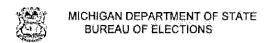


BALLOT QUESTION COMMITTEE COVER PAGE

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: 04/23/12 To 05/28/12				
1. Committee I.D. Number B-2006-012	4	. Committee's Mailing Addre	ess			
2. Committee Name						
Stop City Income Tax	i i	rea Code and Phone (734) the address in this box is dit e Statement of Organization ficial.	252-9774 fferent from the common, mail may be sent to	ilitee ma this add	iling addres ress by the	s on filing
5. Treasurer's Name and Residential Address Steve Pierce 118 S Washing Ypsilanti MI 48					2012	ANGUESAM Til
Area Code and Phone (734) 252-9774						10 124
6. Treasurer's Business Address	7. De	esignated Record Keeper's I the committee has a Design	Name and Mailing Ad	dress	ا لیــ	67 Ti
118 S Washington St Ypsilanti MI 48197	* ************************************	tio committee ride a societ	iatea record receptly		Ū ŧ:	W WALKOOO CE
Area Code and Phone (734) 252-9774	Area C	ode and Phone			ريا	7
8. TYPE OF STATEMENT: 8a. PRE- ELECTION	8c. 🗆	ANNUAL STATEMENT (Coverage Year)	8e. DAMENDMEN STATEMEN (Complete Item 8a Indicate which State)	IT.		(ed)
OR	8d.	QUALIFICATION			•	
8b. POST- ELECTION		OR	8f. DISSOLUTION	ON OF C	OMMITTEE	
Pre-Election or Post-Election Statement relates to: ☐ PRIMARY ☐ GENERAL ☐ SCHOOL ☑ SPECIAL	STATE State-v	ON-QUALIFICATION IMENT (Required of vide Ballot Question littees Only)	Effective Da	ate of Dis	ssolution	_
Date of Election: 05/08/12	Date	of Qualification or Non- Qualification:	By checking this iten committee has no as including late filing for of residual funds mu 4B and the Summan	n, I certif sets or researches. <u>Not</u> st be rep y Page.	y that the outstanding e: The dispo outed on So	debts, isltion hedule
					- 10 Hills	i.
A committee that does not have a Reporting Waiver must file all reschedules. Direct contributions, in-kind contributions, loans, experif any of the information listed in Items 4, 5, 6, or 7 has changed sin amendment to the Statement of Organization should accompany the or before the filling deadline of a required campaign statement,	ice the in	formation was shown on the	committee's Statement for a Reporting Wa	,		
Verification: I certify that all reasonable diligence was used in the my knowledge and belief the contents are true, accurate and coil.		ition of this statement and at	itached schedules (if	any) and	to the best	of
Current Treasurer or Designated Record Keeper Steve Pierce Type or Print Name		Signature	Date_	06/07/	12	



SUMMARY PAGE BALLOT QUESTION COMMITTEE

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

2. Committee Name Stop City Income Tax RECEIPTS Column I Column II This Period Cumulative for Election Cycle 3. Contributions (3a.) § 2,413.00 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (3b.) \$ NOT APPLICABLE (less than \$20.01 - no Schedule) c. Subtotal of Contributions (3c.) \$ ____ (18.) \$ _ (4.) \$_____ 4. Other Receipts (Schedule 4A-1, Column 6) (19.) \$ ___ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$ 2,413.00 (20,) \$ 13,868,00 (Add Line 3 c + Line 4) IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a, Itemized In-Kind Contributions _{(6a.) \$} 130.00 (Schedule 4-IK, Column 7) b. Unitemized (less than \$20.01 each - no Schedule) (6b.) \$ NOT APPLICABLE 7. TOTAL IN-KIND CONTRIBUTIONS (7) \$ 130.00 (21.) \$ 130.00 (Add Line 6a + Line 6b) **EXPENDITURES** 8. Expenditures (8a.) \$ 4,802.17 a. Itemized Direct Expenditures (Schedule 4B, Column 7) 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.) \$ ___ (22)\$ 8,307.70 (8e.) s 4,802.17 e. Subtotal of Expenditures 9. Independent Expenditures (Schedule 4B-1, Column 7) (23.) \$ (9.) \$___ (24.) \$ 8,307.70 (10.) s_4,802.17 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) **IN-KIND EXPENDITURES** 11. Total In-Kind Expenditures-Endorsements, Donations or (11.) \$_____ (25.) \$ 1,938.90 Loans of Goods or Services (Schedule 48-2, Column 8) **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.)\$_____ a. Owed by the Committee (Schedule 4E) b. Owed to the Committee (Schedule 4E) (12b.) \$__ **BALANCE STATEMENT** 13. Ending Balance of last report filed (13.) \$ 7,948.47 (Enter zero if no previous reports have been filed.) Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts) (14.) + 2,413.00 (15.) = 10.361.4715. SUBTOTAL Add lines 13 and 14 Amount expended during reporting period (Line 10, Column I, Total Expenditures) (16.) - 4,802.17 17. ENDING BALANCE (17.) \$ 5,559.30 (Subtract line 16 from line 15)

[&]quot;If your ending balance is negative, please recheck your math.



Contribution # 4 Name & Address:

48197

Occupation

Business Address _

Page ______1___12

Type of Contribution: 🗸 Direct

MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

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

Type of Contribution: 🗸 Direct

Sandra French 5629 Pine View Drive Ypsilanti MI

_____Employer _

4. Date of Receipt 04/26/12

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

ITEMIZED CONTR SCHEDULE	1 Com	mittee I.D. Number B-2006-	012	<u>.</u>
BALLOT QUESTION		mittee Name Stop City Inc	ome Tax	
Please enter contributors name and addrimiddle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt 04/23/12			
Steve and Mary Jentzen 11 Ypsilanti MI 48197	2 S Washington		_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please p	rovide;		Click Here for	Memo Itemization
Occupation	Employer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address: Claudia Gustafson 967 Wa 48197	4. Date of Receipt 04/24/12 shtenaw Ave Ypsilanti MI		_{\$} _50	_{\$} 100
5. If over \$100.00 cumulative, please pr	ovide:		Click Here for N	lemo Itemization
Occupation	Employer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	4. Date of Receipt 04/23/12	engerene		
Jill Arcure 208 Elm Ypsilant	i MI 48197		_{\$_} 50	_{\$} 50
5. If over \$100.00 cumulative, please p	provide:		Click Here for M	lemo Itemization
Occupation	Employer			
Business Address —	· · · · · · · · · · · · · · · · · · ·			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		

s 100

100

Click Here for Memo Itemization Loan from a person Fund Raiser \$300.00 Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Co

ommittee I.D. Number	B-2006-012	

BALLOT QUESTION COMMITTEE 2. Committee Name Stop City Inc	ome Tax	#
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 04/26/12		1 0010 011000100
Barbara Maes 923 Sheridan Ypsilanti MI 48197		
Daissia Made ded Originali i politici (m 4010)	_{\$} 50	s 50
5. If over \$100.00 cumulative, please provide:	Click Here for M	emo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 04/27/12 Name & Address:	. STATES OF THE CASE OF THE CA	ытманаприя-ф-25/46/
Rick Taylor 101 N Lincoln Street Ypsilanti MI 48198	a	
	_{\$} 20	_{\$} 20
		,
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address Type of Contribution:		
3. Contribution #3 4. Date of Receipt 04/30/12 Name & Address:		
Ann Savickas 812 Charles Ypsilanti MI 48198	400	200
	<u>\$:100</u>	_{\$} 300
5. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation employee Employer City of Ann Arbor	,	
Business Address 301 E. Huron St Ann Arbor MI 48107		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 4		And the second s
Rebecca Eller 708 Carver Ypsilanti MI 48198		
Trobesed Eller 700 Garver Tpsilatili Wii 40130	, 195	. 195
	\$ 100	\$ 100
5. If over \$100,00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation NONE Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	lui gabu liisabahdu	
Page Subtotal	\$365.00	
Grand Total of All Schedules 4A		
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ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE 2. Committee Name Stop City Income Tax

1. Committee I.D. Number B-2006-012	
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		**************************************	z. Commude r	varile		
Please enter contributors middle initial.	name and address. If co	ontribution is from an inc	dividual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date of Receipt 04/3	0/12			
Diane Hays 209 I 48197	Pearl St Suite 20	2 Ypsilanti MI			_{\$} 100	_{\$} 100
5. If over \$100.00 cumul	ative, please provide:				Click Here for M	emo Itemization
Occupation	Empl	oyer		<u> </u>		
Business Address				Act		
Type of Contribution:	Direct	Loan from a perso	on [✓ Fund Raiser		
3. Contribution # 2 Name & Address:	4,	Date of Receipt 04/3	0/12			
Steven Wild 1606	6 Anderson Ann	Arbor MI 48104	1		s 150	_{\$} 150
5. If over \$100.00 cumula Occupation Business	Owner _{Empl}			· · · · · · · · · · · · · · · · · · ·	Click Here for Me	emo Itemization
Business Address)6 Anderson Ann	Arbor MI 48104				
Type of Contribution:	Direct	Loan from a person	1 <u>v</u>	Fund Raiser		<u></u>
3. Contribution # 3 Name & Address:	4.	Date of Receipt 04/30	/12	<u> </u>		
Mary Delcamp 30	09 Oak St Ypsila	nti MI 48198			_{\$_} 25	_{\$} 25
5. If over \$100.00 cumul	lative, please provide:				Click Here for Me	rno Itemization
Occupation	Emp	loyer				
Business Address						
Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
3. Contribution # 4 Name & Address:	4.	Date of Receipt 04/30)/12	-		
John Post 108 W	ashtenaw Ypsila	nti MI 48197				
, ,	•	,			ş 75	_{\$} 75
5. If over \$100,00 cumula	ative, please provide:				Click Here for M	emo Itemization
Occupation	Empl	oyer				
Business Address	Direct	Loan from a pers	son	✓ Fund Raiser		
				Page Subtotal	\$350.00	
us.				otal of All Schedules 4A on last page of Schedule	1	
Page of					Enter this total on line 3a of Summary Page	→



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLO	T QUESTION COM	VITTEE 2. Comm	nittee Name Stop City Inc	ome Tax	
Please enter contributors middle initial.	s name and address. If o	ontribution is from an individual,	enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address;	4.	Date of Receipt 04/30/12			
Donna Middletor 48197	n-Post 1845 Burn	s Ypsilanti Ml		s <u>25</u>	_{\$} 25
5. If over \$100,00 cumu	lative, please provide:			Click Here for N	łemo Itemization
Occupation	Empl	oyer	- The state of the		
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4.	Date of Receipt 04/30/12			
Patrick Quinn 70	3 Oxfod Ypsilant	i MI 48197		_{\$} 50	s 100
5. If over \$100.00 cumul	ative, please provide:			Click Here for Me	emo Itemization
Occupation	Empl	oyer			
Business Address			1400-006-0		
Type of Contribution:	Direct	Loan from a person	√ Fund Raiser		
Contribution # 3 Name & Address:	4.	Date of Receipt 04/30/12	ALIAN MAIAN MAINTENNING TO A STATE OF THE ST		
Oneill Young 201	2 McKinley Ypsi	anti MI 48197		_{\$} 10	s <u>10</u>
5. If over \$100.00 cumu	lative, please provide:			Click Here for Me	mo Itemization
Occupation	Empl	oyer	, , , , , , , , , , , , , , , , , , , ,		
Business Address — Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 Name & Address:	4, [Date of Receipt 04/30/12		7.70	
Spencer Young 1	14 Woodward Y	psilanti MI 48197			
•	·			s <u>5</u>	s_5
5. If over \$100.00 cumul	ative, please provide:			Click Here for Ma	emo Itemization
Occupation	Emplo	yer	and the second s	,	
Business Address	The state of the s	· ·			
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		**************************************
Page of12			Page Subtotal and Total of All Schedules 4A lete on last page of Schedule)	\$90.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLC	OT QUESTION COM	WITTEE 2. Commil	tee Name Stop City Inco	me lax	<u>;;;</u>
Please enter contributor middle initial.	s name and address. If co	ontribution is from an individual, e		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date of Receipt 04/30/12			
,,,	Adams Ypsilanti	MI 48197		_{\$} 10	_{\$} 10
5. If over \$100.00 cum	ulative, please provide:			Click Here for N	Memo Itemization
Occupation		oyer :			·
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 2 Name & Address:	4.	Date of Receipt 04/30/12			
Kelsey Fink 206	S S Washington Y	psilanti MI 48197		_{\$} 15	_ <u>\$</u> 15
5, If over \$100.00 cum	ulative, please provide:			Click Here for M	emo Itemization
Occupation	Empl	loyer			
Business Address		William Community of the Community of th			
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
Contribution # 3 Name & Address:	4.	Date of Receipt 04/30/12			
Elijah Jenzten 1 48197	12 S Washington	Ypsilanti MI		<u>\$_5</u>	_{\$} 5
5. If over \$100.00 cum	nulative, please provide:			Click Here for M	emo Itemization
Occupation	Emp	loyer	· · · · · · · · · · · · · · · · · · ·		
Business Address — Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 Name & Address:	4.	Date of Receipt 04/30/12	· · · · · · · · · · · · · · · · · · ·		
	ine Berry 8545 Mo	oon Rd Saline MI	•	_{\$} _100	_{\$} _100
5. If over \$100.00 cum	ulative, piease provide;			Click Here for M	femo Itemization
Occupation	Emp	loyer			
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
5 of 12) -	The state of the s	Page Subtotal and Total of All Schedules 4A lete on last page of Schedule	Enter this total on line 3a of Summary	
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ITEMIZED CONTRIBUTIONS

1. Committee I.D. Number <u>B-2006-012</u>

	SCHEDULE 4A				
BALLO'	T QUESTION COM	MITTEE 2. Commit	tee Name Stop City Inco	ome Tax	+
middle initial.	name and address. If co	ontribution is from an individual, e	enter last name, first name,	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date of Receipt 04/30/12			
Tom Collins 566	Davis Ypsilanti N	/II 48198		_{\$} <u>20</u>	s 20
5. If over \$100,00 cumul	lative, please provide:			Click Here for N	femo Itemization
Occupation	Empl	oyer	4		
Business Address		***************************************	A CONTRACTOR OF THE CONTRACTOR		
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
Contribution # 2 Name & Address:	4.	Date of Receipt 04/30/12			
Mike & Judy May Ypsilanti MI 4819		ngton Circle		s 100	_{\$} 100
5. If over \$100,00 cumul:	ative, please provide:			Click Here for M	emo Itemization
	Empl	over			
Business Address	***************************************	AUIIIIIIAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA			
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 3	4.	Date of Receipt 04/30/12			
Name & Address: Jason Ledbetter	810 N. Piyar Vac	silanti MI AQ100			
Dason Ecapetter	o lo 14. Maei 1 pe	manii 1911 1 0 190		s 12	_{\$} 12
5. If over \$100.00 cumu	lative, please provide:			Click Here for Me	mo Itemization
Occupation	Empl	oyer			
Business Address —					
Type of Contribution:	Direct	Loan from a person	✓ Fund Räiser		
3. Contribution # 4 Name & Address:	4. [Date of Receipt 04/30/12			and the second s
•	13 W. Michigan,	Loft F Ypsilanti MI			
48197	•	•		s 20	_s 20
5. If over \$100.00 cumula	ativo ploaco provido:			-	
		44 MA		Click Here for M	emo Itemization
-	Emplo	Jyer			
Business Address Type of Contribution:	Direct		[7]		
Type of Continuum [Died	Loan from a person	✓ Fund Raiser		The state of the s
			Page Subtotal	\$152.00	
			nd Total of All Schedules 4A ete on last page of Schedule)		
Page 6 of 12		Çodiya		Enter this total	_
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ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE 2. Committee Name St	top City Incon	ne Tax	<u>.</u>
Please enter contributors name and address. If contribution is from an individual, enter last name middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 04/30/12 Name & Address:			
Mike Gendich 213 W. Michigan, Loft F Ypsilanti MI 48197		_{\$} <u>20</u>	_ \$ _20
5. If over \$100.00 cumulative, please provide:		Click Here for M	emo Itemization
OccupationEmployer			
Business Address			
Type of Contribution: Direct Loan from a person.	Raiser		
3. Contribution #2 4. Date of Receipt 04/30/12 Name & Address:			
Joe Golder 1002 Washtenaw Ypsilanti MI 48197	:	s 10	_{\$_} 10
5. If over \$100.00 cumulative, please provide:	ı	Click Here for Me	emo Itemization
		CHOICE FOR THE	() (O ((O))) (O)
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person V Fund R	Raiser		
3. Contribution #3 4. Date of Receipt 04/30/12			
Name & Address:			
Byron Shimpp 1020 Washtenaw Ypsilanti Ml 48197		_s _10	ş <u>10</u>
5. If over \$100.00 cumulative, please provide:	(Click Here for Me	mo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Raiser		
3. Contribution # 4 4. Date of Receipt 04/30/12 Name & Address:	_		
Andy Gillman 909 Woods Road Ypsilanti MI 48197			
, they commended the control of the		s 20	_{\$} _20
5. If over \$100.00 cumulative, please provide:		Click Here for Me	emo Itemization
Occupation Employer			
Business Address			
	d Raiser		
Grand Total of Al (Complete on last pa Page of		\$60.00 Enter this total on line 3a of Summary Page	



8 12

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

SCHEDULE 4A

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

2. Committee Name Stop City Income Tax **BALLOT QUESTION COMMITTEE** 7 Please enter contributors name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Contributor (Through date of receipt) 3. Contribution # 1 4. Date of Receipt 04/30/12 Name & Address: Amy Grettum 12 Oak St Ypsilanti MI 48198 ູ 20 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address √ Fund Raiser Type of Contribution: Direct Loan from a person 3. Contribution # 2 4. Date of Receipt 04/30/12 Name & Address: Trey Bailey 2008 Day Ann Arbor MI 48104 ູ 20 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Business Address ___ √ Fund Raiser Type of Contribution: Direct Loan from a person 3. Contribution #3 4. Date of Receipt 04/30/12 Name & Address Rick Phillips 6 N Normal Ypsilanti MI 48197 _{\$} 20 s 20 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_____Employer__ Business Address --Type of Contribution: ✓ Fund Raiser Direct Loan from a person Contribution # 4
 Name & Address: 4. Date of Receipt 04/30/12 Zachary Harding 916 Pearl Ypsilanti MI 48197 _{\$} 20 s 20 5. If over \$100,00 cumulative, please provide: Click Here for Memo Itemization Occupation Business Address ___ Type of Contribution: Direct Loan from a person Fund Raiser \$80.00 Page Subtotal Grand Total of All Schedules 4A

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number	B-2006-012
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BALLOT	QUESTION COMM	TTEE 2. Comr	nittee Name Stop City Inco	me Tax	+
Please enter contributors na middle initial.	ame and address. If con	tribution is from an individual	, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. D	ate of Receipt 04/30/12			
Brock Sipple 610 N	Martin Place Yps	ilanti MI 48198		_{\$.} 5	s_5
5. If over \$100.00 cumulat	ivo planca provide:			Click Here for M	emo Itemization
		vàr.			
	cridio	êr	- /		
Business Address	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #2		ate of Receipt 04/30/12			
Name & Address:	Manual Vasilan	H MI 40407	44		
Vivian Phillips 6 N	Normai †psiian	u ivii 40 197		s <u>20</u>	ş <u>20</u>
5. If over \$100.00 cumulati	ve, please provide:			Click Here for Me	emo Itemization
		/er			
Business Address					
	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #3	4. D	ate of Receipt 04/30/12			
Name & Address: Melodie Gable 150)1 Pearl Yosilar	ti MI 48197			
Michael Sabio 10.	,,, ogn, (ponar			_{\$} 20	_{\$} 20
5. If over \$100.00 cumula	tive, please provide:			Click Here for Me	mo Itemization
Occupation	Emplo	yer			
Business Address —					
1 1 1	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 Name & Address:	4, D	ate of Receipt 04/30/12			
Harold Gable 1501	l Pearl Ypsilant	MI 48197			
				_{\$} 20	_{\$} 20
5. If over \$100.00 cumulati	ive, please provide:			Click Here for Me	emo Itemization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
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			Grand Total of All Schedules 4A		7
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ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

2. Committee Name Stop City Income Tax

Committee I.D. Number B-2006-012		B-2006-012	B-2006	Number	amittaa I D	Com
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middle initial.	s name and address. If	contribution is from an individual	I, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4	Date of Receipt 04/30/12			
John Wägner 62	0 Vought Ypsila	inti MI 48198		s 20	_{\$} 20
5. If over \$100.00 cum	dative, please provide:			Click Here for	Memo Itemization
Occupation	Em	ployer	ONGO CONTRACTOR OF CONTRACTOR		
Business Address	thit tankens		mm Orbit treet on the Committee of the C		
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
Contribution # 2 Name & Address:	•	1. Date of Receipt <u>04/30/12</u>		· · · · · · · · · · · · · · · · · · ·	
Patrick Johnstor	n 16 S Normal Y	psilanti MI 48197		_{\$} _10	s_10
5. If over \$100.00 cumu	lative, please provide:			Click Here for N	Memo Itemization
Occupation	Em	ployer			
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		washing the same of the same o
Contribution # 3 Name & Address:	4	I. Date of Receipt 04/30/12			
Beverly Buck 30	5 S Washington	Ypsilanti MI 48197		_{\$} 10	_{\$} 10
5. If over \$100.00 cum	ulative, please provide	1		Click Here for M	lemo Itemization
Occupation	En	ployer			
Business Address ——					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
Contribution # 4 Name & Address:	4	Date of Receipt 04/30/12	and the Hamiltonian American Company		
	17 Woodward Y	psilanti MI 48197	TO THE COME OF A CHIEF A CHIEF A CHIEF		
	A S S and the rich of a small s and A	pondin (11 10 10 1		s_10	s 60
5. If over \$100.00 cumu	lative, please provide:			Click Hara for h	Memo Itemization
Occupation	Em	ployer		DIOX FIELD TO: N	metro iterrization
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
Page 10 of 12			Page Subtotal Grand Total of All Schedules 4A plete on last page of Schedule		



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTE

BALLOT QUESTION	COMMITTEE 2. Commi	ttee Name Stop City Inco	me Tax	EV.
Please enter contributors name and addres middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1 Name & Address:	4. Date of Receipt 04/30/12			
Dan Ing 215 Woodward Ypsi	lanti MI 48197	A Company of the Comp	_s 10	_{\$} 10
5. If over \$100.00 cumulative, please pro	vide:		Click Here for N	Aemo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 05/07/12			
Tom Manchester 206 N Huro	on Ypsilanti MI 48197		_{\$} _500	_{\$} 500
5. If over \$100.00 cumulative, please pro	vide:		Click Here for M	iemo Ilemization
OccupationAttorney	Employer Manchester Association	ciates		
Business Address 206 N Huron, Y	psilanti, MI 48197			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution #3	4. Date of Receipt 05/08/12			
Name & Address: Harvey Krage PO Box 97154	8 Ypsilanti MI 48197		_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please pro	ovide:		Click Here for M	erno Itemization
Occupation	Employer			
Business Address	powers .			
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt			•
Jan Katz 1824 Roosevelt Yp	silanti MI 48197			
			_{\$} _36	s 36
5. If over \$100.00 cumulative, please pro	vide:		Click Here for N	lemo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
44 40		Page Subtota and Total of All Schedules 4A plete on last page of Schedule	· · · · · · · · · · · · · · · · · · ·	
Pageof		•	Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS 1. Committee I.D. Number B-2006-012 SCHEDULE 4A

BALLC	I MOESTION	COMMI	11EE 2. Commit	ttee Nai	me Stop City Inco	me fax	
Please enter contributor middle initial.	s name and addres	s. If conti	ibution is from an Individual, e	enter las	st name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:		4. Dat	e of Receipt 05/07/12			E tre-spinister	
Angelica Bryant 48197	4839 Munge	r Rd Y	psilanti MI			s 200	\$ 200
5. If over \$100,00 cum	ilative mlease pro-	vide.				Click Here for Me	mo Itemization
Occupation Bus Ow			_r BC Contractors				
Business Address 48							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address:		4. Da	e of Receipt				
						\$	\$
5. If over \$100.00 cumu	lative, please prov	ride;				Click Here for Men	no Itemization
Occupation		Employe	Γ	-(
Business Address							
Type of Contribution:	Direct		Loan from a person		und Raiser		
3. Contribution #3		4. Dai	e of Receipt				
Name & Address:							
						\$	\$
5. If over \$100.00 cum	ılative, please pro	vide:				Click Here for Men	o Itemization
Occupation		Employe	er				
Business Address ——							
Type of Contribution:	Direct		Loan from a person	F	und Raiser		
3. Contribution # 4 Name & Address:		4. Date	of Receipt				
			•				
						\$	\$
5. If over \$100.00 cumu	lative, please prov	ide:					
	Account to the second	Employe	.			Click Here for Men	no Itemization
Business Address		Lithiolo	4				
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
		. <u> </u>	1	<u> </u>	Page Subtotal	\$200.00	
			Gra	nd Tota	i of All Schedules 4A		
40 40					ast page of Schedule)	\$2,413.00	
12 12 Page	u a					Enter this total on line 3a of	
						Summary Page	



FUND RAISER SCHEDULE 4F BALLOT QUESTION COMMITTEE

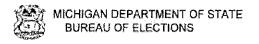
1.	Committee I.D. Nu	mber B0200612	
2.	Committee Name	Stop City Income Tax	

	1.5.11	- USE A SEPARATE SHE	ET FOR EA	CH EVENT -		
3. Date Event Was Held		Number of Individuals Attending or Participating (whichever is greater)	5. Type of F	und Raising Activity	6. Address and Name (If any of the place where the activity was held	
04/30/12		75	reception		Haabs 18 W Michigan Ave Ypsilanti Ml 48197	
					Private Residence	
7. Total Contributions	\$_	1,282.00	-			
8. Other Receipts	\$			_		
9, Gross Receipts (Add lines 7 and 8)	\$					
10. Total Cost of Event	\$ <u>3</u>	95.84	·	*Includes In-Kind e Expenditures Mad	Contributions and All de For the Event	
1. Check if event wa	s a joir	nt fund raiser and complete the	following:			
Co-Sponsor(s)		Contribution (%)	Split	Ex	penditure Split (%)	
-						
nacionalista de la companya della companya della companya de la companya della co					·	
* in the state of		· 				
		 	·	****	· · · · · · · · · · · · · · · · · · ·	
					 	

The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (4A), Itemized In-Kind Contributions Schedule (4-IK), Itemized Expenditures Schedule (4B) and the Summary Page.
- Each committee that participated in a joint fundraiser must file a Fund Raiser Schedule for the event.

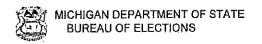
Page	1	of	1



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

1. Committee I. D. Number_B-200612

Name and address of person to whom paid	Committee Name Stop City In		C D-1-	Ta	T. 5
	State purpose of expen Identify the ballot proportion Indicate whether supporter	sal involved	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:		-		,
Steve Pierce 118 S Washington St	food				
Ypsilanti MI 48197	5. Ballot Proposal:		05/07/12	_{\$} 55.89	_{\$} 1994.79
	CIT Water St		Date of Expenditure		
Check box if expenditure is payment of debt or obligation	County: Washtenaw		Click fo	or Memo Itemizatio	п Туре
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	✓ Local			
expenditure # 2 Name & Address:	4. Purpose:				
	food				
Steve Pierce 118 S Washington St /psilanti MI 48197	5. Ballot Proposal;		05/02/12	107.02	2 102 71
	CIT Water St			_{\$} 197.92	\$
			Date of Expenditure		
	County: Washtenaw		_ ,		
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	✓ Oppose	Glick for	r Memo Itemization	Туре
✓ Fund Raiser	Statewide	Local			
penditure #3	4. Purpose:	ulkukationuka arkinda			
lame & Address:	food				
Maggie Brandt 118 S Washington St	5. Ballot Proposal:		05/02/12	_s 197.92	_s 197.92
Ypsilanti MI 48197	CIT Water St		Date of	*	. 5
			Expenditure		
	County: Washtenaw	<u>:</u>	Click for	r Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
✓ Fund Raiser	Statewide	Local			
Expenditure # 4 Name & Address:	4. Purpose:				
Steve Pierce 118 S Washington St				470 45	
Ypsilanti MI 48197	5. Ballot Proposal:		04/2//12	_{\$} 179.15	_{\$} 2,371.86
· pondin · · · · · · · · · · · · · · · · · · ·	CIT Water St		Date of Expenditure		
	the state of the s	**************************************		na h fanna a flancian in allen	· T
	County: Washtenaw		Click to	or Memo Itemization	n Type
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	✓ Oppose			
Fund Raiser	Statewide	✓ Local			
		Subt	otal this page	\$630.88	
	(Com	Grand Total of a collete on last page			
	ź myżs i i		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Enter this total	
1 . 3				on Line 8a of the Summary	
age _' of				Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-200612

BALLOT QUESTION COMMITTEE 2. Co	ommittee Name Stop City In	come Tax			
3. Name and address of person to whom paid	State purpose of expend Identify the ballot propos Indicate whether supported	al involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:		-	* * * * * * * * * * * * * * * * * * * *	
Steve Pierce 118 S Washington St	postage				
Ypsilanti MI 48197	5. Ballot Proposal:	•	04/23/12	_{\$} 64	_{\$} 2435.86
•	CIT Water St		Date of Expenditure		-
	in 61 and the first the second		LAperionare		
Check box if expenditure is payment of debt or obligation	County:Washtenaw		Click fo	r Memo Itemization	n Type
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 2 Name & Address:	4. Purpose:				
Steve Pierce 118 S Washington St	food				
Ypsilanti MI 48197	5. Ballot Proposal:		05/10/12	_s 363.35	s 2,799.21
	CIT Water St		Date of	Y	n=. ^-
	County: Washtenaw		Expenditure		
Check box if expenditure is payment of debt or obligation	County: Tracentonian		Click fo	r Memo Itemization	Туре
reported on previous statement	Support	✓ Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 3 Name & Address:	4. Purpose:				
Steve Pierce 118 S Washington St	food				
Ypsilanti MI 48197	5. Ballot Proposal:		05/14/12	s 63.12	
	CIT Water St	·	Date of Expenditure		
	County; Washtenaw		•	a kiloman Ibnessenskisa	. Timo
Check box if expenditure is payment of debt or obligation			Click to	r Memo Itemization	туре
reported on previous statement	Support	✓ Oppose			
Fund Raiser	Statewide	✓ Local			
Expenditure # 4 Name & Address;	4. Purpose:				
HDL 118 S Washington St Ypsilanti MI	postage		05/01/12	,858.40	_s 858.40
48197	5. Ballot Proposal:		Date of	\$	\$ 000.40
	CIT Water St		Expenditure		
	County: Washtenaw	**	Click f	or Memo Itemizatio	туре
Check box if expenditure is payment of debt or obligation					
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	✓ Local			:
		Sub	total this page	\$1,348.87	7
		Grand Total of			
	(Com	plete on last pag	e of Schedule)	Enter this total	
0 0				on Line 8a of	
Page 2 of 3				the Summary Page	



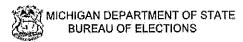
ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number_B-200612

BALLOT QUESTION COMMITTEE 2.0	ommittee Name Stop City In	come Tax				
3. Name and address of person to whom paid	State purpose of expend Identify the ballot propos Indicate whether supported	al involved.	6. Date	7. Amount	8. Cumulative for election	
Expenditure # 1 Name & Address:	4. Purpose:					
HDL 118 S Washington St Ypsilanti MI	printing					
48197	5. Ballot Proposat:	05/10/12	_{\$} 105.00	_{\$} 963.40		
	CIT Water St		Date of Expenditure			
			•		Trans	
Check box if expenditure is payment of debt or obligation reported on previous statement	County Washtenaw		CHEKIC	or Memo Itemization	гуре	
	Support	Oppose				
Fund Raiser Expenditure # 2	Statewide 4, Purpose:	✓ Local		- Andrew Control of the Control of t		
Name & Address:	mailing					
Unit Packaging 119 Enterprise Drive	5. Ballot Proposal:		05/04/40	070 E0	070 50	
Ann Arbor Charter Township, MI 48103	CIT Water St		05/04/12	_s 278.52	\$ 278.52	
	<u> </u>		Date of Expenditure			
	County: Washtenaw	the harm white the same the sa	Clinia for	r ktanna Haminatian 1	T	
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	✓ Oppose	CRCA TO	Memo Itemization 1	туре	
Fund Raiser	Statewide	Local				
Expenditure #3	4. Purpose:	777				
Name & Address:	repay loan					
Steve Pierce 118 S Washington St Ypsilanti MI 48197	5. Ballot Proposal:		05/28/12	s 2438.90	5,301.23	
, , , , , , , , , , , , , , , , , , , ,	CIT Water St	÷	Date of	*	V	
			Expenditure			
Check box if expenditure is payment of debt or obligation	County: Washtenaw		Click for	r Memo Itemization	Type	
reported on previous statement	Support	✓ Oppose				
Fund Raiser	Statewide	Local	mothers			
Expenditure # 4 Name & Address:	4. Purpose:					
	donikarotus tarini in in ing ing siyangi ninggan ininggan ininggan	waremilio-re-e-t-to-to-t-t-termini-thology			_	
	5. Ballot Proposal:		Date of	\$	\$	
	CIT Water St		Expenditure			
	County: Washtenaw		Click fo	or Memo Itemization	Туре	
Check box if expenditure is payment of debt or obligation	Support	Oppose				
reported on previous statement		}				
Fund Raiser	Statewide	✓ Local				
			otal this page	\$2,822.42		
	(Comp	Grand Total of		\$4.802.17		

____3____of__3___

Enter this total on Line 8a of the Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B0200612
2. Committee Name Stop City Income Tax

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: Mike Eller 22 N Washington St Ypsilanti MI 48197	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☑ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN	_s 130	_{\$} 130
If over \$100.00 cumulative, please provide: Occupation Business Owner Employer Name & Address: DJM Land Company 22 N Washington St Ypsilanti MI 48197 Fund Raiser	5. DATE OF RECEIPT: 04/23/12 6. VENDOR NAME & ADDRESS: Fast Signs 3410 Washtenaw Avenue Ann Arbor	Click Here for Memo Itel	mization
Contribution #2 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description 5, DATE OF RECEIPT: 6, VENDOR NAME & ADDRESS:	\$Click Here for Memo Ite	\$ emization
Fund Raiser Contribution #3 Name & Address; If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description 5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS:	\$Click Here for Memo Ite	\$emization
Fund Raiser	Page Subtotal Grand Total of all Schedules 4-IK (Complete on last page of Schedule		

Enter this total on line 6a of Summary Page