIMARY GENERAL
 SCHOOL SPECIAL

Date of Election:
05/08/12

8c. ANNUAL STATEMENT
(____ Coverage Year)

8d. QUALIFICATION
OR
 NON-QUALIFICATION
STATEMENT (Required of
State-wide Ballot Question
Committees Only)

Date of Qualification or Non-
Qualification:

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

8f. DISSOLUTION OF COMMITTEE
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.

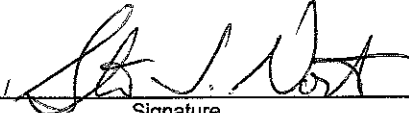
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold.

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 Steven J Norton Date 04/27/12

Type or Print Name

 Signature



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage Committee

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>12,540.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>12,540.00</u>	(18.) \$ <u>12,540.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>12,540.00</u>	(20.) \$ <u>12,540.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>633.45</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>633.45</u>	(21.) \$ <u>633.45</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>8,653.67</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>0.00</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>0.00</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>8,653.67</u>	(22.) \$ <u>8,653.67</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>0.00</u>	(23.) \$ <u>0.00</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>8,653.67</u>	(24.) \$ <u>8,653.67</u>
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>0.00</u>	(25.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>162.70</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>12,540.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>12,702.70</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>8,653.67</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4,049.03</u>	*

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Dr. Patricia Green 3090 Kipling Drive Ann Arbor, MI 48105	4. Date of Receipt <u>01/23/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Ann Arbor Public Schools</u> Business Address <u>2555 S. State Street, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Donna Lasinski 4977 St Annes Ct Ann Arbor, MI 48103	4. Date of Receipt <u>01/24/12</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Think Stretch</u> Business Address <u>339 E. Liberty Suite 340, Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Dr. Stephen Green 3090 Kipling Drive Ann Arbor, MI 48105	4. Date of Receipt <u>01/28/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Periodontist</u> Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104	4. Date of Receipt <u>02/07/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>consultant</u> Employer <u>Okno Group</u> Business Address <u>same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$1,750.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)

3. Contribution # 1 4. Date of Receipt 02/08/12
 Name & Address:
Dr Glenn Nelson
1323 S Forest
Ann Arbor, MI 48104
\$ 250 \$ 250
 Click Here for Memo Itemization
 5. If over \$100.00 cumulative, please provide:
 Occupation consultant Employer self employed
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 4. Date of Receipt 02/08/12
 Name & Address:
Margaret Dewar
1323 S Forest
Ann Arbor, MI 48104
\$ 250 \$ 250
 Click Here for Memo Itemization
 5. If over \$100.00 cumulative, please provide:
 Occupation Professor Employer University of Michigan
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 02/08/12
 Name & Address:
Sara Aeschbach
620 Trego Circle
Ann Arbor, MI 48103
\$ 50 \$ 50
 Click Here for Memo Itemization
 5. If over \$100.00 cumulative, please provide:
 Occupation _____ Employer _____
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 02/09/12
 Name & Address:
Christine M Stead
515 Huronview Blvd
Ann Arbor, MI 48103
\$ 300 \$ 300
 Click Here for Memo Itemization
 5. If over \$100.00 cumulative, please provide:
 Occupation consultant Employer self-employed
 Business Address _____
 Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **\$850.00**

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

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Randall Trent 809 Hewett Drive Ann Arbor, MI 48103			
4. Date of Receipt <u>02/10/12</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Ann Arbor Public Schools</u>		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Robert Satchwell 2202 Rivenoak Ct Ann Arbor, MI 48103			
4. Date of Receipt <u>02/14/12</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Scott Westerman Jr 1926 Hampton Ct Ann Arbor, MI 48103			
4. Date of Receipt <u>02/15/12</u>		\$ <u>400</u>	\$ <u>400</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Joyce Hunter 1676 Coburn Dr. Ann Arbor, MI 48108			
4. Date of Receipt <u>02/15/12</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Ann Arbor Public Schools</u>		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$1,000.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
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3. Contribution # 1
Name & Address: Irene Patalan
5175 W. Liberty
Ann Arbor, MI 48103

4. Date of Receipt 02/16/12

6. Amount \$ 50

7. Cumulative \$ 50

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

Click Here for Memo Itemization

3. Contribution # 2
Name & Address: Suzanne & David Comsa
6701 Chirco Ct
Shelby Twp., MI 48316

4. Date of Receipt 02/22/12

6. Amount \$ 250

7. Cumulative \$ 250

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

Click Here for Memo Itemization

3. Contribution # 3
Name & Address: Ann Arbor Administrators Association
1019 W. Washington St.
Ann Arbor, MI 48103

4. Date of Receipt 02/22/12

6. Amount \$ 500

7. Cumulative \$ 500

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

Click Here for Memo Itemization

3. Contribution # 4
Name & Address: Wiltec Technologies
4201 Varsity Dr
Ann Arbor, MI 48108

4. Date of Receipt 02/22/12

6. Amount \$ 100

7. Cumulative \$ 100

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

Page Subtotal **\$900.00**

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

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
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3. Contribution # 1
Name & Address:
Deb Mexicotte
2660 Yost Blvd.
Ann Arbor, MI 48104

4. Date of Receipt 02/27/12

\$ 150 \$ 150

5. If over \$100.00 cumulative, please provide:
Occupation Program Coordinator Employer University of Michigan

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

[Click Here for Memo Itemization](#)

3. Contribution # 2
Name & Address:
Laurie Barnett
3425 Vintage Valley
Ann Arbor, MI 48105

4. Date of Receipt 02/29/12

\$ 200 \$ 200

5. If over \$100.00 cumulative, please provide:
Occupation marketing consultant Employer self-employed

Business Address same

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3
Name & Address:
Jo Ann Emmendorfer
516 Gott St
Ann Arbor, MI 48103

4. Date of Receipt 02/29/12

\$ 50 \$ 50

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

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

[Click Here for Memo Itemization](#)

3. Contribution # 4
Name & Address:
Andrew Thomas
1425 W. Stadium Blvd
Ann Arbor, MI 48103

4. Date of Receipt 02/29/12

\$ 100 \$ 100

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](#)

Page Subtotal **\$500.00**

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

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Peter & Sarah Allen 2224 Applewood Ct Ann Arbor, MI 48103 4. Date of Receipt <u>02/29/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Christopher Cerda 396 Burr Oak Drive Ann Arbor, MI 48103 4. Date of Receipt <u>03/06/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Johnson Controls 7981 Lund Rd Fife Lake, MI 49633 4. Date of Receipt <u>03/08/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>1000</u>	\$ <u>1000</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Griff Mc Donald 3906 Penberton Drive Ann Arbor, MI 48105 4. Date of Receipt <u>03/08/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal

\$1,200.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Barry & Susan Gross 3642 Middleton Ann Arbor, MI 48105	4. Date of Receipt <u>03/08/12</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Mary Anne Drew 8 Haverhill Ct Ann Arbor, MI 48105	4. Date of Receipt <u>03/08/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Ruth Zweifler 1706 South Universtity Ave Ann Arbor, MI 48104	4. Date of Receipt <u>03/08/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Jack Panitch 501 Burson Pl Ann Arbor, MI 48104	4. Date of Receipt <u>03/08/12</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>State of Michigan</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$325.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Lakewood Elementary PTO 344 Gralake Ann Arbor, MI 48103	4. Date of Receipt <u>03/08/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Helen Starman 2201 Brockman Blvd Ann Arbor, MI 48104	4. Date of Receipt <u>03/09/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Gloria O'Neill 938 W. Delhi Rd Ann Arbor, MI 48103	4. Date of Receipt <u>03/13/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Margaret Levenstein 300 Linda Vista Ave Ann Arbor, MI 48103	4. Date of Receipt <u>03/13/12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$250.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Christopher & Leanne Chadwick 430 Hillspur Rd Ann Arbor, MI 48105		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>03/15/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Sheila Carpenter 3490 Oak Hollow Dr Ann Arbor, MI 48103		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>03/15/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Florence Norton 1200 Earhart Rd, Apt 314 Ann Arbor, MI 48105		\$ <u>500</u>	\$ <u>500</u>
4. Date of Receipt <u>03/18/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Ann Arbor Education Association 4141 Jackson Rd Ann Arbor, MI 48103		\$ <u>2000</u>	\$ <u>2000</u>
4. Date of Receipt <u>03/20/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$2,650.00**

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: John Austin 817 Berkshire Rd Ann Arbor, MI 48104		\$ <u>30</u>	\$ <u>30</u>
4. Date of Receipt <u>03/23/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Leigh Greden 2860 Gladstone Ave Ann Arbor, MI 48104		\$ <u>25</u>	\$ <u>25</u>
4. Date of Receipt <u>03/23/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Norman Herbert 3681 Wagner Ridge Ct. Ann Arbor, MI 48103		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>03/23/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Joseph Romeo 1570 Kuehnle St Ann Arbor, MI 48103		\$ <u>35</u>	\$ <u>35</u>
4. Date of Receipt <u>03/23/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$140.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Christa Williams 1115 Woodlawn Ann Arbor, MI 48104	4. Date of Receipt <u>03/23/12</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Great Lakes Environmental 405 Five Mile Rd Whitmore Lake, MI 48189	4. Date of Receipt <u>03/23/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Miller, Canfield 150 West Jefferson Detroit, MI 48226	4. Date of Receipt <u>03/23/12</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Stauder Barch 3989 Research Park Drive Ann Abor, MI 48108	4. Date of Receipt <u>03/23/12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$1,150.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
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3. Contribution # 1 Name & Address: Michael Emlaw 1320 King George Blvd Ann Arbor, MI 48108	4. Date of Receipt <u>03/23/12</u>	6. Amount \$ <u>25</u>	7. Cumulative \$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

3. Contribution # 2 Name & Address: Pioneer PTSO 2232 S Main St Ann Arbor, MI 48103	4. Date of Receipt <u>03/28/12</u>	6. Amount \$ <u>200</u>	7. Cumulative \$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

3. Contribution # 3 Name & Address: Richard E Burney 4319 Miller Rd Ann Arbor, MI 48103	4. Date of Receipt <u>04/09/12</u>	6. Amount \$ <u>100</u>	7. Cumulative \$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

3. Contribution # 4 Name & Address: Richard Sheridan 2338 Yorkshire Ann Arbor, MI 48104	4. Date of Receipt <u>04/09/12</u>	6. Amount \$ <u>100</u>	7. Cumulative \$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$425.00**

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

\$425.00
Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Mary Browning 1229 Wines Dr Ann Arbor, MI 48103		
4. Date of Receipt <u>04/09/12</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide:		
Occupation _____ Employer _____		
Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization		
3. Contribution # 2 Name & Address: Deborah Tirico 2320 Tall Oaks Dr Ann Arbor, MI 48103		
4. Date of Receipt <u>04/09/12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		
Occupation _____ Employer _____		
Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization		
3. Contribution # 3 Name & Address: James Dries 3840 Michael Rd N Ann Arbor, MI 48103		
4. Date of Receipt <u>04/09/12</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		
Occupation _____ Employer _____		
Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization		
3. Contribution # 4 Name & Address: Dr. Patricia Green 3090 Kipling Drive Ann Arbor, MI 48105		
4. Date of Receipt <u>04/12/12</u>	\$ <u>250</u>	\$ <u>750</u>
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Administrator</u> Employer <u>Ann Arbor Public Schools</u>		
Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization		

Page Subtotal

\$475.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Margaret Dewar 1323 S Forest Ann Arbor, MI 48104 4. Date of Receipt <u>04/12/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>University of Michigan</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>350</u>
3. Contribution # 2 Name & Address: Dr Glenn Nelson 1323 S Forest Ann Arbor, MI 48104 4. Date of Receipt <u>04/12/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>consultant</u> Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>350</u>
3. Contribution # 3 Name & Address: Donna Lasinski 4977 St Annes Ct Ann Arbor, MI 48103 4. Date of Receipt <u>04/12/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Think Stretch</u> Business Address <u>339 E. Liberty, Suite 340, Ann Arbor MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>350</u>
3. Contribution # 4 Name & Address: Wendy Correll 2956 Provincial Drive Ann Arbor, MI 48104 4. Date of Receipt <u>04/12/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>

Page Subtotal

\$400.00

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

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage 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 Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Robert Allen 6030 Cherrywood Dr Ypsilanti, MI 48197 4. Date of Receipt <u>04/18/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Ann Arbor Public Schools</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Rae Ann Weymouth 548 Third Street Ann Arbor, MI 48103 4. Date of Receipt <u>04/19/12</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Dr. Stephen Green 3090 Kipling Drive Ann Arbor, MI 48105 4. Date of Receipt <u>04/22/12</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>periodontist</u> Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>250</u>	\$ <u>750</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: 4. Date of Receipt _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal

\$525.00

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

\$12,540.00

Enter this total
on line 3a of
Summary
Page



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

1. Committee I. D. Number B-114418
2. Committee Name Ann Arbor Citizens Millage Committee

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: Barton Malow 26500 American Drive Southfield, MI 48034 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input checked="" 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 <u>printed materials</u> 5. DATE OF RECEIPT: <u>03/12/12</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ <u>500</u> \$ <u>500</u>	
<input type="checkbox"/> Fund Raiser Contribution #2 Name & Address: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation consultant Employer Name & Address: Okno Group same address	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>stock photo</u> 5. DATE OF RECEIPT: <u>03/20/12</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: Veer 710 Second Avenue Suite 200 Seattle WA 98104	\$ <u>133.45</u> \$ <u>133.45</u>	
<input type="checkbox"/> Fund Raiser Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	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 **\$633.45**

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

\$633.45

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B-114418
2. Committee Name Ann Arbor Citizens Millage Committee

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: Ann Arbor Public Schools Huron HS 2727 Fuller Rd 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>room rental</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	02/29/12 Date of Expenditure	\$ <u>165</u>	\$ <u>165</u> Click for Memo Itemization Type
Expenditure # 2 Name & Address: PFL.com 100 PFL Way Livingston, MT 59047 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>printing</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	03/22/12 Date of Expenditure	\$ <u>946.87</u>	\$ <u>946.87</u> Click for Memo Itemization Type
Expenditure # 3 Name & Address: Glenn Nelson 1323 S Forest Ann Arbor, MI 48104 <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>postage</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/02/12 Date of Expenditure	\$ <u>90</u>	\$ <u>90</u> Click for Memo Itemization Type
Expenditure # 4 Name & Address: Unit Packaging 119 Enterprise Drive 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>bulk postage</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/02/12 Date of Expenditure	\$ <u>2724.36</u>	\$ <u>2724.36</u> Click for Memo Itemization Type

Subtotal this page **\$3,926.23**
 Grand Total of Schedules 4B
 (Complete on last page of Schedule)

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

2. Committee Name Ann Arbor Citizens Millage Committee

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: West Liberty Information LLC 3840 Michael Rd. N 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>mailing lists</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/02/12 Date of Expenditure	\$ <u>779.04</u>	\$ <u>779.04</u>
Expenditure # 2 Name & Address: Unit Packaging 119 Enterprise Dr 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>mailing services</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/09/12 Date of Expenditure	\$ <u>478.64</u>	\$ <u>3203</u>
Expenditure # 3 Name & Address: Sawicki & Son 1521 W. Lafayette Detroit, MI 48216 <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>yard signs</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/13/12 Date of Expenditure	\$ <u>2734.80</u>	\$ <u>2734.80</u>
Expenditure # 4 Name & Address: PFL.com 100 PFL Way Livingston, MT 59047 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>printing</u> 5. Ballot Proposal: <u>AAPS Tech Bond</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	04/19/12 Date of Expenditure	\$ <u>734.96</u>	\$ <u>1681.83</u>

Subtotal this page **\$4,727.44**

Grand Total of Schedules 4B
(Complete on last page of Schedule) **\$8,653.67**

Enter this total on Line 8a of the Summary Page