



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS



B-2006-0120010

**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: 10/22/07 To 11/26/07

1. Committee I.D. Number **B2006012**

4. Committee's Mailing Address **309 Oak Street
Ypsilanti MI 48198**

2. Committee Name

Stop City Income Tax

Area Code and Phone (734) 557-4080

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) 482-9682

6. Treasurer's Business Address

**1013 San Mateo SE
Albuquerque, NM 87108**

Area Code and Phone (505) 349-3470

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

Area Code and Phone

8. TYPE OF STATEMENT:

8a. ☐ PRE-ELECTION

OR

8b. ☒ POST-ELECTION

Pre-Election or Post-Election Statement relates to:

☐ PRIMARY

☐ GENERAL

☐ SCHOOL

☒ SPECIAL

Date of Election:

11/06/07

8c. ☐ ANNUAL STATEMENT
(Coverage Year)

8d. ☐ QUALIFICATION
OR

☐ NON-QUALIFICATION
STATEMENT (Required of
State-wide Ballot Question
Committees Only)

Date of Qualification or Non-
Qualification:

8e. ☐ AMENDMENT TO CAMPAIGN
STATEMENT

(Complete Item 8a, 8b, 8c 8d, or 8f to
indicate which Statement is being amended)

8f. ☐ DISSOLUTION OF COMMITTEE

Effective Date of Dissolution

By checking this item, I certify that the
committee has no assets or outstanding debts,
including late filing fees. Note: The disposition
of residual funds must be reported on Schedule
4B and the Summary Page.

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

If any of the information listed in Items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or
Designated Record Keeper **Steve Pierce**

Type or Print Name

Signature

Date 12/06/07



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 Income Tax

RECEIPTS

	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>3,057.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>3,057.00</u>	(18.) \$ <u>11,369.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>3,057.00</u>	(20.) \$ <u>11,369.00</u>

IN-KIND CONTRIBUTIONS

6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>569.95</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>569.95</u>	(21.) \$ <u>3,842.58</u>

EXPENDITURES

8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>4,222.33</u>	
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.) \$ <u>0.00</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>4,222.33</u>	(22.) \$ <u>12,117.10</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>0.00</u>	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>4,222.33</u>	(24.) \$ <u>12,117.10</u>

IN-KIND EXPENDITURES

11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>0.00</u>	(25.) \$ <u>0.00</u>
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DEBTS AND OBLIGATIONS

12. Debts and Obligations	
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>0.00</u>
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>0.00</u>

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>1,165.33</u>
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>3,057.00</u>
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>4,222.33</u>
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>4,222.33</u>
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>0.00</u>

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 4A

BALLOT QUESTION COMMITTEE

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

2. Committee Name Stop City Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/26/07

Name & Address:

Peter B. Fletcher 25 S Huron St Ypsilanti MI
48197

\$ 500

\$ 1000

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

[Click Here for Memo Itemization Type](#)

Occupation Business Owner Employer Ypsilanti Credit Bureau

Business Address 25 S Huron St Ypsilanti MI 48197

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/29/07

Name & Address:

John Delcamp 309 Oak Ypsilanti MI 48198

\$ 200

\$ 350

[Click Here for Memo Itemization Type](#)

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

Occupation Tinsmith Employer GM

Business Address 2625 Tyler Rd, Ypsilanti MI

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

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/29/07

Name & Address:

Maxe Obermeyer 703 Cambridge Ypsilanti
MI 48197

\$ 100

\$ 200

[Click Here for Memo Itemization Type](#)

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

Occupation Business Owner Employer Self

Business Address 703 Cambridge Ypsilanti MI 48197

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

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/30/07

Name & Address:

Flo-Mar 119 Perrin Ypsilanti MI 48197

\$ 100

\$ 100

[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal \$900.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 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-2006-012**

2. Committee Name **Stop City Income Tax**

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Rick Fischer 3751 Highcrest Brighton MI 48116	4. Date of Receipt 10/31/07	\$ 250	\$ 250
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer <u>Fischer Honda</u> Business Address <u>15 E Michigan Ave, Ypsilanti, MI 48198</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 Type	
3. Contribution # 2 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Maximum LLC 23 N Washington St Ypsilanti MI 48197	4. Date of Receipt 10/31/07	\$ 250	\$ 250
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 3 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Toni Deas 14 Oak St Ypsilanti MI 48198	4. Date of Receipt 10/31/07	\$ 10	\$ 10
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 4 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Daniel & Marilyn Eller 306 Maple Ypsilanti MI 48198	4. Date of Receipt 10/31/07	\$ 50	\$ 75
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	

Page Subtotal **\$560.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2006-0122. Committee Name Stop City Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES4. Date of Receipt 10/31/07

Name & Address:

U-Brew 1486 Washtenaw Ypsilanti MI 48197\$ 50\$ 50

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/01/07

Name & Address:

Barb Hagadorn 77 Greenside Ypsilanti MI 48197\$ 20\$ 20[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/21/07

Name & Address:

John Wagner 113 N Hamilton Ypsilanti MI 48197\$ 50\$ 75[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/02/07

Name & Address:

Thomas Sanford 676 Woodhill Dr Saline MI 48176\$ 99\$ 99[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund RaiserPage Subtotal **\$219.00**Grand Total of All Schedules 2A
(Complete on last page of Schedule)Enter this total
on line 3 of
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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 Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/21/07

Name & Address:

Gwen Rudd 16771 Cavanaugh Lake Rd
Chelsea MI 48118

\$ 99

\$ 99

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/03/07

Name & Address:

Hal Hagadorn 77 Greenside Ypsilanti MI
48197

\$ 99

\$ 99

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/03/07

Name & Address:

Productive Management 8 N Mansfield
Ypsilanti MI 48197

\$ 100

\$ 100

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/04/07

Name & Address:

Gail Kornbluth 737 N Mansfield Ypsilanti MI
48197

\$ 100

\$ 100

[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal **\$398.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
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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 Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/04/07

Name & Address:

Elizabeth Tilden 320 S Huron Ypsilanti MI
48197

\$ 25

\$ 35

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/05/07

Name & Address:

Elaine Hunt 508 N River Ypsilanti MI 48198

\$ 35

\$ 35

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/06/07

Name & Address:

Valora Tooson 107 Middle Ypsilanti MI 48197

\$ 20

\$ 20

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/06/07

Name & Address:

Lee Tooson 107 Middle Ypsilanti MI 48197

\$ 20

\$ 20

[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal **\$100.00**

Grand Total of All Schedules 2A
(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 B-2006-0122. Committee Name Stop City Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/06/07

Name & Address:

Peter Murdock 504 N River Ypsilanti MI
48197

\$ 10\$ 10

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

Click Here for Memo Itemization Type

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/08/07

Name & Address:

Charles & Ann Kettles 1306 W Cross
Ypsilanti MI 48197

\$ 100\$ 150

Click Here for Memo Itemization Type

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

Occupation Retired Employer _____

Business Address _____

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

3. Contribution # 3

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/09/07

Name & Address:

Jane Ramp 1105 Pearl Ypsilanti MI 48197

\$ 50\$ 50

Click Here for Memo Itemization Type

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

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/09/07

Name & Address:

Susan Moeller 1301 Roosevelt Ypsilanti MI
48197

\$ 100\$ 300

Click Here for Memo Itemization Type

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

Occupation Professor Employer Eastern MichiganBusiness Address 1000 College Place Ypsilanti MI 48197Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$260.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
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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 Income Tax**

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/15/07

Name & Address:

Huron Podiatry 101 S Adams Ypsilanti MI
48197

\$ 20

\$ 20

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/19/07

Name & Address:

Flo-Mar 119 Perrin Ypsilanti MI 48197

\$ 100

\$ 200

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/19/07

Name & Address:

Joseph D Lawrence 212 S Huron St Ypsilanti
MI 48197

\$ 300

\$ 600

[Click Here for Memo Itemization Type](#)

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

Occupation Retired Employer _____

Business Address _____

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

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 11/20/07

Name & Address:

Pattie Boettner 815 E Cross Ypsilanti MI
48198

\$ 50

\$ 50

[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal **\$470.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2006-0122. Committee Name Stop City Income Tax

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/25/07

Name & Address:

Mark Swanson 119 W Michigan Ypsilanti MI
48197

\$ 50\$ 100

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES4. Date of Receipt 11/27/07

Name & Address:

PRP Management 517 Washtenaw Ypsilanti
MI 48197

\$ 100\$ 100[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

[Click Here for Memo Itemization Type](#)

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

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

[Click Here for Memo Itemization Type](#)

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund RaiserPage Subtotal **\$150.00**Grand Total of All Schedules 2A
(Complete on last page of Schedule) **\$3,057.00**

Enter this total
on line 3 of
Summary
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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 B-2006-012

2. Committee Name Stop City Income Tax

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: Steve Pierce 118 S Washington St Ypsilanti, MI 48197 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Phone</u> 5. DATE OF RECEIPT: <u>11/21/07</u> 6. VENDOR NAME & ADDRESS: Accessline Department LA 22266, Pasadena, CA 91185-2266	\$ <u>7.45</u>	\$ <u>7.45</u>
<input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type		
Contribution #2 Name & Address: Cameron Getto 305 Maple Ypsilanti, MI 48198 If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer Name & Address: McKeen & Associates, P.C. 645 Griswold Street, Suite 4200 Detroit, MI 48226-3344	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>11/04/07</u> 6. VENDOR NAME & ADDRESS:	\$ <u>562.50</u>	\$ <u>1727.50</u>
<input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type		
Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type		

Page Subtotal

\$569.95

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

\$569.95

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

1. Committee I. D. Number **B2006012**

BALLOT QUESTION COMMITTEE

2. Committee Name **Stop City Income Tax**

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: Standard Printing 120 E Cross, Ypsilanti, MI 48197	4. Purpose: Printing 5. Ballot Proposal: City Income Tax	10/21/07 Date of Expenditure	\$ 1,233.84	\$ 3896.56
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: Washtenaw <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: USPS 1606 South Huron Street, Ypsilanti, MI 48197	4. Purpose: Postage 5. Ballot Proposal: City Income Tax	10/26/07 Date of Expenditure	\$ 506.60	\$ 3743.17
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: Washtenaw <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: USPS 1606 South Huron Street, Ypsilanti, MI 48197	4. Purpose: Postage 5. Ballot Proposal: City Income Tax	10/30/07 Date of Expenditure	\$ 488.80	\$ 4231.97
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: _____ <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: USPS 1606 South Huron Street, Ypsilanti, MI 48197	4. Purpose: Postage 5. Ballot Proposal: City Income Tax	11/20/07 Date of Expenditure	\$ 41.52	\$ 4273.49
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: _____ <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page

\$2,270.76

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

\$2,270.76

Enter this total
on Line 8a of
the Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2006012

2. Committee Name Stop City Income Tax

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: Print-tech 6800 Jackson Rd Ann Arbor, MI 48103-9565	4. Purpose: <u>Printing</u> 5. Ballot Proposal: <u>City Income Tax</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	10/26/07 Date of Expenditure	\$ <u>168.88</u>	\$ <u>1547.66</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type			
Expenditure # 2 Name & Address: Print-tech 6800 Jackson Rd Ann Arbor, MI 48103-9565	4. Purpose: <u>Printing</u> 5. Ballot Proposal: <u>City Income Tax</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	10/30/07 Date of Expenditure	\$ <u>188.72</u>	\$ <u>1736.38</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type			
Expenditure # 3 Name & Address: Complete Campaign 610 Gateway Center Way, Suite K San Diego, CA 92102	4. Purpose: <u>Bank Fees</u> 5. Ballot Proposal: <u>City Income Tax</u> County: _____ <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	11/15/07 Date of Expenditure	\$ <u>14.85</u>	\$ <u>17.18</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type			
Expenditure # 4 Name & Address: Maggie Brandt 118 S Washington St Ypsilanti, MI 48197	4. Purpose: <u>Repay loan</u> 5. Ballot Proposal: <u>City Income Tax</u> County: _____ <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	11/25/07 Date of Expenditure	\$ <u>1579.12</u>	\$ <u>1579.12</u>
<input checked="" type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type			

Subtotal this page

\$1,951.57

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

\$4,222.33

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the Summary
Page