



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**BALLOT QUESTION
COMMITTEE
COVER PAGE**

Report must be legible, typed or printed in ink, and signed by the treasurer or the committee's designated recordkeeper.

1. Committee I.D. Number
114418

2. This Statement Covers
From: 11/11/98
To: 12/31/98

3. Committee Name
CITIZEN
ALLIANCE
COMMITTEE

WASHTON
JAN 23 11 57 AM '99
COUNTY CLERK'S OFFICE

4. Committee's Mailing Address
411 Orchard Hills
Ann Arbor, MI 48104

Area Code and Phone (734) 994-1049

5. Treasurer's Name and Residential Address
Mickel B. Lissvi
411 Orchard Hills
Ann Arbor, MI 48104

Area Code and Phone (734) 663-7125

6. Treasurer's Business Address
P.O. Box 7235
Ann Arbor, MI 48107

Area Code and Phone (734) 994-1049

7. Designated Recordkeeper's Name and Address (if the committee has a Designated Recordkeeper)
Area Code and Phone

8. TYPE OF STATEMENT

a. Pre-election Campaign Statement
OR
b. Post-election Campaign Statement

Pre-election or Post-election Statement relates to:
 Primary School
 General Special

Date of Election
mo day yr

c. Annual Statement
(1998 Coverage Year)

d. Qualification or Non-Qualification Statement
(Required of statewide Ballot Question Committees only.)
Date of Qualification or Non-Qualification:
mo day yr

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

f. Dissolution of Committee
Date of Dissolution
mo day yr

By checking this item, I certify that the committee has no assets or outstanding debts. Residual funds were disposed of as follows:

• A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules.

• If any of the information listed in items 3, 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 must be filed.

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.

Treasurer or Designated Recordkeeper Mickel B. Lissvi Signature [Signature] Date Jan 29 1999

Type or Print Name



B-1144180011



SUMMARY PAGE BALLOT QUESTION COMMITTEE

Column I
This Period

Column II
Cumulative for Election

RECEIPTS

1. Contributions

a. Itemized (use Schedule 4A) (1a.) \$ 142.04

b. Unitemized (no Schedule) (1b.) \$ _____

c. Subtotal of Contributions (1c.) \$ 35.07

2. Other Receipts (2.) \$ 177.14

3. TOTAL RECEIPTS (3.) \$ _____

(1c.) \$ _____

(2.) \$ _____

(3.) \$ _____

EXPENDITURES

4. Direct Expenditures

a. Itemized (use Schedule 4B) (4a.) \$ _____

b. Unitemized (no Schedule) (4b.) \$ _____

c. Subtotal of Expenditures (4c.) \$ _____

5. Independent Expenditures (use Schedule 4B) (5.) \$ _____

6. TOTAL EXPENDITURES (6.) \$ _____

(4c.) \$ _____

(5.) \$ _____

(6.) \$ _____

IN-KIND CONTRIBUTIONS

7. In-kind Contributions Received

a. Itemized (use Schedule 4A) (7a.) \$ _____

b. Unitemized (no Schedule) (7b.) \$ _____

8. TOTAL IN-KIND CONTRIBUTIONS (8.) \$ _____

(8.) \$ _____

IN-KIND EXPENDITURES

9. Total In-kind Expenditures (use Schedule 4B) (9.) \$ _____

(9.) \$ _____

DEBITS AND OBLIGATIONS

10. Debts and Obligations

a. Owed by the Committee (use Schedule 4E) (10a.) \$ _____

b. Owed to the Committee (use Schedule 4E) (10b.) \$ _____

BALANCE STATEMENT

11. Ending balance of last report filed (enter zero if no reports have been filed) (11.) \$ 808.06

12. Amount received during reporting period (line 3, Total Receipts) (12.) + 177.14

13. Add lines 11 and 12 (13.) = 985.20

14. Amount expended during reporting period (line 6, Total Expenditures) (14.) - 985.20

15. ENDING BALANCE (subtract line 14 from line 13) (15.) \$ _____

