



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: July 22 To Oct 21

1. Committee I.D. Number C-2018-003

4. Committee's Mailing Address  
1407 Wakefield Avenue  
Ann Arbor, MI 48104

2. Committee Name  
Ann Arbor Central Park Ballot Committee

734-649-3207  
Area Code and Phone: \_\_\_\_\_  
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

5. Treasurer's Name and Residential Address  
Will Hathaway  
3434 Stowe Street, Ann Arbor MI 48104  
734-649-3207  
Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address  
(If the committee has a Designated Record Keeper)  
N/A  
Area Code and Phone

6. Treasurer's Business Address  
1407 Wakefield Avenue  
Ann Arbor, MI 48103  
734-649-3207  
Area Code and Phone

8. TYPE OF STATEMENT:  
8a.  PRE- ELECTION  
OR  
 POST- ELECTION  
Pre-Election or Post-Election Statement relates to:  
 PRIMARY  
 GENERAL  
 SCHOOL  
 SPECIAL  
 OTHER: \_\_\_\_\_  
Date of Election:  
11/06/18

8b.  FEBRUARY STATEMENT  
 APRIL STATEMENT  
 JULY STATEMENT  
 OCTOBER STATEMENT  
8c.  ANNUAL STATEMENT  
( \_\_\_ Coverage Year)

8d:  Post Petition Sample Filing under MCL 168.483a  
(Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition)  
8e.  AMENDMENT TO CAMPAIGN STATEMENT  
(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)

8f.  DISSOLUTION OF COMMITTEE REQUEST  
Effective Date of Dissolution \_\_\_\_\_  
By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.  
LAWRENCE KESNER  
COUNTY CLERK  
2018 OCT 26 10:01  
FILED  
WASHTENAW COUNTY, MI

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 Will Hathaway [Signature]  
Type or Print Name Signature



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number C-2018-003  
Ann Arbor Central Park Ballot  
2. Committee Name Committee

	Column I This Period	Column II Cumulative for Election Cycle
<b>RECEIPTS</b>		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>12,380</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ _____	(18.) \$ _____
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3 c + Line 4)	(5.) \$ <u>12,380</u>	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS</b>		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>16,960.15</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
<b>7. TOTAL IN-KIND CONTRIBUTIONS</b> (Add Line 6a + Line 6b)	(7.) \$ <u>16,960.15</u>	(21.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized Direct Expenditures ( Schedule 4B, Column 7)	(8a.) \$ _____	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ _____	
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.) \$ _____	
e. Subtotal of Expenditures	(8e.) \$ _____	(22.) \$ _____
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
<b>10. TOTAL EXPENDITURES</b> (Add Line 8e + Line 9)	(10.) \$ _____	(24.) \$ _____
<b>IN-KIND EXPENDITURES</b>		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ _____	(25.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>2,150.77</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + _____	
15. SUBTOTAL Add lines 13 and 14	(15.) = _____	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - _____	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ _____	*

\*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 C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: <u>Susan Cybulski</u> <u>112 Kenwood, Ann Arbor, MI 48103</u>		4. Date of Receipt <u>9/18/18</u> 6. Amount \$ <u>75.00</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>graphic designer</u> Employer <u>Self</u> Business Address <u>same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Jordan Siegel</u> <u>1A Emmons Place Unit 1A, Cambridge, MA 02138</u>		4. Date of Receipt <u>9/20/18</u> 6. Amount \$ <u>500.00</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>University of Michigan</u> Business Address <u>Ross School of Business, Ann Arbor, MI 48109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Nancy Kaplan</u> <u>3065 Hunting Valley Dr., Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9/18/18</u> 6. Amount \$ <u>200</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>John &amp; Susan Haines</u> <u>322 E. Liberty St. Apt. 13</u> <u>Ann Arbor MI 48104-2294</u>		4. Date of Receipt <u>9/23/18</u> 6. Amount \$ <u>500</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>650</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Brewer</u> Employer <u>Liberty Street Brewing Co.</u> Business Address <u>149 W. Liberty, Plymouth MI 48170</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

1,275  
12,380

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 C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: Susan McDonald 417 Mark Hannah Place, Ann Arbor, MI 48103		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>100</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Thomas Stulberg 1202 Traver Street, Ann Arbor, MI 48105		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>100</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Champion Mgt. LLC</u> Business Address <u>1202 Traver Street, A2, MI 48105</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: David Silkworth 2048 Charlton St. Apt 301 Ann Arbor, MI 48103		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>150</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance</u> Employer <u>Hartford Fire Insurance Co.</u> Business Address <u>One Hartford Plaza, Hartford, CT 06115</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Rita Mitchell 621 Fifth Street Ann Arbor, MI 48103		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>100</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

400

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 C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot

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: Katherine Griswold 3565 Fox Hunt Dr Ann Arbor, MI 48105		4. Date of Receipt <u>9/23/18</u> \$ <u>50</u>	\$ <u>50</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Kathy Boris P.O. Box 8117 Ann Arbor, MI 48107-8117		4. Date of Receipt <u>9/23/18</u> \$ <u>50</u>	\$ <u>50</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Anne Bannister 612 N Main, Ann Arbor, MI 48104		4. Date of Receipt <u>9/23/18</u> \$ <u>150</u>	\$ <u>250</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director</u> Employer <u>Personal Finance Education</u> Business Address <u>same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Peter Nagourney 914 Lincoln Ave, Ann Arbor, MI 48104		4. Date of Receipt <u>9/23/18</u> \$ <u>500</u>	\$ <u>650</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

750

Grand Total of All Schedules 4A  
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ITEMIZED CONTRIBUTIONS  
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BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: Douglas Aikenhead 534 Glendale Circle, Ann Arbor, MI 48103		\$ 300	\$ 300
4. Date of Receipt <u>9/23/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Claire Tinkerhess 621 Miner Street Ann Arbor, MI 48103		\$ 600	\$ <del>700</del>
4. Date of Receipt <u>9/23/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>store owner</u> Employer <u>self</u> Business Address <u>Fourth Ave Birkenstock, 209 Fourth Ave, Ann Arbor 04</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: David Chung 322 E Liberty Street, A2 MI 48104		\$ 100	\$ 200
4. Date of Receipt <u>9/23/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>University of Michigan</u> Business Address <u>2000 Bonisteel, Ann Arbor, MI 48109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Priscilla Parker 1706 Charlton St, Ann Arbor, MI 48103		\$ 25	\$ 25
4. Date of Receipt <u>9/23/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1,025

Grand Total of All Schedules 4A  
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MICHIGAN DEPARTMENT OF STATE  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: <u>Margaret Hostetler &amp; Lorri Sipes</u> <u>322 E Liberty Apt 18, Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>200</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Susan Blake</u> <u>1213 Morningside, Ann Arbor, MI 48103</u>		4. Date of Receipt <u>9/23/18</u> \$ <u>500</u>	\$ <u>500</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Shirley Wolfe</u> <u>1213 Olivia Ave, Ann Arbor, MI 48104</u>		4. Date of Receipt <u>9/23/18</u> \$ <u>400</u>	\$ <u>400</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Anna &amp; Warren Attarian</u> <u>3490 Gettysburg Rd, Ann Arbor, MI 48105</u>		4. Date of Receipt <u>9/23/18</u> \$ <u>100</u>	\$ <u>150</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

1,100

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

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: <u>Judith Steeh &amp; Robert DiGiovanni</u> <u>1313 Henry St., A2 MI 48104</u>		4. Date of Receipt <u>9/24/18</u> \$ <u>50</u>	\$ <u>50</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>James &amp; Ellen Patton</u> <u>1937 Swedesford, Malvern, PA 19355-8733</u>		4. Date of Receipt <u>9/24/18</u> \$ <u>500</u>	\$ <u>600</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Tim Janssen</u> <u>1207 Manhattan Dr, Ann Arbor, MI 48103</u>		4. Date of Receipt <u>9/26/18</u> \$ <u>35</u>	\$ <u>35</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>George Hoffman</u> <u>112 Kenwood Ave, Ann Arbor, MI 48103</u>		4. Date of Receipt <u>9/25/18</u> \$ <u>200</u>	\$ <u>200</u> <a href="#">Click Here for Memo Itemization</a>
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>University of Michigan</u> <u>812 E Washington, Ann Arbor, MI 48109</u> Business Address <u>812 E Washington, Ann Arbor, MI 48109</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

785

Grand Total of All Schedules 4A  
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MICHIGAN DEPARTMENT OF STATE  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot

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)
<p>3. Contribution # 1 Name &amp; Address: <u>Herbert Black</u> <u>2411 Shannondale Rd, A2 MI 48104</u></p> <p>4. Date of Receipt <u>9/25/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>500</u></p>	<p>\$ <u>500</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution # 2 Name &amp; Address: <u>Thomas Wieder</u> <u>2445 Newport Rd, Ann Arbor, MI 48103</u></p> <p>4. Date of Receipt <u>9/25/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>self</u> Business Address <u>same</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>500</u></p>	<p>\$ <u>500</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution # 3 Name &amp; Address: <u>Frederick Talbot</u> <u>2120 Woodside Rd, A2, MI 48104</u></p> <p>4. Date of Receipt <u>9/29/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p>	<p>\$ <u>100</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution # 4 Name &amp; Address: <u>Rita &amp; Vince Caruso</u> <u>556 Glendale Circle, A2 MI 48103-4177</u></p> <p>4. Date of Receipt <u>9/23/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>University of Michigan</u> Business Address <u>UM Ann Arbor</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p>	<p>\$ <u>50</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>

Page Subtotal

1,150

Grand Total of All Schedules 4A  
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Enter this total  
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Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot

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: Natalie Katz 2790 Ember Way Ann Arbor MI 48104  4. Date of Receipt <u>9/23/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>student</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>15</u>	\$ <u>15</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2 Name & Address: Alaine Katz 2790 Ember Way Ann Arbor, MI 48104  4. Date of Receipt <u>9/23/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3 Name & Address: Sam Copi 2306 Adare Ann Arbor, MI 48104  4. Date of Receipt <u>9/23/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>n/a</u> Business Address <u>David M Copi, 1207 Pauline</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4 Name & Address: Mary Underwood 1219 Traver Rd Ann Arbor, MI 48105  4. Date of Receipt <u>9/23/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal

75

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

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Summary  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: Donald Danyko 1220 Pontiac Trail #2, A2 MI 48105		\$ 200	\$ 200
4. Date of Receipt <u>9/23/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Gary & Elsie Claypool 714 Soule Blvd Ann Arbor, MI 48103		\$ 100	\$ 100
4. Date of Receipt <u>10/5/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</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: Carla Morse 2034 Day Street Ann Arbor, MI 48104		\$ 300	\$ 800
4. Date of Receipt <u>10/30/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Speech Therapist</u> Employer <u>n/a</u> Business Address <u>Ypsilanti Schools, 1885 Packard Rd, Ypsilanti MI 48197</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Elsie Orb 1540 Glastonbury Ann Arbor, MI 48103		\$ 100	\$ 100
4. Date of Receipt <u>10/1/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</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

700

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

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: <u>Philip Stoll</u> <u>1314 Broadway</u> <u>Ann Arbor MI 48105</u>  4. Date of Receipt <u>10/2/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>Sr Software Engineer</u> Employer <u>Siemens Healthcare</u> <u>Siemens Healthcare Ann Arbor</u> Business Address _____ 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>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2 Name & Address: <u>Peter Heydon</u> <u>3562 W Huron River Dr, A2 MI 48103</u>  4. Date of Receipt <u>10/11/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> <u>n/a</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>2,000</u>	\$ <u>2,000</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3 Name & Address: <u>Ceci Riecker</u> <u>PO Box 293, Dexter, MI 48130</u>  4. Date of Receipt <u>10/2/18</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>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4 Name & Address: <u>Cedric Richner</u> <u>941 Newport Rd, Ann Arbor, MI 48103</u>  4. Date of Receipt <u>10/15/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> <u>n/a</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>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal 2,475

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

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot

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: Kathleen Fojtik Stroud 2271 Placid Way Ann Arbor, MI 48105  4. Date of Receipt <u>10/1/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</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>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2 Name & Address: Janet Kreger Riverside Park Place 1050 Wall Street 4F, Ann Arbor, MI 48105  4. Date of Receipt <u>10/12/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>300</u>	\$ <u>300</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3 Name & Address: Glenn Ziegler 514 Krause St Ann Arbor, MI 48103  4. Date of Receipt <u>10/18/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</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>150</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4 Name & Address: Ann Lund 1510 Jones Dr Ann Arbor, MI 48105  4. Date of Receipt <u>10/7/18</u>  5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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>  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal

525

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

ITEMIZED CONTRIBUTIONS  
SCHEDULE 4A  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot

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)
<p>3. Contribution # 1 Name &amp; Address: Sara Holmes 507 Crest Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/17/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>100</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>	<p>\$ <u>100</u></p>
<p>3. Contribution # 2 Name &amp; Address: Barbara Irene Nagler 1509 Jones Dr Ann Arbor, MI 48105</p> <p>4. Date of Receipt <u>10/22/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>20</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>	<p>\$ <u>20</u></p>
<p>3. Contribution # 3 Name &amp; Address: Mary Hathaway 1407 Wakefield Ave Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/21/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>2,000</u></p> <p><a href="#">Click Here for Memo Itemization</a></p>	<p>\$ <u>7,800</u></p>
<p>3. Contribution # 4 Name &amp; Address:</p> <p>4. Date of Receipt _____</p> <p>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</p>	<p>\$ _____</p> <p><a href="#">Click Here for Memo Itemization</a></p>	<p>\$ _____</p>

Page Subtotal 2,120

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

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

1. Committee I. D. Number C-2018-003  
2. Committee Name Ann Arbor Central Park Ballot 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: <b>Kitty Kahn</b> 515 Krause Street Ann Arbor, MI 48103  If over \$100.00 cumulative, please provide: Occupation <b>custom button maker</b>  Employer Name & Address: <b>self</b> <b>same</b>  <input type="checkbox"/> Fund Raiser	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 <b>campaign buttons</b> 5. DATE OF RECEIPT: <u>9/21/18</u> <a href="#">Click Here for Memo Itemization</a> 6. VENDOR NAME & ADDRESS:	\$ <u>200</u>	\$ <u>200</u>
Contribution #2 Name & Address: <b>Bill Zirinsky</b> 1038 Baldwin Ann Arbor, MI 48104  If over \$100.00 cumulative, please provide: Occupation <b>store owner publisher</b>  Employer Name & Address: <b>Crazy Wisdom</b> <b>Main Street, Ann Arbor 48104</b>  <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <b>Display ad</b> 5. DATE OF RECEIPT: <u>9/11/18</u> <a href="#">Click Here for Memo Itemization</a> 6. VENDOR NAME & ADDRESS: <b>Ann Arbor Observer</b> <b>2390 Winewood Ave</b> <b>Ann Arbor, MI 48103</b>	\$ <u>3,536.00</u>	\$ <u>3,536.00</u>
Contribution #3 Name & Address: <b>Bill Zirinsky</b> 1038 Baldwin Ann Arbor, MI 48104  If over \$100.00 cumulative, please provide: Occupation <b>store owner and publisher</b>  Employer Name & Address: <b>Crazy Wisdom</b> <b>Main Street, Ann Arbor 48104</b>  <input type="checkbox"/> Fund Raiser	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 <b>Display ad</b> 5. DATE OF RECEIPT: <u>8/10/18</u> <a href="#">Click Here for Memo Itemization Type</a> 6. VENDOR NAME & ADDRESS: <b>Crazy Wisdom Journal</b> <b>Main Street, Ann Arbor, MI 48104</b>	\$ <u>850</u>	\$ <u>4,386</u>

Page Subtotal **4,586**

Grand Total of all Schedules 4-IK  
(Complete on last page of Schedule) **16,960.15**

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

C-2018-003

1. Committee I. D. Number \_\_\_\_\_

Ann Arbor Central Park Ballot Committee

2. Committee Name \_\_\_\_\_

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: <b>Thomas Wieder</b> <b>2445 Newport Rd</b> <b>Ann Arbor, MI 48103</b>  If over \$100.00 cumulative, please provide: Occupation <b>Attorney</b>  Employer Name & Address: <b>self</b> <b>same</b>  <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input checked="" 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: <u>7/20/18 - 10/21/18</u> 6. VENDOR NAME & ADDRESS: _____	\$ <u>11,250</u>	\$ <u>12,000</u>
Contribution #2 Name & Address: <b>Kathleen Fojtik Stroud</b> <b>2271 Placid Way</b> <b>Ann Arbor, MI 48105</b>  If over \$100.00 cumulative, please provide: Occupation <b>retired</b>  Employer Name & Address: <b>n/a</b>  <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN  Description <u>Display ad</u> 5. DATE OF RECEIPT: <u>10/18/18</u> 6. VENDOR NAME & ADDRESS: <b>Ann Arbor Observer</b>	\$ <u>1,078.20</u>	\$ <u>1,078.20</u>
Contribution #3 Name & Address: <b>Frank Wilhelme</b> <b>1405 Lutz</b> <b>Ann Arbor, MI 48103</b>  If over \$100.00 cumulative, please provide: Occupation <b>retired</b>  Employer Name & Address: <b>n/a</b>  <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN  Description <u>photocopying</u> 5. DATE OF RECEIPT: <u>10/01/18</u> 6. VENDOR NAME & ADDRESS: <b>Dollar Bill Copying</b> <b>611 Church St</b> <b>Ann Arbor, MI 04</b>	\$ <u>45.95</u>	\$ <u>45.95</u>

Page Subtotal

12,374.15

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

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line 6a of  
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