



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: 10/21/13 To 11/25/13

1. Committee I.D. Number **B-114418**

4. Committee's Mailing Address **PO Box 8131
Ann Arbor, MI 48104**

2. Committee Name
Ann Arbor Citizens Millage Committee

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 **Steven J. Norton
1217 Olivia Ave
Ann Arbor, MI 48104**

Area Code and Phone **(734) 730-2216**

6. Treasurer's Business Address
same

Area Code and Phone **(734) 995-5934**

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:
11/05/13

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.

FILED
 WASHINGTON COUNTY, MI
 2013 DEC - 5 P 3:48
 LAWRENCE KESTERBAUM
 COUNTY CLERK/REGISTRAR

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**  Date **12/04/13**

Type or Print Name Signature



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-114418

2. Committee Name Ann Arbor Citizens Millage Committee

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>2,355.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>2,355.00</u>	(18.) \$ <u>7,955.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>2,355.00</u>	(20.) \$ <u>7,955.00</u>
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.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ _____	(21.) \$ <u>1,613.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>5,239.83</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>5,239.83</u>	(22.) \$ <u>7,755.80</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>5,239.83</u>	(24.) \$ <u>7,755.80</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.) \$ _____	
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>3,391.45</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>2,355.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>5,746.45</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>5,239.83</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>506.62</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-114418

2. Committee Name Ann Arbor 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: Steve Dobson 3350 Geddes Road Ann Arbor, MI 48105 4. Date of Receipt <u>10/22/13</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Norman Herbert 3681 Wagner Ridge Ct. Ann Arbor, MI 48103 4. Date of Receipt <u>10/22/13</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		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Leigh Greden 2860 Gladstone Ave Ann Arbor, MI 48104 4. Date of Receipt <u>10/22/13</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		\$ <u>30</u>	\$ <u>30</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Christopher Cerda 396 Burr Oak Dr Ann Arbor, MI 48103 4. Date of Receipt <u>10/22/13</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		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	

Page Subtotal **\$355.00**

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-114418

2. Committee Name Ann Arbor 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: R. Griffith McDonald 3906 Penberton Dr Ann Arbor, MI 48105		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>10/22/13</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: Eli Nathans 1210 Clague St Ann Arbor, MI 48103		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>10/22/13</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: Wendy Correll 2956 Provincial Ann Arbor, MI 48104		\$ <u>100</u>	\$ <u>100</u>
4. Date of Receipt <u>10/29/13</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: Great Lakes Environmental Service, Inc. 405 E. Five Mile Rd Whitmore Lake, MI 48189		\$ <u>250</u>	\$ <u>250</u>
4. Date of Receipt <u>10/29/13</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	

Page Subtotal **\$550.00**

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 B-114418

2. Committee Name Ann Arbor 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: Sally Allen 2224 Applewood Ct Ann Arbor, MI 48103		\$ <u>50</u>	\$ <u>50</u>
4. Date of Receipt <u>10/29/13</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 # 2 Name & Address: Margaret Emlaw 1320 King George Blvd Ann Arbor, MI 48108		\$ <u>25</u>	\$ <u>25</u>
4. Date of Receipt <u>10/29/13</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: Ann Arbor Education Assn. - PAC 4141 Jackson Rd Ann Arbor, MI 48103		\$ <u>500</u>	\$ <u>500</u>
4. Date of Receipt <u>10/31/13</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 # 4 Name & Address: Dr. Jeanice Swift 5860 Wilson Rd Colorado Springs, CO 80919		\$ <u>250</u>	\$ <u>500</u>
4. Date of Receipt <u>11/01/13</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Superintendent</u> Employer <u>AAPS</u> Business Address <u>2555 S. State St, Ann Arbor 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$825.00**

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

Enter this total
on line 3a 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-114418

2. Committee Name Ann Arbor 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: <u>Ann Arbor Administrators Association</u> <u>4377 Textile Rd</u> <u>Ypsilanti, MI 48197</u> 4. Date of Receipt <u>11/05/13</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	\$ <u>300</u>	\$ <u>300</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: <u>Sara Aeschbach</u> <u>620 Trego Circle</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>11/06/13</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	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: <u>Stauder, Barch & Associates</u> <u>3989 Research Park Drive</u> <u>Ann Arbor, MI 48108</u> 4. Date of Receipt <u>11/06/13</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	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: <u>Timothy Gruszczynski</u> <u>1052 Ross</u> <u>Plymouth, MI 48170</u> 4. Date of Receipt <u>11/22/13</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>AAPS</u> Business Address <u>2555 S. State St, Ann Arbor 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization

Page Subtotal **\$625.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **\$2,355.00**

Enter this total
on line 3a of
Summary
Page



**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B**

BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-114418

2. Committee Name Ann Arbor 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: Sawicki & Son, Inc. 1521 W. Lafayette Detroit, MI 48216 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>yard sign printing</u> 5. Ballot Proposal: <u>AAPS Sinking Fund</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	10/24/13 Date of Expenditure	\$ <u>3055.45</u> Click for Memo Itemization Type	\$ 3055.45
Expenditure # 2 Name & Address: West Liberty Information LLC 3840 Michael Rd. N Ann Arbor, MI 48103 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>mailing lists</u> 5. Ballot Proposal: <u>AAPS Sinking Fund</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	10/31/13 Date of Expenditure	\$ <u>571.38</u> Click for Memo Itemization Type	\$ 571.38
Expenditure # 3 Name & Address: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>repayment of loan</u> 5. Ballot Proposal: <u>AAPS Sinking Fund</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	11/22/13 Date of Expenditure	\$ <u>1143.00</u> Click for Memo Itemization Type	\$ 1143.00
Expenditure # 4 Name & Address: Glenn Nelson 1323 S Forest Ave Ann Arbor, MI 48104 <input checked="" type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>repayment of loan</u> 5. Ballot Proposal: <u>AAPS Sinking Fund</u> County: <u>Washtenaw</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	11/22/13 Date of Expenditure	\$ <u>470.00</u> Click for Memo Itemization Type	\$ 470.00

Subtotal this page

\$5,239.83

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

\$5,239.83

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 B-114418
2. Committee Name Ann Arbor 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. <small>If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.</small>	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: Steven Norton 1217 Olivia Ave Ann Arbor, MI 48104	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>09/27/13</u> 6. <u>Original Amount of Debt</u> <u>\$ 1,143.00</u>	11/22/13 \$ 1,143.00 _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ 1,143.00	\$ 0.00

FORGIVEN

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

Debt #2 Owed to or by: Glenn Nelson 1323 S. Forest Ave Ann Arbor, MI 48104	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred</u> <u>09/19/13</u> 6. <u>Original Amount of Debt</u> <u>\$ 470.00</u>	11/22/13 \$ 470.00 _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ 470.00	\$ 0.00
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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) **\$0.00**
Grand Total of all Schedules 4E **\$0.00**
(Complete on last page of Schedule showing amounts owed by or to the committee.)

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.

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