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: 06/01/16 To 07/17/16

1. Committee I.D. Number B-2006-012

4. Committee's Mailing Address PO Box 980689, Ypsilanti, MI 48198

2. Committee Name
STOP CITY INCREASING TAXES

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
Steve Pierce 118 S Washington St, Ypsilanti, MI 48197

Area Code and Phone (734) 252-9774

6. Treasurer's Business Address
118 S Washington St, Ypsilanti, MI 48197

Area Code and Phone (734) 252-9774

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

Area Code and Phone

FILED
WASHTENAW COUNTY, MI
2016 JUL 18 AM 9:23
LAWRENCE KESTENBAUM
COUNTY CLERK/REGISTER

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:
08/02/16

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 Steve Pierce (Type or Print Name) , Steve Pierce (Signature)

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

SUMMARY PAGE
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2006-012

2. Committee Name STOP CITY INCREASING TAXES

RECEIPTS		Column I This Period	Column II Cumulative for Election Cycle
3. Contributions			
a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) $	9,109.00	
b. Unitemized Contributions (less than $20.01 - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) $	9,109.00	(18.) $ 9,109.00
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) $		(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) $	9,109.00	(20.) $ 9,109.00
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions			
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) $	1,342.93	
b. Unitemized (less than $20.01 each - no Schedule)	(6b.) $	NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) $	1,342.93	(21.) $ 1,342.93
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) $	677.96	
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.) $	677.96	(22.) $ 677.96
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) $		(23.) $
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) $	677.96	(24.) $ 677.96
IN-KIND EXPENDITURES			
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) $		(25.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 4E)	(12a.) $	1,145.93	
b. Owed to the Committee (Schedule 4E)	(12b.) $		

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	0.00
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	9,109.00
15. SUBTOTAL Add lines 13 and 14	(15.) =	9,109.00
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	677.96
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	8,431.04

*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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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:
Anne Hooghart 909 Woods Rd. Ypsilanti MI 48197

4. Date of Receipt 06/02/16

$ 25 $ 25

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 # 2
Name & Address:
Karen Maurer 35 S Summit St Ypsilanti MI 48197

4. Date of Receipt 06/02/16

$ 500 $ 500

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Self

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3
Name & Address:
Ken Butman 1740 Superior Rd Ypsilanti MI 48198

4. Date of Receipt 06/02/16

$ 100 $ 100

Click Here for Memo Itemization

6. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4
Name & Address:
Robert Barnes 520 W Cross St Ypsilanti MI 48197

4. Date of Receipt 06/02/16

$ 1000 $ 1000

Click Here for Memo Itemization

6. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Barnes and Barnes

Business Address 520 W Cross St Ypsilanti MI 48197

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal $1,625.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Tom Harrison 12 East Forrest Ypsilanti MI 48198 4. Date of Receipt 06/02/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Michigan Ladder Business Address 12 East Forrest Ypsilanti MI 48198 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 500 Click Here for Memo Itemization	$ 500
3. Contribution # 2 Name & Address: Bill Godfrey P.O. Box 8307 Ann Arbor MI 48107 4. Date of Receipt 06/02/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer EMU Apartments LLC Business Address P.O. Box 8307 Ann Arbor MI 48107 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 500 Click Here for Memo Itemization	$ 500
3. Contribution # 3 Name & Address: Margo Brown 1894 Whittaker Rd Ypsilanti MI 48197 4. Date of Receipt 06/02/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Campbell Title Business Address 1894 Whittaker Rd Ypsilanti MI 48197 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 200 Click Here for Memo Itemization	$ 200
3. Contribution # 4 Name & Address: John Wagner 22 N Washington St Ypsilanti MI 48197 4. Date of Receipt 06/02/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Populist Cleaning Business Address 22 N Washington St Ypsilanti MI 48197 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 750 Click Here for Memo Itemization	$ 750

Page Subtotal $1,950.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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:
Maxe Oberymeyer 703 Cambridge Ypsilanti MI 48197

4. Date of Receipt 06/14/16

$ 100 $ 100

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 # 2
Name & Address:
Becky Eller 708 Carver Ypsilanti MI 48197

4. Date of Receipt 06/14/16

$ 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 # 3
Name & Address:
Paul Shemon 111 Pearl St Ypsilanti MI 48197

4. Date of Receipt 06/14/16

$ 500 $ 500

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Congdons

Business Address 111 Pearl St Ypsilanti MI 48197

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4
Name & Address:
Hedger Breed PO Box 7364 Ann Arbor MI 48107

4. Date of Receipt 06/14/16

$ 200 $ 200

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Deforest-Ladd

Business Address PO Box 7364 Ann Arbor MI 48107

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

Please enter contributore 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: Ed Ridha 2316 Belgrade Notch St Ann Arbor MI 48103 4. Date of Receipt 06/14/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Notch LLC Business Address 2316 Belgrade Notch St Ann Arbor MI 48103 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 200 Click Here for Memo Itemization	$ 200
3. Contribution # 2 Name & Address: Deborah Laakko 110 Pearl St Ypsilanti MI 48197 4. Date of Receipt 06/14/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 100 Click Here for Memo Itemization	$ 100
3. Contribution # 3 Name & Address: David Hamilton 7846 Ramblewood Ypsilanti MI 48197 4. Date of Receipt 06/14/16 5. If over $100.00 cumulative, please provide: Occupation David Squared LLC Employer David Squared LLC Business Address 7846 Ramblewood Ypsilanti MI 48197 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 500 Click Here for Memo Itemization	$ 500
3. Contribution # 4 Name & Address: Sally Richie 1065 Maplewood Ypsilanti MI 48198 4. Date of Receipt 06/14/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Newell Block Business Address 1065 Maplewood Ypsilanti MI 48198 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 300 Click Here for Memo Itemization	$ 300
	Page Subtotal	$1,100.00
	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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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:
Rex Richie 1065 Maplewood Ypsilanti MI 48198

4. Date of Receipt 06/14/16

$ 250 $ 250

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Business Owner Employer Salex Mgt
Business Address 1065 Maplewood Ypsilanti MI 48198
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2
Name & Address:
none

4. Date of Receipt 06/14/16

$ $

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 # 3
Name & Address:
none

4. Date of Receipt

$ $

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
Name & Address:
Ari Allyn-Feuer 986 Madison St. Apt Ypsilanti MI 48197

4. Date of Receipt 06/25/16

$ 20 $ 20

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

Page Subtotal $270.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Pam Allyn 32 Richmond Ave Medford OR 97504 4. Date of Receipt 06/25/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 20	$ 20 Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Jim Fink 206 S Washington Ypsilanti MI 48197 4. Date of Receipt 06/25/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 25	$ 25 Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Beth Fink 206 S Washington Ypsilanti MI 48197 4. Date of Receipt 06/25/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 25	$ 25 Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Robert St. Peter 309 Miles Ypsilanti MI 48198 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 10	$ 10 Click Here for Memo Itemization

Page Subtotal $80.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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:
Wayne Bryant 4839 Munger Road Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 200 $ 200

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Business Owner Employer B/C Contractors
Business Address 4839 Munger Road Ypsilanti MI 48197
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2
Name & Address:
Gary Maxton 202 N Curry St Suite 100 Carson City NV 89703

4. Date of Receipt 06/27/16

$ 100 $ 100

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 # 3
Name & Address:
Mark Swanson 2446 Harding Ave Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 100 $ 100

Click Here for Memo Itemization

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

3. Contribution # 4
Name & Address:
Ken Hayes 209 Pearl St Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 200 $ 200

Click Here for Memo Itemization

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

Page Subtotal $600.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Armand Gervais 720 Carver Ave Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 15 Click Here for Memo Itemization	$ 15
3. Contribution # 2 Name & Address: Ione Gervais 720 Carver Ave Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 15 Click Here for Memo Itemization	$ 15
3. Contribution # 3 Name & Address: John Trojanowski 311 E Forest Ypsilanti MI 48198 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 25 Click Here for Memo Itemization	$ 25
3. Contribution # 4 Name & Address: Sylvia Sherba 1222 Elbridge St Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 10 Click Here for Memo Itemization	$ 10

Page Subtotal $65.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Cyril Berry 8545 Moon Rd Saline MI 48176 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 50	$ 50 Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Christine Berry 8545 Moon Rd Saline MI 48176 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 50	$ 50 Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Kristin Perkins 217 Woodward St Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 50	$ 50 Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Bill Magliano 217 Woodward St Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 50	$ 50 Click Here for Memo Itemization
	Page Subtotal	$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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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:
Patrick Quiin 703 Oxford Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 25 $ 25

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 # 2
Name & Address:
Angela Quiin 703 Oxford Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 25 $ 25

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 # 3
Name & Address:
Bev Buck 305 S Washington St Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 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
Name & Address:
Gerald Buck 305 S Washington St Ypsilanti MI 48197

4. Date of Receipt 06/27/16

$ 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

Page Subtotal $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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Judy Evers 1210 Elbridge Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 10 Click Here for Memo Itemization	$ 10
3. Contribution # 2 Name & Address: Steve Jentzen 112 S Washington St Ypsilanti MI 48197 4. Date of Receipt 06/27/16 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Jentzen Law Business Address 112 S Washington St Ypsilanti MI Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 125 Click Here for Memo Itemization	$ 125
3. Contribution # 3 Name & Address: Mary Jentzen 112 S Washington St Ypsilanti MI 48197 4. Date of Receipt _____ 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Jentzen Law Business Address 112 S Washington St Ypsilanti MI Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 125 Click Here for Memo Itemization	$ 125
3. Contribution # 4 Name & Address: Zachary Harding 916 Pearl St Ypsilanti MI 48197 4. Date of Receipt 07/05/16 5. If over $100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 9 Click Here for Memo Itemization	$ 9

Page Subtotal $269.00

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Marilyn Eller 715 Carver St Ypsilanti MI 48198 4. Date of Receipt 07/05/16 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 125	$ 125 Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Daniel Eller 715 Carver St Ypsilanti MI 48198 4. Date of Receipt 07/05/16 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 125	$ 125 Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Tom Lyke 460 Osband St Ypsilanti MI 48198 4. Date of Receipt 07/05/16 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 100	$ 100 Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Ann Savickas 812 Charles St Ypsilanti MI 48198 4. Date of Receipt 07/05/16 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 100	$ 100 Click Here for Memo Itemization
	Page Subtotal	$450.00
	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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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 07/05/16

Name & Address: Mitch Jerden 13740 Ridgewood Plymouth MI 48170

$ 250 | $ 250

Click Here for Memo Itemization

6. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Blackhawk Investment Group

Business Address 13740 Ridgewood Plymouth MI 48170

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2 — 4. Date of Receipt 07/12/16

Name & Address: John Thomas 324 Garland St Ypsilanti MI 48198

$ 25 | $ 25

Click Here for Memo Itemization

6. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 07/12/16

Name & Address: Karen Thomas 324 Garland St Ypsilanti MI 48198

$ 25 | $ 25

Click Here for Memo Itemization

6. 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 07/13/16

Name & Address: Rick Fischer 15 E Michigan Ave Ypsilanti MI 48198

$ 200 | $ 200

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Auto Dealer Employer Fischer Honda

Business Address 15 E Michigan Ave Ypsilanti MI 48198

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Jamie Schmunk 2008 S State Street Ann Arbor MI 48104 4. Date of Receipt 07/13/16 5. If over $100.00 cumulative, please provide: Occupation Real Estate Employer Wilson White Business Address 2008 S State Street Ann Arbor MI 48104 Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	$ 1000 Click Here for Memo Itemization	$ 1000
3. Contribution # 2 Name & Address: 4. Date of Receipt 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 # 3 Name & Address: 4. Date of Receipt 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: 4. Date of Receipt 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 $1,000.00

Grand Total of All Schedules 4A (Complete on last page of Schedule) $9,109.00

Enter this total on line 3a of Summary Page

Page 14 of 14

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Joanie Recker 1262 Shirley Dr Ypsilanti MI 48198 If over $100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☑ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description Shirts 5. DATE OF RECEIPT: 06/15/16 6. VENDOR NAME & ADDRESS: Heikks 133 W Michigan Ave, Ypsilanti, MI 48197	$ 75	$ 75 Click Here for Memo Itemization
Contribution #2 Name & Address: Michael Recker 1262 Shirley Ypsilanti MI 48198 If over $100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☑ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description Shirts 5. DATE OF RECEIPT: 06/15/16 6. VENDOR NAME & ADDRESS: Heikks 133 W Michigan Ave, Ypsilanti, MI 48197	$ 75	$ 75 Click Here for Memo Itemization
Contribution #3 Name & Address: Diana Hitchins 1231 Elbridge St Ypsilanti MI 48197 If over $100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☑ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description Stamps 5. DATE OF RECEIPT: 06/27/16 6. VENDOR NAME & ADDRESS: USPS 108 S. Adams, Ypsilanti, MI 48197	$ 47	$ 47 Click Here for Memo Itemization

Page Subtotal $197.00

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

Enter this total on line 6a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B-2006-012

2. Committee Name STOP CITY INCREASING TAXES

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: Mike Eller 22 N. Washington St, Ypsilanti, MI 48197 If over $100.00 cumulative, please provide: Occupation Business Owner Employer Name & Address: Populist Cleaners 22 N. Washington St, Ypsilanti, MI 48197 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☑ Goods or Services Purchased by Others - LOAN Description Printing 5. DATE OF RECEIPT: 07/15/16 6. VENDOR NAME & ADDRESS: Overnight Prints 7582 Las Vegas Blvd, Las Vegas, NV 89123	$ 793.43	$ 793.43 Click Here for Memo Itemization
Contribution #2 Name & Address: Mike Eller 22 N. Washington St, Ypsilanti, MI 48197 If over $100.00 cumulative, please provide: Occupation Business Owner Employer Name & Address: Populist Cleaners 22 N. Washington St, Ypsilanti, MI 48197 ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☑ Goods or Services Purchased by Others - LOAN Description Postage 5. DATE OF RECEIPT: 07/15/16 6. VENDOR NAME & ADDRESS: USPS 108 S. Adams, Ypsilanti, MI 48197	$ 352.50	$ 1145.93 Click Here for Memo Itemization
Contribution #3 Name & Address: If over $100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description 5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS:	$	$ Click Here for Memo Itemization

Page Subtotal	$1,145.93
Grand Total of all Schedules 4-IK (Complete on last page of Schedule)	$1,342.93

Enter this total on line 6a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 4E
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2006-12
2. Committee Name STOP CITY INCREASING TAXES

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: Mike Eller 22 N. Washington St, Ypsilanti, MI 48197	4. Type: Debt 5. Date Debt Was Incurred 07/15/16 6. Original Amount of Debt $ 1,145.93	$ $ $ $ $	$	$ 1,145.93 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Owed to or by:	4. Type: 5. Date Debt Was Incurred 6. Original Amount of Debt $	$ $ $ $ $	$	$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Owed to or by:	4. Type: 5. Date Debt Was Incurred 6. Original Amount of Debt $	$ $ $ $ $	$	$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) $1,145.93

Grand Total of all Schedules 4E (Complete on last page of Schedule showing amounts owed by or to the committee.) $1,145.93

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

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.