



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B2016005
2. Committee Name Citizens for Voter Turnout

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: Squarespace, Inc. 459 Broadway, 5th Floor New York, NY 10013 <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>Website hosting</u> 5. Ballot Proposal: <u>City of Ann Arbor Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	09/28/16 Date of Expenditure Click for Memo Itemization Type	\$ <u>18</u> 2016 OCT 2 P 2:10 \$ <u>18</u>	\$ <u>18</u> FILED WASHTENAW COUNTY, MI
Expenditure # 2 Name & Address: Sawicki & Son 1521 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>City of Ann Arbor Proposal</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	10/20/16 Date of Expenditure Click for Memo Itemization Type	\$ <u>464.81</u> \$ <u>464.81</u>	
Expenditure # 3 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: County: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	_____ Date of Expenditure Click for Memo Itemization Type	\$ _____ \$ _____	
Expenditure # 4 Name & Address: <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: 5. Ballot Proposal: County: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	_____ Date of Expenditure Click for Memo Itemization Type	\$ _____ \$ _____	

Subtotal this page **\$482.81**
 Grand Total of Schedules 4B
 (Complete on last page of Schedule) **\$482.81**

Enter this total on Line 8a of the Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2016-005

2. Committee Name Citizens for Voter Turnout

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Prudence Rosenthal</u> <u>2105 Devonshire Rd.</u> <u>Ann Arbor, MI 48104</u> 4. Date of Receipt <u>09/27/16</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: <u>Joan Lowenstein</u> <u>502 Burson Pl</u> <u>Ann Arbor, MI 48014</u> 4. Date of Receipt <u>09/27/16</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Jaffe Law</u> Business Address <u>535 W. William, Ann Arbor, MI 48103</u> 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 # 3 Name & Address: <u>John Splitt</u> <u>207 W. William, Apt 3</u> <u>Ann Arbor, MI 48104</u> 4. Date of Receipt <u>10/06/16</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self</u> 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
3. Contribution # 4 Name & Address: <u>Leigh R. Greden</u> <u>2860 Gladstone Ave.</u> <u>Ann Arbor, MI 48104</u> 4. Date of Receipt <u>10/09/16</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Adviser to the President</u> Employer <u>Eastern Michigan University</u> Business Address <u>202 Welch Hall, EMU, Ypsilanti, MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization

Page Subtotal **\$650.00**

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

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

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

1. Committee I.D. Number B-2016-005
2. Committee Name Citizens for Voter Turnout

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 E. Guenzel 1703 Morton Ave. Ann Arbor, MI 48104 4. Date of Receipt <u>10/06/16</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 2 Name & Address: Jack M. Panitch 501 Burson Pl Ann Arbor, MI 48104 4. Date of Receipt <u>09/29/16</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Varnum Law</u> Business Address <u>39500 High Pointe, Novi, MI 48375</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>100</u> Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 3 Name & Address: Janis A. Bobrin 3465 Vintage Valley Ann Arbor, MI 48105 4. Date of Receipt <u>10/01/16</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 4 Name & Address: Hillary A. Murt 810 Watershed Dr. Ann Arbor, MI 48105 4. Date of Receipt <u>09/28/16</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization <input type="button" value="v"/>

Page Subtotal

\$400.00

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

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

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

1. Committee I.D. Number B-2016-005

2. Committee Name Citizens for Voter Turnout

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: Leah M. Gunn 2115 Nature Cove Ct, Apt. 207 Ann Arbor, MI 48104			
4. Date of Receipt <u>09/28/16</u>		\$ <u>200</u>	\$ <u>200</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 <input type="button" value="v"/>	
3. Contribution # 2 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 <input type="button" value="v"/>	
3. Contribution # 3 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 <input type="button" value="v"/>	
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 <input type="button" value="v"/>	

Page Subtotal

\$200.00

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

\$1,250.00

Enter this total
on line 3a of
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