



FILED

JAN 10 2002

**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: 11/1/2001 To 12/31/2001
Mo Day Year Mo Day Year

1. Committee I.D. Number

B-114418

4. Committee's Mailing Address

411 Orchard Hills
Ann Arbor MI 48104

2. Committee Name

CITIZENS MILLAGE
COMMITTEE

Area Code and Phone (734) 994-1049

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

Michael B. Lisuli
411 Orchard Hills
Ann Arbor, MI 48104

Area Code and Phone 734 994-1049

Driver License # (Optional)

6. Treasurer's Business Address

411 Orchard Hills

Area Code and Phone

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

Area Code and Phone

Driver License # (Optional)

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:

____ Month ____ Day ____ Year

8c. ANNUAL STATEMENT

(12001) Coverage Year

8d. QUALIFICATION

OR

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

Date of Qualification or Non-Qualification:

____ Month ____ Day ____ Year

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
____ Month ____ Day ____ Year

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.

10. 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/lour knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Recordkeeper Michael B. Lisuli
Type or Print Name

[Signature]
Signature

Date 1/29/2002
Month Day Year

Authority granted under





**ITEMIZED OTHER RECEIPTS
SCHEDULE 4A-1
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-114418
2. Committee Name CITIZENS MILLAGE COMMITTEE

Name & Address From Whom Received	Type of Receipt	6. Amount
Receipt #1 UNIVERSITY BANK 959 MAIDEN LANE ANN ARBOR MI 48105 Date of Receipt <u>2001</u>	<input type="checkbox"/> Loan from a Lending Institution <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	5.68
Receipt #2 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #3 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #4 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #5 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #6 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #7 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #8 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #9 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #10 Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Other (Specify) _____	

Page Subtotal
Grand Total of All Schedules 4A -1
(Complete on last page of Schedule)

5.68
5.68

Enter this total
on line 4 of
Summary
Page



**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-114418
2. Committee Name CITIZENS MILLAGE COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative for Election
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ _____	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ _____	
c. Subtotal of "Contributions"	(3c.) \$ _____	(18.) \$ _____
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>5.68</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>5.68</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ _____	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ _____	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>- 0 -</u>	(21.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 8a)	(8a.) \$ _____	
b. Itemized Get-Out-the Vote (Schedule B-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.) \$ <u>12.00</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>12.00</u>	(22.) \$ _____
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>12.00</u>	(24.) \$ _____
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.) \$ <u>- 0 -</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>- 0 -</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>408.27</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>5.68</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>413.95</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>12.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>401.95</u>	

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold. All required schedule pages must be included with this statement. *If your ending balance is negative, please recheck your math.
Authority granted under P.A. 388 of 1976