



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

2008 JUN -5 10:16
WASHTENAW COUNTY, MI

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.

1. Committee I.D. Number **B114418**

2. Committee Name
Citizens' Millage Committee

3. This Statement covers From: 04/20/08 To 05/26/08

4. Committee's Mailing Address **PO Box 7535
Ann Arbor, MI 48107-7535**

Area Code and Phone (734) 995-5934
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
**Christine Stead
515 Huronview Blvd.
Ann Arbor, MI 48103**

Area Code and Phone (734) 662-1167

6. Treasurer's Business Address
same

Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address
(If the committee has a Designated Record Keeper)
**Steven Norton
1217 Olivia Ave
Ann Arbor, MI 48104**

Area Code and Phone (734) 995-5934

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:
05/06/08

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 Steven J Norton
Type or Print Name [Signature] Signature Date 06/05/08



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B114418

2. Committee Name Citizens' Millage Committee

	Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>5,255.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>6,255.00</u>	(18.) \$ <u>8,505.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>6,396.20</u>	(19.) \$ <u>6,396.20</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>12,651.20</u>	(20.) \$ <u>14,901.20</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-1K, Column 7)	(6a.) \$ _____	
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.) \$ _____	(21.) \$ <u>128.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>10,802.18</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.) \$ _____	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ _____	
e. Subtotal of Expenditures	(8e.) \$ <u>10,802.18</u>	(22.) \$ <u>13,017.16</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>10,802.18</u>	(24.) \$ <u>13,017.16</u>
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>6,396.20</u>	
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.) \$ <u>35.02</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>12,651.20</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>12,686.22</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>10,802.18</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1,884.04</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 B114418

2. Committee Name Citizens' Millage Committee

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 04/25/08

Name & Address:
Helen Starman
2201 Brockman Blvd.
Ann Arbor, MI 48104

\$ 200 \$ 200

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

[Click Here for Memo Itemization](#)

Occupation not employed Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2

4. Date of Receipt 04/28/08

Name & Address:
TMP Architecture
1191 West Square Lake Rd., Box 289
Bloomfield Hills, MI 48302

\$ 500 \$ 500

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3

4. Date of Receipt 04/28/08

Name & Address:
Mitchell & Mouat Architects
113 S. Fourth Ave.
Ann Arbor, MI 48104

\$ 250 \$ 250

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4

4. Date of Receipt 04/28/08

Name & Address:
Barton Malow Co.
26500 American Drive
Southfield, MI 48034

\$ 1000 \$ 1000

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

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 B114418

2. Committee Name Citizens' Millage Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

3. Contribution # 1
Name & Address: Janice Lieberman
1504 Shadford Rd.
Ann Arbor, MI 48104

4. Date of Receipt 04/28/08

6. Amount \$ 25

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2
Name & Address: Kara Flora
1269 Millbrook Trail
Ann Arbor, MI 48108

4. Date of Receipt 04/28/08

6. Amount \$ 20

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 20

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Name & Address: Cesar Delgado
1401 McIntyre Dr.
Ann Arbor, MI 48105

4. Date of Receipt 04/29/08

6. Amount \$ 25

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Name & Address: Loralee Rupp
4216 Spring Lake Blvd.
Ann Arbor, MI 48108

4. Date of Receipt 04/29/08

6. Amount \$ 25

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

\$95.00

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 B114418

2. Committee Name Citizens' Millage Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

3. Contribution # Name & Address:	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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3. Contribution # 1 Name & Address: Collins & Blaha 31700 Middlebelt Rd. Suite 125 Farmington Hills, MI 48334	4. Date of Receipt <u>04/30/08</u>	\$ <u>100</u>	\$ <u>100</u>
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	

3. Contribution # 2 Name & Address: Sheng Liao 5655 Meadow Dr. Ann Arbor, MI 48105	4. Date of Receipt <u>04/30/08</u>	\$ <u>50</u>	\$ <u>50</u>
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	

3. Contribution # 3 Name & Address: Cynthia Page-Bogen 1081 Bandera Dr Ann Arbor, MI 48103	4. Date of Receipt <u>05/02/08</u>	\$ <u>40</u>	\$ <u>40</u>
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	

3. Contribution # 4 Name & Address: Norman & Debbie Herbert 3681 Wagner Ridge Ct Ann Arbor, MI 48103	4. Date of Receipt <u>05/03/08</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>consultant</u> Employer <u>self-employed</u> 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	

Page Subtotal **\$290.00**

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

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B114418
2. Committee Name Citizens' Millage Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

3. Contribution # 1 Name & Address:	4. Date of Receipt <u>05/04/08</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Alexander MacInnis
2370 E. Stadium Blvd, # 42
Ann Arbor, MI 48104

\$ 200 \$ 200

5. If over \$100.00 cumulative, please provide:
Occupation Engineer Employer Broadcom Corporation
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 2 Name & Address:	4. Date of Receipt <u>05/05/08</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Bank of Ann Arbor
125 S. Fifth Ave
Ann Arbor, MI 48104

\$ 250 \$ 250

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 <u>05/05/08</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Marian Tanau
1407 Ferdon
Ann Arbor, MI 48104

\$ 50 \$ 50

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 <u>05/05/08</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Suzanne Ross
2015 E. Stadium Blvd.
Ann Arbor, MI 48104

\$ 35 \$ 35

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 **\$535.00**

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 B114418

2. Committee Name Citizens' Millage Committee

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)
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3. Contribution # 1 Name & Address: David Martel 4113 North Delhi Rd. Ann Arbor, MI 48103	4. Date of Receipt <u>05/05/08</u>	\$ <u>25</u>	\$ <u>25</u>
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	

3. Contribution # 2 Name & Address: Wendy & Richard Correll 2956 Provincial Dr Ann Arbor, MI 48104	4. Date of Receipt <u>05/06/08</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>AAPS Educational Foundation</u> 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	

3. Contribution # 3 Name & Address: Arlene Song 304 N Revena Blvd Ann Arbor, MI 48103	4. Date of Receipt <u>05/06/08</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer <u>Univ. of Michigan Health System</u> 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	

3. Contribution # 4 Name & Address: Christina Perros 2710 Englave Dr Ann Arbor, MI 48103	4. Date of Receipt <u>05/06/08</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>Absolute Title</u> 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	

Page Subtotal

\$575.00

Grand Total of All Schedules 4A
(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 B114418

2. Committee Name Citizens' Millage Committee

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)
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3. Contribution # 1
Name & Address: Ingrid Sheldon
1416 Folkstone Ct
Ann Arbor, MI 48105

4. Date of Receipt 05/06/08

\$ 200 \$ 200

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation bookkeeper Employer self-employed

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2
Name & Address: Gary Calhoun
300 Huntington Dr.
Ann Arbor, MI 48104

4. Date of Receipt 05/07/08

\$ 50 \$ 50

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Name & Address: Debra Mexicotte
2660 Yost Blvd.
Ann Arbor, MI 48104

4. Date of Receipt 05/07/08

\$ 100 \$ 100

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation Program Manager Employer University of Michigan

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Name & Address: Kathy Morhous
1745 Weatherhill Dr.
Dexter, MI 48130

4. Date of Receipt 05/08/08

\$ 25 \$ 25

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **\$375.00**

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

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B114418

2. Committee Name Citizens' Millage Committee

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)
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3. Contribution # 1 Name & Address: Dykema Gossett State PAC 201 Townsend St. Suite 900 Lansing, MI 48933	4. Date of Receipt <u>05/10/08</u>	\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 2 Name & Address: Joan Hawki 2308 Buckingham Rd. Ann Arbor, MI 48104	4. Date of Receipt <u>05/12/08</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 3 Name & Address: Kate Markel 1522 Granger Ave. Ann Arbor, MI 48104	4. Date of Receipt <u>05/12/08</u>	\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

3. Contribution # 4 Name & Address: Jeannette Jackson 1207 Gardner Ave. Ann Arbor, MI 48104	4. Date of Receipt <u>05/19/08</u>	\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>TransForum Consulting</u> Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,135.00**

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 B114418

2. Committee Name Citizens' Millage Committee

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: Deborah Tirico 2320 Tall Oaks Dr. Ann Arbor, MI 48103		\$ 300	\$ 300
4. Date of Receipt <u>05/21/08</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Sportscaster</u> Employer <u>ESPN</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Johnson Controls, Inc 507 E Michigan St, PO Box 423 Milwaukee, WI 53201		\$ 1000	\$ 1000
4. Date of Receipt <u>05/13/08</u>		Click Here for Memo Itemization	
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			
3. Contribution # 3 Name & Address:		\$ _____	\$ _____
4. Date of Receipt _____		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address:		\$ _____	\$ _____
4. Date of Receipt _____		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,300.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **\$6,255.00**

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 4A-1
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B114418

2. Committee Name Citizens' Millage Committee

3. Name & Address From Whom Received Receipt	4. Date of	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: Christine Stead 515 HuronView Blvd Ann Arbor, MI 48103	Date of Receipt <u>04/30/08</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input checked="" type="checkbox"/> Other (Specify) <u>personal loan</u>	\$ <u>2200.00</u>
Receipt #2 Name & Address: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104	Date of Receipt <u>04/30/08</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input checked="" type="checkbox"/> Other (Specify) <u>personal loan</u>	\$ <u>4196.20</u>
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest Click Here for Memo Itemization Type <input type="checkbox"/> Refund\Rebate <input type="checkbox"/> Fund Raiser <input type="checkbox"/> Other (Specify) _____	\$ _____
Page Subtotal			\$6,396.20
Grand Total of All Schedules 4A -1 (Complete on last page of Schedule)			\$6,396.20

Enter this total on
line 4 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number B114418

2. Committee Name Citizens' Millage Committee

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: Mitchell & Mouat Architects 113 S. Fourth Ave. Ann Arbor, MI 48104	4. Purpose: <u>return of excess contribution</u> 5. Ballot Proposal: <u>AAPS school millages</u>	<u>05/07/08</u> Date of Expenditure	<u>\$ 250</u>	<u>\$ 250</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: Unit Packaging Corp. 119 Enterprise Dr. Ann Arbor, MI 48103	4. Purpose: <u>mailing services & postage</u> 5. Ballot Proposal: <u>AAPS school millages</u>	<u>04/21/08</u> Date of Expenditure	<u>\$ 4586.20</u>	<u>\$ 7652.70</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: Dollar Bill Copying 611 Church St. Ann Arbor, MI 48104	4. Purpose: <u>flyer printing</u> 5. Ballot Proposal: <u>AAPS school millages</u>	<u>04/24/08</u> Date of Expenditure	<u>\$ 307.40</u>	<u>\$ 307.40</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: SS Graphics, Inc. 4176 6th St. Wyandotte, MI 48192	4. Purpose: <u>yard signs</u> 5. Ballot Proposal: <u>AAPS school millages</u>	<u>04/25/08</u> Date of Expenditure	<u>\$ 885.10</u>	<u>\$ 885.10</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page **\$6,028.70**
 Grand Total of Schedules 4B
 (Complete on last page of Schedule)

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 B114418

2. Committee Name Citizens' Millage Committee

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: White Pine Printing 5204 Jackson Rd Ann Arbor, MI 48103	4. Purpose: <u>postcard printing</u> 5. Ballot Proposal: <u>AAPS school millages</u>	04/30/08 Date of Expenditure	\$ <u>1309.10</u>	\$ <u>2907.58</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: Unit Packaging Corp. 119 Enterprise Dr. Ann Arbor, MI 48103	4. Purpose: <u>mailing services & postage</u> 5. Ballot Proposal: <u>AAPS school millages</u>	05/13/08 Date of Expenditure	\$ <u>3066.50</u>	\$ <u>7652.70</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: West Liberty Information LLC 3840 Michael Rd. N Ann Arbor, MI 48103	4. Purpose: <u>mailing lists</u> 5. Ballot Proposal: <u>AAPS school millages</u>	05/10/08 Date of Expenditure	\$ <u>397.88</u>	\$ <u>397.88</u>
<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 type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page **\$4,773.48**

Grand Total of Schedules 4B
(Complete on last page of Schedule) **\$10,802.18**

Enter this total
on Line 8a of
the Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS
SCHEDULE 4E
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B114418

2. Committee Name Citizens' Millage 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: Christine Stead 515 Huronview Blvd. Ann Arbor, MI 48103	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>04/30/08</u> 6. <u>Original Amount of Debt</u> \$ <u>2,200.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>2,200.00</u>

FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Owed to or by: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>04/30/08</u> 6. <u>Original Amount of Debt</u> \$ <u>4,196.20</u>	\$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>4,196.20</u>
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FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred</u> _____ 6. <u>Original Amount of Debt</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____
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FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt) **\$6,396.20**

Grand Total of all Schedules 4E (Complete on last page of Schedule showing amounts owed by or to the committee.) **\$6,396.20**

debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of is 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