



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: Oct 22 2018 To Nov 26 2018

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

4. Committee's Mailing Address 1407 Wakefield Ave.  
Ann Arbor, MI 48103

2. Committee Name  
Ann Arbor Central Park Ballot Committee

Area Code and Phone: 734-649-3207  
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  
3424 Stowe Street. Ann Arbor. MI 48103  
Area Code and Phone 734-649-3207

6. Treasurer's Business Address

1407 Wakefield Ave.  
Ann Arbor, MI 48103

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

N/A

Area Code and Phone

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.

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

Type or Print Name

Signature



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 4E  
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number C-2018-063

2. Committee Name Ann Arbor Central Park Ballot Committee

This Schedule itemizes:

(Check either a or b. Use only for the purpose checked.)

a.  Debts and obligations owed by or forgiven the committee OR b.  Debts and obligations owed to or forgiven by the committee.

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description)  5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 Owed to or by: Mary Hathaway 1407 Wakefield Ave. Ann Arbor, MI 48103	4. Type: <u>loan</u>  5. <u>Date Debt Was Incurred</u> <u>3/29/18</u>  6. <u>Original Amount of Debt</u> <u>\$ 1,500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 1,500
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: Will Hathaway 3424 Stowe Street Ann Arbor, MI 48103	4. Type: <u>loan</u>  5. <u>Date Debt Was Incurred</u> <u>3/29/18</u>  6. <u>Original Amount of Debt</u> <u>\$ 1,500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 1,500
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: Mary Hathaway 1407 Wakefield Ave. Ann Arbor, MI 48103	4. Type: <u>loan</u>  5. <u>Date Debt Was Incurred</u> <u>6/7/18</u>  6. <u>Original Amount of Debt</u> <u>\$ 1,500</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ 0	\$ 1,500
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

FORGIVEN

FORGIVEN

FORGIVEN

Page Subtotal (Outstanding debt) **4,500**

Grand Total of all Schedules 4E  
(Complete on last page of Schedule showing amounts owed by or to the committee.)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by", or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 4E  
BALLOT QUESTION COMMITTEE

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

This Schedule itemizes: (Check either a or b. Use only for the purpose checked.)  
 a.  Debts and obligations owed by or forgiven the committee **OR** b.  Debts and obligations owed to or forgiven by the committee.

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description)	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 Owed to or by: Mary Hathaway 1407 Wakefield Ave. Ann Arbor, MI 48103	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>7/3/18</u> 6. <u>Original Amount of Debt</u> \$ <u>2,800</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>2,800</u>
<input type="checkbox"/> FORGIVEN				
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Owed to or by: Eric Lipson 1318 Rosewood St Ann Arbor, MI 48104-6229	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>7/13/18</u> 6. <u>Original Amount of Debt</u> \$ <u>250</u>	<u>10/3</u> \$ <u>250</u> \$ \$ \$ \$	\$ <u>250</u>	\$ <u>250</u>
<input type="checkbox"/> FORGIVEN				
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Owed to or by: Mary Hathaway 1407 Wakefield Ave. Ann Arbor, MI 48103	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>10/21/18</u> 6. <u>Original Amount of Debt</u> \$ <u>2,000</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>2,000</u>
<input type="checkbox"/> FORGIVEN				
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				4,800
Grand Total of all Schedules 4E (Complete on last page of Schedule showing amounts owed by or to the committee.)				9,300

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by", or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I. D. Number 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>Tom 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 <u>legal services</u>  5. DATE OF RECEIPT: <u>Nov. 5, 7, 9, 10, 11 &amp; 12</u> 6. VENDOR NAME & ADDRESS: Click Here for Memo Itemization	\$ <u>3,450</u>	\$ <u>15,450</u>
Contribution #2 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:  <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 <u>photocopying</u>  5. DATE OF RECEIPT: <u>10/25, 10/26, 11/5</u> 6. VENDOR NAME & ADDRESS: <b>Dollar Bill Copying</b> <b>611 Church Street</b> <b>Ann Arbor, MI 48104</b> Click Here for Memo Itemization	\$ <u>77.45</u>	\$ <u>170.98</u>
Contribution #3 Name & Address: <b>Will Hathaway</b> <b>3424 Stowe St</b> <b>Ann Arbor, MI 48103</b>  If over \$100.00 cumulative, please provide:  Occupation <b>Property Manager</b>  Employer Name & Address: <b>1407 Wakefield Ave.</b> <b>Ann Arbor, MI 48103</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>late fee</u>  5. DATE OF RECEIPT: <u>11/2/18</u> 6. VENDOR NAME & ADDRESS: <b>County Clerk</b> <b>200 N. Main St.</b> <b>Ann Arbor, MI 48103</b> Click Here for Memo Itemization Type	\$ <u>25</u>	\$ <u>366.80</u>

Page Subtotal **3,552.45**

Grand Total of all Schedules 4-IK  
(Complete on last page of Schedule) **3,552.45**

Enter this total on  
line 6a of  
Summary Page