

BALLOT QUESTION COMMITTEE COVER PAGE

	the state of the s		and the second s	FOR OFFICIAL USE ONLY
Report must be legible, typed or prir treasurer or designated record keep	nted in link and signed by the er.		3.This Statement covers From: 02/20	/14 To 04/20/14
1. Committee I.D. Number B-2010-002			P.C	rtners for Transit J. Box 7545
2. Committee Name				n Arbor, MI 48107
Partners for Transit			Area Code and Phone: (734) 444-8: If the address in this box is different from the Statement of Organization, mall monificial.	305 om the committee mailing asdress on ay be sent to this address by the filling
r research Many and Printer			official.	
5. Treasurer's Name and Residentia Carmencita Princen 402 Maple Ridge Ann Arbor MI 48103	ı Address			FIL FIL PR 29
Area Code and Phone (734) 930-	0581		<u></u>	~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
6. Treasurer's Business Address Carmencita Princen University of Michigan 214 S. State St., Ann Arbor,	MI 48104	Caroly Ann A	esignated Record Keeper's Name and M the committee has a Designated Recor in Grawi rbor Center for Independent Living Research Park Dr., Ann Arbor, MI 48	talling Actiness UNITY ACTION OF THE COLUMN TO THE COLUMN
Area Code and Phone (734) 615-8	402	Area	Code and Phone (734) 971-0277	
8. TYPE OF STATEMENT:	8b. FEBRUARY STATEMEN	iT	8d: Post Petition Sample Filing	8f. DISSOLUTION OF COMMITTEE REQUEST
8a PRE-ELECTION OR	APRIL STATEMENT		under MCL 168.483a (Required of Statewide Ballot	Effective Date of Dissolution
POST- ELECTION	JULY STATEMENT OCTOBER STATEMENT	•	Question Committees only after the submission of a sample petition prior to circulating the petition)	By checking this item, I certify that the committee has no assets or
Pre-Election or Post-Election Statement relates to:	8c ANNUAL STATEMEN	•	8e. AMENDMENT TO	By checking this item, I certify that the committee has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary
GENERAL SCHOOL	(Coverage Year)		CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to Indicate which Statement is	Page
SPECIAL OTHER:			being amended)	
Date of Election; 05/06/14				
A committee that does not have a Re Schedules, Direct contributions, In-ki If any of the information listed in items amendment to the Statement of Orga or before the filling deadline of a re-	porling Walver must file all reg nd contributions, loans, expen 6 4, 5, 6, or 7 has changed sind nization should accompany this quired campaign statement,	uired C ditures a ce the ir s Camp that ca	I ampaign Statements. The Campaign Statements. The Campaign Stand outstanding debts count against the information was shown on the committee argn Statement. If a request for a Repmpaign statement can not be walved.	tatements must include all applicable \$1,000 Reporting Walver threshold. 's Statement of Organization, an orting Walver is not received on
Verification: I certify that all reasonal my knowledge and belief the conte	ble diligence was used in the pents are true, accurate and con	reparal nplete	ion of this statement and attached sched	dules (if any) and to the best of
Alanen Serenaria	MENCITA PRINT		Princen	
Туре	or Print Name		Signature	
				·



SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-2010-002</u>

	2. Committee Name Partners for	Transit
RECEIPTS	Column I	Column II
Contributions a. Itemized Contributions(Schedule 4A, Column 6)	This Period (3a.) \$ 39,427.20	Cumulative for Election Cycle
b. Unitemized Contributions		
(less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE	<u> </u>
c. Subtotal of Contributions	(3c.) \$ 39,427.20	(18.) \$ 39,427.20
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ 0.00	(19.) \$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ 39,427.20	(20.) \$ _39,427.20
N-KIND CONTRIBUTIONS		
In-Kind Contributions Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ 5,400.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ 5,400.00	(21.) \$ 5,400.00
XPENDITURES		
. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ 16,047.65	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ 0.00	-
 c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7) 	(8c.) \$ 0.00	-
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ 0.00	
e. Subtotal of Expenditures	(8e.) \$ 16,047.65	(22.) \$ 16,047.65
. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ 0.00	(23.) \$ 0.00
0. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ 16,047.65	(24.) \$ 16,047.65
N-KIND EXPENDITURES 1. Total in-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ 0.00	(25.) \$ 0.00
EBTS AND OBLIGATIONS 2. Debts and Obligations a. Owed by the Committee (Schedule 4E)	(12a.)\$ 0.00	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ 0.00	
BALANCE STATEMENT		
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 0.00	
i. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + 39,427.20	
SUBTOTAL Add lines 13 and 14	(15.) = 39,427.20	
. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - 16,047.65	
ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 16,047.65	

^{*}If your ending balance is negative, please recheck your math.



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT	QUESTION COM	MITTEE 2. Commit	lee Name Partners for	Transit	
made iniliai.	name and address. If c	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 01/20/14			T date of receipty
Michael Ford					•
1394 Brookfield D	rive, Ann Arbor	MI 48103		_{\$} 100	\$
5. If over \$100.00 cumula	tive, please provide:			Click Here for Me	emo Itemization
Occupation	Empl	oyer	<u>·</u> _		
Business Address				•	
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4.	Date of Receipt 02/20/14			
Nancy Jean Shore	e/Charles Warp	ehoski			
2020 Winewood A				_{\$} _100	\$
5. If over \$100.00 cumulat	ive, please provide;			Click Here for Mer	no Itemization
Occupation	Emplo	oyer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution #3 Name & Address:	4. [Date of Receipt 02/20/14			
Michael Benham 3255 Charing Cros	ss Rd. Ann Arbo	or MI 48108		_{\$} _100	\$
5. If over \$100.00 cumulat	live, please provide:			Click Here for Mem	o Itemization
Occupation	Emplo	oyer			,
Business Address	· · · · · · · · · · · · · · · · · · ·	-			
Type of Contribution: 🗸 t	-	Loan from a person	Fund Raiser		
. Contribution # 4 Name & Address:	4. D	ate of Receipt 02/20/14			,
Allen Jason Freer/l 18849 Hillcreset St				_{\$} 100	\$
. If over \$100.00 cumulativ	ve. please provide:				
Occupation		vor.		Click Here for Mem	o Itemization
	Employ	γοι	· · · · · · · · · · · · · · · · · · ·		
Business Address	г		77		di C
Type of Contribution:	Direct	Loan from a person	Fund Raiser	·	
	·		Page Subtotal Total of All Schedules 4A on last page of Schedule)	\$400.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A RALL OF CHESTION COMMITTEE

BALLOT QUESTION CO	MMITTEE 2. Commit	tee Name Partners for T	ransit	
Please enter contributors name and address. 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 02/20/14			
Susan Pollay 375 Parklake Ann Arbor MI 481	03		_{\$} 100	\$
5. If over \$100.00 cumulative, please provid	e;		Click Here for Me	emo Itemization
Occupation E	mployer			
Business Address		778		
Type of Contribution: Virect	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 02/20/14			
Eli Cooper 1431 Natalie Lane #202 Ann A	rbor MI 48105		_{\$} 100	\$
i. If over \$100.00 cumulative, please provide	:		Click Here for Mer	mo Itemization
Occupation E	nployer	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	•	
Business Address				
Type of Contribution: Olrect	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 02/20/14			
Ecology Center				
339 E. Liberty Ste 300 Ann Arb	or MI 48104		_{\$} 2500	\$
5. If over \$100.00 cumulative, please provid	э :		Click Here for Men	no Itemization
OccupationE	mployer			
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 02/21/14			
Transport Workers Union of Am 501 Third St, NW, 9th floor, D.C			_{\$} 5000	\$
. If over \$100.00 cumulative, please provide	:		Click Here for Men	no Itamization
Decupation En	nployer		CHCK FIETE TOT MET	no nemization
Business Address				
Type of Contribution: Direct .	Loan from a person	Fund Raiser		
age of	Gran (Comple	Page Subtotal of Total of All Schedules 4A te on last page of Schedule)	\$7,700.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-2010-002

Page

BALL	OT QUESTION COM	MIT	TEE 2. Committee	e Na	ame Partners for	Transit	F
Please enter contributo middle Initial.							7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date	of Receipt 03/01/14			· · · · · · · · · · · · · · · · · · ·	
Adam Goodmar 615 Hiscock An	n n Arbor MI 48103	ļ.				_{\$} 100	\$
5. If over \$100.00 cum	ulative, please provide:					Click Here for Me	mo Itemization
Occupation	Emp	loyer					
Business Address							
Type of Contribution:	✓ Direct		Loan from a person		Fund Raiser		
Contribution # 2 Name & Address:	4.	Date	of Receipt 03/03/14				
	Mayor Campaig Ann Arbor MI 48		1		·	\$ <u>1000</u>	\$
5. If over \$100.00 cum	ılative, please provide:					Click Here for Men	no Itemization
Occupation	Emp	loyer					
Business Address							
Type of Contribution:	Direct		oan from a person		Fund Ralser		
3. Contribution # 3 Name & Address:	4.	Date	of Receipt 03/03/14				
Jean Sager							
2045 Jackson A	ve. #210 Ann Ari	bor	MI 48103			ş <u>25</u>	\$
5. If over \$100.00 cum	ulative, please provide:					Click Here for Mem	o Itemization
Occupation	Emp	loyer					
Business Address	·						
Type of Contribution:	Direct	L	oan from a person	J	und Raiser		
. Contribution # 4 Name & Address:	4. [Date	of Receipt 03/03/14				
Robert Gunn/Lea 1308 E. Stadium	ah Gunn Blvd. Ann Arbor	МІ	48104			_{\$} 100	\$
. If over \$100.00 cumu	ative, please provide:					Click Here for Mem	oo Itemization
Occupation	Emplo	oyer .				,	io nonization
Business Address					·		
Type of Contribution:	✓ Direct		Loan from a person		Fund Raiser	_	
'age of					Page Subtotal of All Schedules 4A ast page of Schedule)	\$1,225.00 Enter this total on line 3a of Summary	

Summary Page



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 4A	1. Committee I.D. Number B-2010-	002	
— 4.4. — — — — — — — — — — — — — — — — — — —	Dartnere for	Francit	_
Please enter contributors name and address. If contribution is from an incindide initial.	2. Committee Name Partners for dividual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Eacl Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 03/0 Name & Address:	3/14		
Charles Ream 1911 Packard St. Ann Arbor MI 48104		_{\$} 50	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Me	emo Iternization
Occupation Employer			
Business Address			
Type of Contribution:	n Fund Raiser		
3. Contribution #2 4. Date of Receipt 03/05 Name & Address:	5/14		
Stephen Dobson/Judith Dobson 3350 Geddes Ann Arbor MI 48106		_{\$} 1000	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Mer	no Itemization
Occupation Retired Employer			
Business Address			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
3. Contribution #3 4. Date of Receipt 03/05/ Name & Address:	14		
Martha Darling/Gilbert Omenn 3340 E. Dobson Place Ann Arbor MI 48105		_{\$} _1000	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Mem	o Itemization
Occupation Retired Employer			
Business Address	F1		
Type of Contribution: V Direct Loan from a person	Fund Ralser		
Contribution #4 4. Date of Receipt 03/10/ Name & Address:	14		
Vickie Wellman/lan Keith MaGgregor 2461 Towner Blvd. Ann Arbor, Mi 48104		_{\$} 100	\$
. If over \$100.00 cumulative, please provide:		Click Here for Mem	no itemization
OccupationEmployer		CHOK LICIA IOI MIGH	o temzauon
Business Address			
Type of Contribution; V Direct Loan from a person	n Fund Ralser		
	Page Subtotal	\$2,150.00	
	Grand Total of All Schedules 4A (Complete on last page of Schedule)		
4 31 .	(complete ou last bage of conteguity	Enter this total	



ITEMIZED CONTRIBUTIONS

SCHEDU		r, Conninge	CD. NORTIDO		
BALLOT QUES	TION COMMITTEE	2. Committee	Name Partners for	Transit	
Please enter contributors name and middle initial.	l address. If contribution is from	m an individual, ente	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	4. Date of Receipt	03/13/14			1 0000 00000000000000000000000000000000
Jeff Irwin Leadership Fu PO Box 14021, Lansing				_{\$} 1000	\$
5. If over \$100.00 cumulative, plea	ase provide:			Click Here for Me	emo Itemization
Occupation	Employer			•	
Business Address					
Type of Contribution:	Loan from	a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt	03/17/14			
Ann Arbor Medical Cani 112 S. Main St., Suite C)4		_{\$} 200	\$
. If over \$100.00 cumulative, plea	se provide:			Click Here for Mer	no Itemization
Occupation	Employer				
Business Address					
Type of Contribution: V Direct	Loan from a	person	Fund Ralser		
l. Contribution #3 Name & Address:	4. Date of Receipt (03/18/14			
Peter Allen/Sarah Allen 2224 Applewood Court A	Ann Arbor MI 48103			_{\$} 100	\$
5. If over \$100.00 cumulative, plea	se provide:			Click Here for Mem	o Itemization
Occupation	Employer				
usiness Address					
Type of Contribution: 🗸 Direct	Loan from a p	person	Fund Raiser		
Contribution # 4 Name & Address;	4. Date of Receipt (03/19/14			
Michael Garfield 310 Hiscock Ann Arbor l	MI 48103			_{\$} 250	s
If over \$100.00 cumulative, pleas	e provide:				
occupation Director	•	y Center		Click Here for Men	no Itemization
usiness Address 339 E. Liber	ty, Suite 300. Ann Arb	or, MI 48104			
Type of Contribution: 🗸 Direct	Loan from a	a person	Fund Raiser		•
• ••,		Grand 1	Page Subtotal	\$1,450.00	
5 of 31			on last page of Schedule)	Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

BALLOT QUESTION COMMITTEE 2. Committee Name Partners for T		H
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 02/23/14 Name & Address:	- 	T date of receipty
Michael Morris/Leslie Morris 1023 Young Place Ann Arbor MI 48105	_{\$} 200	\$
5. If over \$100.00 cumulative, please provide;	Click Here for Me	emo Itemization
Occupation retired Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 02/24/14 Name & Address:		· · · · · · · · · · · · · · · · · · ·
Jonathan Trobe/Joan Lowenstein	200	<i>:</i>
502 Burson Place Ann Arbor MI 48104	ş <u>200</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Attorney Employer Jaffe Law		
Business Address 201 S. Main St., Suite 300 Ann Arbor, MI 48104		
Type of Contribution:		
3. Contribution # 3 4. Date of Receipt 02/26/14 Name & Address:	· · · · · · · · · · · · · · · · · · ·	
Henry Pollack/Lana Pollack		
345 Sumac Lane, Ann Arbor, Mi 48105	_{\$} 500	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Professor Employer University of Michigan		
Business Address Ann Arbor, MI 48109		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution # 4 4. Date of Receipt 02/27/14 Name & Address;		
Gillian Ream		
726 Prospect Rd. Ypsilanti 48198	_s 100	\$
. If over \$100.00 cumulative, please provide:	***************************************	4
OccupationEmployer	Click Here for Mem	o Itemization
Business Address	•	
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule)	\$1,000.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION O	COMMITTEE 2, Committee	Name Partners for	Fransit	æ
Please enter contributors name and address middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 Name & Address;	4. Date of Receipt 03/21/14		 	T date of records
Richard Sheridan/Carol Sheri 2338 Yorkshire Ann Arbor MI			_{\$} 1000	\$
5. If over \$100.00 cumulative, please prov	/ide:		Click Here for Me	emo Itemization
Occupation CEO	Employer Menlo Innovations			
Business Address 505 East Liberty,	LL500 Ann Arbor, MI 48104			
Type of Contribution: V Direct	Loan from a person	Fund Ralser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 03/24/14			
Norman /Deborah Herbert 3681 Wagner Ridge Ct. Ann /	Arbor MI 48103		_{\$} _100	\$
5. If over \$100.00 cumulative, please provi	ide:		Click Here for Mer	no Itemization
	Employer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 03/25/14		·	
Harvey Somers/Janya Somers 2129 Autumn Hill Dr. Ann Arb			_{\$} 50	\$
5. If over \$100.00 cumulative, please provi	ride:		Click Here for Mem	o Itemization
Occupation retired	Employer	******		
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
i. Contribution # 4 Name & Address:	4. Date of Receipt 03/28/14	, , , , , , , , , , , , , , , , , , ,		
Kent Johnson/Mary Johnson 2594 E. Delhi Rd. Ann Arbor N	/II 48103		_{\$} _300	\$
. If over \$100.00 cumulative, please provid	de:		Click Here for Men	no Itamization
Occupation Physician E	Employer Univ. of Michigan Ho	spital	Olick Flore for Meli	io neriazation
Business Address 1500 E. Medical C	enter Drive, Ann Arbor, MI 48	109		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
Page 7 of 31		Page Subtotal otal of All Schedules 4A on last page of Schedule)	\$1,450.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION CON	IMITTEE 2. Committee	Name Partners for T	ransit	n
Please enter contributors name and address. If a middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 4 Name & Address:	Date of Receipt 03/31/14			
Robert Boonin 1545 Chapleu Dr. Ann Arbor MI	48103		_{\$} 400	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
·	_{oloyer} Dykema			
Business Address 2723 S. State, Ste. 4	- 			
Type of Contribution: VDirect	Loan from a person	Fund Raiser		
3. Contribution # 2 4 Name & Address:	Date of Receipt 03/31/14			······································
Eisenhower Center 3200 E. Eisenhower Ann Arbor M	ИI 48108		\$_3000	\$
5. If over \$100.00 cumulative, please provide:	•		Click Here for Men	oo Hemizalion
	oloyer		Office for Mon	NO RESIDENCE
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution #3 4.	Date of Receipt 03/31/14		, · _ i accessor	
Name & Address: Downtown Home and Garden				
210 S. Ashley Ann Arbor MI 481	04		_{\$} 25	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o liemization
· · ·	ployer		Olish (told lot Might	o nonneanon
Business Address				•
Type of Contribution: V Direct	Loan from a person	Fund Raiser	ē.	
S. Contribution # 4 4.	Date of Receipt 04/01/14	<u></u>		
Glenn Nelson/Margaret Nelson				
1323 S. Forest Ave Ann Arbor M	1 48104		s 100	
			*	\$
. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Empl	oyer			
Business Address Type of Contribution: Direct				
1390 of Contabation. P Direct	Loan from a person	Fund Raiser	60 505 00	
Page 8 of 31		Page Subtotal fotal of All Schedules 4A on last page of Schedule)	Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

BALLOT QUESTION COMMITTEE 2. Committee Name Partners for	Transit	
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 04/01/14 Name & Address:		
Susan Miller/Allen Batteau 2016 Shadford Rd Ann Arbor MI 48104	s <u>30</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for N	lemo Itemization
Occupation Employer .		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 04/01/14 Name & Address:		
Jerold Lax/Judith Lax 1015 Bershire Ann Arbor MI 48104	_{\$} 100	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt 04/01/14 Name & Address:		,
Robert Guenzel/Pamela Guenzel 1703 Morton Ave Ann Arbor MI 48104	_{\$} 150	\$
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer	Click Here for Me	mo Itemization
Business Address —		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution#4 4. Date of Receipt 04/03/14 Name & Address:		
L S Blizman 28700 Herndonwood, Framington Hills MI 48334	_{\$} 100	\$
. If over \$100.00 cumulative, please provide:	Click Here for Me	mo Itemization
Occupation Employer		
Susiness Address Direct Direct Direct Direct Direct Direct Direct Direct		
Type of Contribution: Loan from a person		



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION (OMI	AITTEE	2. Commi	ittee Nam	ne Partners for T	ransit	6
Please enter contributors name and address middle initial.	s. If co	ntribution is fron				6, Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. [Date of Receipt	04/03/14				
Amanda Edmonds 320 Garland St Ypsilanti MI 4	8198	3				_{\$} 100	\$
5. If over \$100.00 cumulative, please prov	/ide:					Click Here for Me	emo Itemization
Occupation	Emplo	yer					
Business Address							
Type of Contribution: 🗸 Direct		Loan from a	a person		und Ralser		•
Contribution # 2 Name & Address;	4. 1	Date of Receipt	04/03/14			· · · · · · · · · · · · · · · · · · ·	
Kristen Cuhran/Natalie Holbro						EΛ	
11 S Normal St Ypsi MI 4819	7					ş <u>50</u>	\$
5. If over \$100.00 cumulative, please prov	ide:					Click Here for Mer	mo Itemization
Occupation	Emplo	yer					
Business Address							
Type of Contribution: V Direct		Loan from a p	person	Fu	ind Raiser		
Contribution # 3 Name & Address;	4. [Date of Receipt C	04/03/14	Britished			
Linda Gobler/Dennis Schorna	ck						
4232 Redbud Tr. Dr. Williams		/II 48895				ş 75	\$
5. If over \$100.00 cumulative, please prov	ide:					Click Here for Men	no Itemization
Occupation	Emplo	yer	· · · · · · · · · · · · · · · · · · ·		······································		
Business Address				<u></u>			
Type of Contribution: V Direct		Loan from a p	erson	Fu	nd Raiser		
B. Contribution # 4 Name & Address:	4. D	ate of Receipt 0)4/03/14				
Christine Laughren							
605 N River St Ypsi MI 48198						_{\$} 40	\$
5. If over \$100.00 cumulative, please provi	de;					Click Here for Men	no Itemization
Occupation	Employ	/er					
Business Address							
Type of Contribution: V Direct		Loan from a	a person	F	und Raiser		
					Page Subtotal	\$265.00	
					of All Schedules 4A		
10 31			(Comple	ele on las	t page of Schedule)	Enter this total	
Page of						on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>B-2010-002</u>

BALLOT QUE	STION COMMIT	ITEE 2. Commit	tee Name Partners for	ransit	E
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.					7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. Dat	e of Receipt 04/03/14			
Arthur Brannon III 303 Westbrook Circle	Naperville IL	60565		ş <u>20</u>	\$
5. If over \$100.00 cumulative, p	olease provide:			Click Here for M	emo ltemization
Occupation	·	r		•	
Business Address					
Type of Contribution: VDire	ct	Loan from a person	Fund Ralser		
3. Contribution # 2 Name & Address:	4. Dat	e of Receipt 04/03/14	•		
Teresa Gillotti 321 E Cross St Apt 1	Ypsi MI 48198	3		_{\$} 40	\$
5. If over \$100.00 cumulative, p	lease provide;			Click Here for Me	mo Itemization
Occupation		ŗ			
Business Address			2 2007-72 2004-	•	
Type of Contribution: V Direct		Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	4. Dat	e of Receipt 04/04/14			
Grace Sweeney/Peter	Murdock				
504 N. River St. Ypsi			·	_{\$} 100	. \$
5. If over \$100.00 cumulative, p	elease provide:			Click Here for Me	no Itemization
Occupation	Employe	r		•	•
Business Address					
Type of Contribution: V Direct		oan from a person	Fund Raiser		
. Contribution # 4 Name & Address:	4. Date	of Receipt 04/07/14	·		
Anthony Derezinski 1345 Glendalockk Cir.	Ann Arbor MI	48104	•	_{\$} 200	\$
. If over \$100.00 cumulative, ple	ease provide:			Click Hore for Mo	ma Hamization
Occupation Retired	Employer			Click Here for Me	no nemization
Business Address					
Type of Contribution: 🗸 Dire	ect	Loan from a person	Fund Raiser		
'ageof31			Page Subtotal d Total of All Schedules 4A te on last page of Schedule)	\$360.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION CO	OMMITTEE 2. Committee N	lame Partners for	Fransit	
Please enter contributors name and address. 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 04/14/14			1 date of receipty
Kim Hawes/Randall Hawes 5990 Orchard Bend Bloomfield	Hills MI 48301		_s 50	\$
5. If over \$100.00 cumulative, please provid	de:		Click Here for Me	mo Itemization
Occupation E	mployer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address:	4. Date of Receipt 04/14/14			
Michael Staebler Ste.1800, 4000 Town Center S	Southfield MI 48075		s_100	\$
5. If over \$100.00 cumulative, please provid	9:		Click Here for Men	no Itemization
Occupation	mployer	· · · · · · · · · · · · · · · · · · ·		
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 04/17/14	1		
Sally Haines Living TRT 1911 Packard St. Ann Arbor M 5. If over \$100.00 cumulative, please provide			\$ 50 Click Here for Mem	\$o Itemization
OccupationE	mployer	· · · · · · · · · · · · · · · · · · ·		
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution#4 Name & Address: Sheila Hamp 2000 Brush St., Sste 440 Detro	4. Date of Receipt <u>04/17/14</u> it MI 48226		_{\$} 5000	
5. If over \$100.00 cumulative, please provide Occupation Retired Er	: nployer		Click Here for Mem	o Itemization
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
Page 12 of 31		Page Subtotal al of All Schedules 4A last page of Schedule)	\$5,200.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>B-2010-002</u>

BALLOT QUESTION CO	OMMITTEE 2. Committe	e Name Partners for T	ransit	<u> </u>
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.				7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. Date of Receipt 04/12/14			
Renee Vettorello 7203 Bethel Drive Saline MI 4	8176		_{\$} 25	\$
5. If over \$100.00 cumulative, please provid	le:		Click Here for Me	mo Itemization
Occupation E	mployer			
Business Address				
Type of Contribution;	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4. Date of Receipt 04/14/14			
Lucia Heinold/Henry Heinold 1224 Wines Dr. Ann Arbor MI	48103		ş <u>40</u>	\$
5. If over \$100.00 cumulative, please provide	e:		Click Here for Men	no Itemization
Occupation E	mployer			
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	4. Date of Receipt 04/07/14			
Janis Bobrin 3465 Vintage Valley Ann Arbor	r MI 48106		_{\$} 50	\$
5. If over \$100,00 cumulative, please provid	e:		Click Here for Mem	o Itemization
OccupationE	mployer			
Business Address		-		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt 04/15/14			
Ervin Leasing 3893 Research Park Dr. Ann A	urbor MI 48108		_{\$} 3000	\$
i. If over \$100.00 cumulative, please provide	:		Click Here for Men	30 Itemization
OccupationEr	mployer			io nomination;
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Page 13 of 31		Page Subtotal Total of All Schedules 4A on last page of Schedule)	\$3,115.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>B-2010-002</u>

BALLOT QUESTION CO	MMITTEE 2. Committee	e Name Partners for 1	Fransit .	23
Please enter contributors name and address. If 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 04/10/14		 	,
Pamela White 1406 Russell Rd. Ann Arbor MI	48103		_{\$} 200	\$
5. If over \$100.00 cumulative, please provide	:		Click Here for M	emo Itemization
Occupation not working-disabled Em	ployer			
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt <u>04/12/14</u>			
Wanda Wysor/John III 1041 E. Forest Ypsi MI48196			ş <u>25</u>	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Em	ployer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Address:	1. Date of Receipt 04/10/14			
Nathaniel Voght 337 Fowler St. Howell MI 48843			_{\$} 10	\$
5. If over \$100.00 cumulative, please provide:	•		Click Here for Men	no Itemization
OccupationEm	ployer			
Business Address — [7]	 			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
. Contribution # 4 4. Name & Address:	Date of Receipt 04/07/14.			
Clark Charnetski/Mary Charnetsl 2646 Traver Blvd. Ann Arbor Mi		•	_{\$} 50	\$
. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
OccupationEmp	oloyer		CHAIR FICTO IOT INTO	no nomization
Business Address				į
Type of Contribution: V Direct	Loan from a person	Fund Raiser		·
rage 14 of 31		Page Subtotal Fotal of All Schedules 4A on last page of Schedule)	\$285.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-2010-002

Page

BALLOT QUESTION CO	MMITT	EE 2. Committee	Na	me Partners for T	ransit	E
Please enter contributors name and address. If middle initial.	contribu				6. Amount	7. Cumulative for Election Cycle for Each Confributor (Through date of receipt)
3. Contribution # 1 Name & Address:	i. Date o	of Receipt 04/15/14			· · · · · · · · · · · · · · · · · · ·	
Eli Nathans/Caroline Nathans 1210 Clague St. Ann Arbor MI 4	8103				_{\$} 50	\$
5. If over \$100.00 cumulative, please provide	:	·			Click Here for Me	mo Itemization
Occupation Em	ployer_					
Business Address						
Type of Contribution: VDirect	L	oan from a person		Fund Raiser		
3. Contribution # 2 Name & Address:	1. Date o	of Receipt 02/22/14				
Stephen Adams 2280 Mershon Drive Ann Arbor,	MI 48	3103-6047			<u>\$ 25 </u>	\$
5. If over \$100.00 cumulative, please provide:					Click Here for Men	no Itemization
Occupation Em	ployer _	······································				
Business Address						
Type of Contribution: 🗸 Direct	Lo	an from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	l. Date o	of Receipt 03/20/14				
Laurence Krieg 252 Carriage Way Ypsilanti, Ml	4819	7			_{\$} 500	\$
5. If over \$100.00 cumulative, please provide:	:				Click Here for Mem	o Itemization
Occupation Retired Em	ployer_				•	
Business Address —						
Type of Contribution: V Direct	Loa	nn from a person	F	und Raiser		
B. Contribution # 4 4 Name & Address:	Date of	Receipt 03/22/14				
Kimberly Truzzi 531 Hollis Ave Ypsilanti, MI 481	98				_{\$} 20	\$
i. If over \$100.00 cumulative, please provide:					Click Here for Mem	on itemization
Occupation Emp	oloyer				ORCA FIGIC ION WICH	io italiization
Business Address						
Type of Contribution: 🗸 Direct		oan from a person		Fund Raiser		
Page 15 of 31				Page Subtotal I of All Schedules 4A ast page of Schedule)	\$595.00 Enter this total on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE 2. Committee Name Partners	for Transit	50
Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial.		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Date of Receipt 03/24/14 Name & Address:		
Christine Green 4505 dexter rd. ann arbor, MI 48103	_{\$} 1000	\$
5. If over \$100.00 cumulative, please provide: Occupation self employed Employer	Click Here for M	emo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 03/26/14 Name & Address:	•	
Prudence Rosenthal 2105 Devonshire Road Ann Arbor, MI 48104	_{\$} 25	\$
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 Fund Raiser	_	
3. Contribution # 3 A. Date of Receipt 03/27/14 Name & Address:		
Paul Hillegonds 47088 Brooks Lane PLYMOUTH, MI 48170	_{\$} 250	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Retired Employer	_	
Business Address Type of Contribution: ☐ Direct	•	
Contribution # 4 4. Date of Receipt 03/28/14 Name & Address:		
Elizabeth Noren 1516 Glen Leven rd Ann Arbor, MI 48103	_{\$} 25	\$
. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer	-	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subt Grand Total of All Schedules (Complete on last page of Schedules) Page	34A	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTER

BALLOT QUESTION COM	MITTEE 2. Committee	Name Partners for T	ransit	K3
Please enter contributors name and address. If o middle initial.	ontribution is from an individual, enter	last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Name & Address:	Date of Receipt 03/28/14			-
Joan Lowenstein 502 Burson Place Ann Arbor, MI	48104		ş <u>100</u>	ş <u>300</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Attorney Emp	_{loyer} Jaffe Law			
Business Address 201 S. Main St., Ste.	300, AA MI, 48104	· · · · · · · · · · · · · · · · · · ·		
Type of Contribution: Vincet	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 03/28/14	·		
Janis Bobrin			100	
3465 Vintage Valley Rd Ann Arb	or, MI 48105		\$ <u>100</u>	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Emp	loyer			
Business Address				
Type of Contribution: 📝 Direct	Loan from a person	Fund Raiser		
3. Contribution #3 4. Name & Address:	Date of Receipt 03/28/14			
Michael Allemang				
3465 Vintage Valley Road Ann A	rbor, MI 48105		_{\$} 100	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Memo	o Itemization
Occupation Emp	loyer			
Business Address				-
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
: Contribution # 4 4. I Name & Address:	Date of Receipt 03/29/14	·		
Sarah Newman				
509 8th Street Ann Arbor, MI 481	03		_{\$} 100	\$
. If over \$100.00 cumulative, please provide:				
Occupation Emplo	over		Click Here for Mem	o itemization
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
	h a d	Page Subtotal	\$400.00	
		otal of All Schedules 4A		
17 , 31	(Complete o	n last page of Schedule)	Enter this total	
Page of			on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COI	VINITTEE 2. Committee	Name Partners for 7	ransit	*
Please enter contributors name and address. If middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. Date of Receipt 03/31/14	*****		
Dion Frischer 3349 Burbank Drive Ann Arbor,	MI 48105-1516		_{\$} 50	\$
5. If over \$100.00 cumulative, please provide	:		Click Here for Me	mo Itemization
Occupation Em	ployer	· · · · · · · · · · · · · · · · · · ·		
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 04/01/14			
Aaron Stark			50	
180 Fairhills Drive Ypsilanti, MI	48197		_{\$} 50	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Em	ployer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	I. Date of Receipt 04/03/14			
Nancy Shiffler 2877 Sorrento Ave Ann Arbor, N	ЛІ 48104		_{\$} 100	\$
5. If over \$100.00 cumulative, please provide:	:		Click Here for Mem	o Itemization
OccupationEm	ployer	,		
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4. A. Name & Address:	Date of Receipt 04/04/14	!	······	· · · · · · · · · · · · · · · · · · ·
David Lovinger				
1131 Oak Ave Evanston, IL 602	02		_{\$} 25	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	a Hamiratian
OccupationEmp	oloyer		Click Liese to Mett	o itemization
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Ralser		
Page 18 of 31		Page Subtotal otal of All Schedules 4A n last page of Schedule)	\$225.00 Enter this total on line 3a of Summary Page	``



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number	B-2010-002

BALLOT QUESTION CO	VIVII I I EE 2. Committee Na	ame Partners for I	ransit	
Please enter contributors name and address. middle initial.			6. Amount	7. Curnulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address;	4. Date of Receipt 04/04/14			
Rochelle Stoler				
2100 Devonshire Road Ann Ar	bor, MI 48104		_{\$} 100	\$
5. If over \$100.00 cumulative, please provid	e:		Click Here for Me	mo Itemization
Occupation En	nployer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4. Date of Receipt 04/04/14			
Waleed Howrani			40	
715 Miner Street Ann Arbor, M	II 48103		ş <u>12</u>	\$
5. If over \$100.00 cumulative, please provide	:		Click Here for Men	no Itemization
OccupationE	mployer	· · · · · · · · · · · · · · · · · · ·	•	
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	4. Date of Receipt 04/05/14			
Touching Health, LLC				
3570 Dexter Ann Arbor Rd. An	n Arbor, MI 48103		ş 10	\$
5. If over \$100.00 cumulative, please provide	e:		Click Here for Mem	o Itemization
Occupation E	mployer			
Business Address ————				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
B. Contribution # 4 Name & Address:	4. Date of Receipt 04/09/14			
Roger Kerson	•			
402 Virginia Ann Arbor, MI 481	03		_{\$} 250	\$
5. If over \$100.00 cumulative, please provide	:		Click Here for Mem	no Hemization
the state of the s	nployer RK Communications			
Business Address 402 Virginia Ann A	bor, MI 48103			
Type of Contribution: 🕢 Direct	Loan from a person	Fund Raiser		į
		Page Subtotal	\$372.00	
		al of All Schedules 4A		
19 31	(Complete on	last page of Schedule)	Enter this total	
Pageof			on line 3a of Summary	

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B-2010-002

r_B-2010-002

•	OUIEDOLE 4M				
BALLO1	RQUESTION COMM	AITTEE 2. Committ	ee Name Partners for	Transit	<u> </u>
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.					7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4, [Date of Receipt 04/09/14		· · · · · · · · · · · · · · · · · · ·	
Rebecca Head 910 Edgewood <i>A</i>	Ann Arbor, MI 48°	103		_{\$} 75	\$\$
5. If over \$100.00 cumul	ative, please provide:			Click Here for N	Memo Itemization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	✓ Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address:	4, [Date of Receipt 04/09/14	•		-
Harvey Somers 2129 Autumn Hill	Drive Ann Arbo	r, MI 48103		_{\$} 100	_{\$} 150
5. If over \$100.00 cumula	tive, please provide:			Click Here for M	emo Itemization
Occupation retired	Emplo	yer	····		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	4. [Pate of Receipt 04/11/14			
Michael Allemang 2129 Autumn Hill		r, MI 48103		_{\$_} 100	\$
5. If over \$100.00 cumul	ative, please provide:			Click Here for Me	mo Itemization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address:	4. D	ate of Receipt 04/16/14			
Margaret Teall 1208 Brooklyn Av	e. Ann Arbor, M	48104		_{\$} _50	\$
5. If over \$100.00 cumula	live, please provide:			Click Here for Me	emo Itemization
Occupation	Employ	/er			Tome Landing
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
20 24			Page Subtotal 1 Total of All Schedules 4A e on last page of Schedule)	
Page 20 of 31				Enter this total on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

BALLOT QUESTION	COMMITTEE 2. Committee Nat	_{me} Partners for T	ransit	
middle initial.	ss. If contribution is from an individual, enter las		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. Date of Receipt 04/17/14			
Samuel Firke 2809 Craig Rd. Ann Arbor, M	/II 48103		s <u>50</u>	\$
5. If over \$100.00 cumulative, please pro	vide:		Click Here for Me	emo Itemization
Occupation	Employer	.,,		
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4. Date of Receipt <u>04/17/14</u>			
John Azzolini 3321 Yellowstone Dr Ann A	rbor, MI 48105		_{\$} 100	\$
5. If over \$100.00 cumulative, please pro-	vide:		Click Here for Me	no Itemization
Occupation	_Employer			•
Business Address				
Type of Contribution: V Direct	Loan from a person	und Raiser		
3. Contribution # 3 Name & Address:	4. Date of Receipt 04/17/14			
Anya Dale 821 Sunrise Ct. Ann Arbor, I	ИІ 48103		_{\$} _20	\$
5. If over \$100.00 cumulative, please pro			Click Here for Men	no Itemization
Occupation	Employer			
Business Address Type of Contribution; Direct	Loan from a person	und Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 04/17/14	····		
Patti Smith 110 Depot St. Ann Arbor, MI	48104	•	_{\$} 25	\$
. If over \$100.00 cumulative, please prov	ide:		Click Here for Mer	no Itemization
Occupation	Employer	· · · · ·		
Business Address				
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Page 21 of 31		Page Subtotal of All Schedules 4A ast page of Schedule)	\$195.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A ALLOT QUESTION COMMITTE

BALLOT QUESTION CO	VIVITTEE 2. Committee	Name Partners for T	ransit	***
Please enter contributors name and address. If middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Amme & Address:	1. Date of Receipt 04/17/14			
Nolan Orfield 600 Brierwood Ct. Ann Arbor, M	N 48103		_{\$} 40	\$
5. If over \$100.00 cumulative, please provide	:		Click Here for Me	mo Itemization
Occupation Em	ployer			•
Business Address Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 Name & Address;	4. Date of Receipt <u>04/18/14</u>			
Carey Jernigan 2700 Gladstone Ann Arbor, MI	48104		_{\$} _50	\$
5. If over \$100.00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Em	ployer			
Business Address				•
Type of Contribution: Virginia Direct	Loan from a person	Fund Raiser		
3. Contribution #3 A	i. Date of Receipt 04/18/14			
Harvey Somers 2129 autumn hill dr ann arbor, N	ЛІ 48103		_{\$} 20	_{\$} _170
5. If over \$100.00 cumulative, please provide	:		Click Here for Mem	o Itemization
Occupation retired Em	ployer	·	•	
Business Address —				,
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
. Contribution # 4 4 Name & Address:	Date of Receipt 04/18/14			
Karen Juzswik 1458 Kingwood Ypsilanti, MI 48	197		_{\$} 100	\$
. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
	oloyer General Motors			
Business Address Renaissance Center	Detroit, MI 48243			
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
Page 22 of 31		Page Subtotal otal of All Schedules 4A n last page of Schedule)	\$210.00 Enter this total on line 3a of Summary Page	



Business Address -Type of Contribution:

3. Contribution # 4

Occupation

Business Address ____ Type of Contribution:

MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 4A

	BUREAU OF ELE	CTIONS					
_	ITEMIZED CON SCHEDUL BALLOT QUESTI	E 4A			Number B-2010		
Please enter omiddle initial.	contributors name and a					6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution Name & Addre		4. Date of Re	o4/19/14	·			date of receipt)
Richard N 1203 Gar	leisler dner Ann Arbor	, MI 48104				_{\$} 75	\$
5. If over \$10	0.00 cumulative, pleas	provide:				Click Here for M	emo Itemization
Occupation		Employer					
Business Add	ress						
Type of Cont	ribution: 🗸 Direct	Loan	from a person		Fund Raiser		
3. Contribution		4. Date of Re	eceipt 04/19/14				
Vijay San 1707 HAI	karan RDING ROAD <i>A</i>	NN ARBOR, N	ЛІ 48104			_{\$} _100	\$
. If over \$100	.00 cumulative, please	provide:				Click Here for Me	emo Itemization
Occupation							
— Business Addr							
	bution: Direct	Loan fr	om a person	F	und Ralser		
3. Contribution Name & Addre		4. Date of Re	ceipt				
						\$	\$
5. If over \$100	0.00 cumulative, please	provide:				Click Here for Mer	no Itemization
Occupation		Employer			· · · · · · · · · · · · · · · · · · ·		
Business Addre	988						
Type of Contri	1 3	Loan fro	om a person	F	ınd Ralser		
Contribution Name & Addre	# 4 988:	4. Date of Rec	ceipt				
						\$	\$
If over \$100.	00 cumulative, please	provide:				Click Here for Me	mo Itemization
Occupation		Employer	· · · · · · · · · · · · · · · · · · ·	•		, 1 101 101 1010	
usiness Addre	ss						
Type of Cont	ribution: Direct	Loan	from a person		Fund Raiser		
					Page Subtotal	\$175.00	

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

Enter this total on line 3a of Summary Page

23 of 31



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number <u>B-2010-002</u>

BALLOT QUE	STION COMMITTEE 2, Committee Name Partne	rs for Transit	45
Please enter contributors name ar middle initial.	nd address. If contribution 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 04/14/14		-
Jan Newman 1071 Young Place Ann	n Arbor, MI 48105	, <u>\$</u> 200	\$
5. If over \$100.00 cumulative, pl	lease provide:	Click Here for Me	mo Itemization
Occupation Retired	Employer		
Business Address			
Type of Contribution: Direc	t Loan from a person Fund Raiser		
Contribution # 2 Name & Address;	4. Date of Receipt 04/02/14		
Sarah and David Gryni		00	
2004 Manchester Rd.	Apt 5 Ann Arbor, MI 48104	_{\$} _99	\$
5. If over \$100.00 cumulative, ple	ease provide:	Click Here for Men	no itemization
Occupation	Employer	·	
Business Address	-		
Type of Contribution: 🗸 Direct	Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address;	4. Date of Receipt 04/08/14		
Barbara Reed/Philip Za 2903 Craig Rd Ann Arl		_{\$} _50	\$
6. If over \$100.00 cumulative, plo	ease provide:	Click Here for Mem	o Itemization
Occupation	Employer		
Business Address	<u> </u>		
Type of Contribution: V Direct	Loan from a person, Fund Raiser		
. Contribution # 4 Name & Address:	4. Date of Receipt 04/07/14		
Nicola and Ann Subotic 1760 Traver Rd Ann Ai		_{\$} 50	s
. If over \$100.00 cumulative, ple	ease provide:		
Occupation		Click Here for Men	o Itemization
Business Address			
Type of Contribution: V Direct	t Loan from a person Fund Raiser		
nage 24 of 31	Page S Grand Total of All Schedi (Complete on last page of Sc		



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number B	-2010-002
----------------------------	-----------

BALLO	FQUESTION COM	MITTEE 2. Committee	Name Partners for	Γransit	
Please enter contributors middle initial.	name and address. If c	ontribution is from an individual, ente		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date of Receipt 04/09/14			
Arthur Nusbaum 917 Olivia Ave. A		8104		§ 200	\$
5. If over \$100.00 cumul	ative, please provide:		•	Click Here for Me	emo Itemization
Occupation owner	Empl	oyer Steppingstone Prop	erties		
Business Address 123	N. Ashley, Ann A	rbor, MI 41804			
Type of Contribution:	✓ Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address:	4.	Date of Receipt 04/08/14			
J M Jung P.O. Box 7060 N	ovi, MI 48376			_{\$} _1000	\$
5. If over \$100.00 cumula Occupation Self empl		oyer	·	Click Here for Mer	no Hemization
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address;	4.	Date of Receipt 04/07/14			
Peter and Henriett 3562 W. Huron Riv		bor 48103		\$ 5000	\$
5. If over \$100.00 cumula				Click Here for Mem	o Itemization
Occupation Retired P	rofessor Empl	_{oyer} Mosaic Foundation O	FR & P Heydon		
Business Address 324	E. Washington,	Ann Arbor, MI 48104			•
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 4 Name & Address:	4. 0	Date of Receipt 04/17/14			
Richard and Norma 3645 Daleview Dr.		8105		_{\$} 200	\$
i. If over \$100.00 cumulat	ive, please provide:			Clink Hara for Man	a Itamination
Occupation Retired	Emplo	уег		Click Here for Men	io itemization
Business Address					•
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
25 of 31			Page Subtotal Fotal of All Schedules 4A on last page of Schedule)	\$6,400.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A SALLOT OUESTION COMMITTE

BALLOT QUESTION COM	MITTEE 2. Comm	ittee Name Partners for	Γransit	48
Please enter contributors name and address. If c middle initial.	~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	·····	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 4. Name & Address:	Date of Receipt 04/16/14			
Alan Caldwell 2685 Page Ann Arbor MI 48104			_{\$} 20	\$
5. If over \$100.00 cumulative, please provide:			Click Here for M	emo Itemization
Occupation Emp	oyer		·	
Business Address				
Type of Contribution; Virect	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt 04/16/14			
Waleed Howrani			20	
715 Miner Ann Arbor MI 48103			ş <u>20</u>	. \$
5. If over \$100.00 cumulative, please provide:			Click Here for Me	mo Itemization
Occupation Emp	oyer			
Business Address		· · · · · · · · · · · · · · · · · · ·		
Type of Contribution: V Direct	Loan from a person	Fund Raiser	•	
3. Contribution #3 4. Name & Address:	Date of Receipt 04/10/14			
Sharon Ongaro				
506 Pauline Ann Arbor MI 48103	3		_{\$} 20	\$
5. If over \$100,00 cumulative, please provide:			Click Here for Mer	no Itemization
Occupation Emp	oyer			
Business Address	1			
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 4, I Name & Address:	Date of Receipt 04/10/14			
Sarah Andrew				
789 Halcyon Ct. Ann Arbor MI 48	3103		_{\$} 20	\$
6. If over \$100,00 cumulative, please provide:			Click Here for Mer	no Hemization
Occupation Emplo	oyer		CHERT HOTE HOT INTER	TO REFILZATOR
Business Address				
Type of Contribution: Virect	Loan from a person	Fund Raiser		
age		Page Subtotal nd Total of All Schedules 4A ete on last page of Schedule)	\$80.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A RALLOT OUESTION COMMITTEE

BALLU	I GOESTION COM	WILLIEE 2. Committe	e Name Partners for I	ransit	
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.					7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4.	Date of Receipt 04/10/14			
Julia Roberts 508 W. Stadium	Ann Arbor MI 4	8103		<u>\$</u> 20	\$
5. If over \$100,00 cumu	latíve, please provide:		•	Click Here for M	emo Itemization
Occupation	Empl	oyer			
Business Address	•			•	
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address:	4.	Date of Receipt 04/10/14			
Hillary Bisnett 1810 Stadium Pl	ace, Apt. 6 Ann	Arbor MI 48103		ş <u>20</u>	\$
5. If over \$100.00 cumul	ative, please provide:		•	Click Here for Me	mo Itemization
_		oyer	·		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #3 Name & Address:	4.	Date of Receipt 04/10/14			
Terra Reed 401 W. Hoover #	4 Ann Arbor Mi	48103		_{\$_} 20	\$
5. If over \$100.00 cumul	ative, please provide:			Click Here for Mer	no Itemization
Occupation	Empl	oyer			
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
B. Contribution # 4 Name & Address:	4. [Date of Receipt 04/10/14			1 1 1 Vilina press
Rebecca Meunine 3115 Oakwood S		48104		_{\$} _20	\$
5. If over \$100.00 cumula	tive, please provide:			Click Here for Me	mo Itemization
Occupation	Emplo	oyer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Pageof31			Page Subtotal Total of All Schedules 4A on last page of Schedule)	\$80.00 Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002

BALLOT QUESTION COMMITTEE 2. Committee Name Partners for 1	ransit	33
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 04/10/14 Name & Address:		
Chuck Warpehoski 2020 Winewood Ann Arbor MI 48103	_{\$} 20	_{\$} 120
5. If over \$100.00 cumulative, please provide: Occupation Executive Director Employer Interfaith Council for Peace and Justice Business Address 1679 Broadway, AA MI 48105	Click Here for Me	emo itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 04/03/14 Name & Address:		
Grace Sweeney 504 N. River St. Ypsilanti MI 48198	s_10	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Employer		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 04/03/14	······	
Name & Address:		
Amanda Edmonds 320 Garland St. Ypsilanti Mi 48198	<u>\$ 10</u>	_{\$} 110
5. If over \$100.00 cumulative, please provide: Occupation Executive Director Employer Growing Hope	Click Here for Men	o Itemization
Business Address 32 N. Washington St., #11, Ypsilanti MI 48197	•	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 04/03/14 Name & Address:		
Kristen Cuhran 111 S. Normal St. Ypsilanti MI 48197	_{\$} _10	\$
i. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		:
Page Subtotal Grand Total of All Schedules 4A (Complete on last page of Schedule) Page of	\$50.00 Enter this total on line 3a of Summary	



ITEMIZED CONTRIBUTIONS **SCHEDULE 4A**

1. Committee I.D. Number B-2010-002

Page

BALLO	T QUESTION CON	MITTEE	2. Committee N	ame Partners for	Γransit	
Please enler contributors middle initial.	s name and address. If				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4	. Date of Receipt 04/0	3/14			
Christine Laughr 605 N. River St.					_{\$} 10	\$
5. If over \$100.00 cumu	dative, please provide:				Click Here for M	emo Itemization
Occupation	Emp	oloyer				•
Business Address						
Type of Contribution:	Direct	Loan from a perso	on [Fund Raiser		
Contribution # 2 Name & Address:	4	. Date of Receipt 04/03	3/14			
Pete Murdock 504 N. River St.	Ypsilanti MI 4	8198		-	ş <u>10</u>	\$
5. If over \$100.00 cumul	lative, please provide:				Click Here for Me	mo Itemization
Occupation	Emp	oloyer	· · · · · · · · · · · · · · · · · · ·			
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
Contribution # 3 Name & Address:	4	Date of Receipt 04/03/	/14			
Paul Schreiber 922 Pleasant Dr.	Ypsilanti MI 48	3197			_{\$} 10	\$
5. If over \$100.00 cumu	lative, please provide:				Click Here for Men	no Itemization
Occupation	Emp	oloyer				
Business Address —	·		· · ·			
Type of Contribution:	Direct	Loan from a person		und Raiser		
3. Contribution # 4 Name & Address:	4.	Date of Receipt 04/03/	/14			
Valerie Bieberich		40407				
318 Washtenaw	Rd. Ypsilanti ivii	48197			\$ <u>10</u> .	\$
5. If over \$100.00 cumuli	ative, please provide:				Click Here for Mer	no Itemization
Occupation	Emp	loyer				
Business Address						
Type of Contribution:	Direct	Loan from a perso	on	Fund Raiser		
29 of 31				Page Subtotal al of All Schedules 4A ast page of Schedule)	\$40.00 Enter this total on line 3a of Summary	



ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number	B-2010-002		
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BALLO	T QUESTION COMI	IITTEE 2. Committee	e Name Partners for	Transit	
middle initial.	name and address. If co	ntribution Is from an Individual, en		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	4. [Pate of Receipt 04/03/14		·····	date of receipty
Sally Lawler 1911 Packard St.	. Ann Arbor MI 4	8104		_{\$} 10	\$
5. If over \$100.00 cumul	ative, please provide:			Click Here for Me	emo Itemization
Occupation	Emplo	yer			
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4. C	pate of Receipt 04/03/14			
Mark Maynard 307 N Washingto	on St. Ypsilanti <i>N</i>	I 48197		_{\$} _10	\$
5. If over \$100.00 cumula	ative, please provide:			Click Here for Mer	no Ilemization
Occupation	Emplo	yer	····		
Business Address	<u> </u>		-		
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	4. D	ate of Receipt 04/03/14			
Gregory McIntosh 605 N. River St. \		98		<u>\$ 10 </u>	\$
5. If over \$100.00 cumula	ative, please provide:			Click Here for Mem	o Itemization
Occupation	Emplo	/er			
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		·
. Contribution # 4 Name & Address:	4. Da	te of Receipt 04/03/14			
Karen Juzswik 1458 Kingwood St	t. Ypsilanti MI 48	3197		_{\$} 10	_{\$} _110
. If over \$100.00 cumulat	ive, please provide:			Click Here for Men	n llemization
Occupation Engineer	Employ				o romagnon
Business Address 300 F	Renaissance Cente	er, Detroit MI 48243			ļ
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
7age of 31		Grand (Complete	Page Subtotal Total of All Schedules 4A on last page of Schedule)	\$40.00 Enter this total on line 3a of Summary Page	



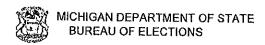
ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

BALLO	T QUESTION COM	MITTEE 2, Comm	ittee Name Partners for	Transit	
imodie miliai.	s name and address. If o	contribution is from an Individual,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 Name & Address:	4.	Date of Receipt 04/03/14			T date of tecespty
Karl Geil 502 N Adams Yr	osilanti MI 4819	7		_{\$} 10	\$
5. If over \$100.00 cumu	ilative, please provide:	·		Click Here for Ma	emo Iternization
Occupation	Emp	loyer	•		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 2 Name & Address:	4.	Date of Receipt 04/03/14			
Courtney Miller				40	
407 E. Forest Av	e. Ypsilanti MI	48197		ş <u>10</u>	\$
6. If over \$100.00 cumul	ative, please provide:			Click Here for Mer	no itemization
		oyer			no nonnegro(t
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #3	4.	Date of Receipt 04/03/14			
Name & Address: Martha Krieg					
252 Carriage Wa	y Ypsilanti MI 4	8197		<u>\$</u> 20	\$
5. If over \$100.00 cumu	lative, please provide:			Click Here for Mem	o Ifemization
Occupation		oyer			o remization
Business Address			····		
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4	4. [Date of Receipt			
Name & Address:					
				\$	\$
5. If over \$100.00 cumula	tive, please provide:			Click Here for Mem	o Itemization
Occupation	Emplo	yer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtotal	\$40.00	
		Gran	d Total of All Schedules 4A	\$39,427.20	
31 31		(Comple	te on last page of Schedule)	Enter this total	
Page of				on line 3a of Summary Page	

ITEMIZED DIRECT EXPENDITURES

SCHEDULE 4B	Committee I. D. Number B2	2010-00					
BALLOT QUESTION COMMITTEE 2.6	Committee Name Partners fo	or Transit					
3. Name and address of person to whom paid	State purpose of exper Identify the ballot proported indicate whether supported.	sal involved.	6. Date	7. Amount	8. Cumulative for election		
Expenditure # 1 Name & Address:	4. Purpose:		<u> </u>				
Kolossos Printing, Inc.	Envelopes						
301 W. Liberty Ann Arbor, MI 48103	5. Ballot Proposal:		03/20/14	_s 580.45	\$		
	Transit Improveme	ent Millage	Date of Expenditure				
Check box if expenditure is payment of debt or obligation	County: Washtenaw		Click fo	or Memo Itemization	Туре		
reported on previous statement	Support	Oppose					
Fund Raiser	Statewide	Local					
Expenditure # 2 Name & Address:	4. Purpose:						
Inland Press	Postcards						
2001 W. Lafayette Bovd.	5. Ballot Proposal:		03/21/14	_s 2308.53	¢		
Detroit, MI 48216	Transit Improveme	ent Millage	Date of Expenditure	Dale of			
	County: Washtenaw				_		
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose	Click for	Memo Itemization	Type		
Fund Raiser	Statewide	Local					
Expenditure # 3 Name & Address:	4. Purpose:						
U.S. P. S., Liberty Station							
Ann Arbor, MI 48104	5. Ballot Proposal:		03/27/14	_{\$} 245	\$		
	Transit Improveme	ent Millage	Date of Expenditure				
,	County: Washtenaw		Click for	Memo Itemization 1	Voe		
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			7.		
Fund Raiser	Statewide	Local					
Expenditure # 4	4. Purpose;						
Name & Address:	Handout cards						
2001 W. Lafayette Bovd.	5. Ballot Proposal:		03/28/14	_{\$} 950.82	\$		
Detroit, MI 48216	Transit Improveme	ent Millage	Date of Expenditure				
	County: Washtenaw		Click for	Memo Itemization	Type		
Check box if expenditure is payment of debt or obligation							
reported on previous statement	√ Support	Oppose					
Fund Raiser	Statewide	Local		·*····	· ·		
•			otal this page	\$4,084.80			
	(Comp	Orand Total of 9 lete on last page					

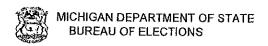
Enter this total on Line 8a of the Summary Page



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number B-2010-0	

	Committee Name Partners for	Transit			
Name and address of person to whom paid	State purpose of expend Identify the ballot propose indicate whether supported	al involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose;	··· · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Martha Valadez	contract staff				
310 Maple Street	5. Ballot Proposal:		03/28/14	_s 980	\$
Ypsilanti, MI 48198	Transit Improveme	nt Millage	Date of Expenditure	· *	Ұ
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			
xpenditure # 2 Name & Address:	4. Purpose:	-	<u> </u>		
Casey Frushour	website developn	nent			
1177 Addington	5. Ballot Proposal:		03/18/14	050	
Ann Arbor, MI 48108	Transit Improvemer	nt Millage		_{\$} 950	\$
,	County: Washtenaw		Date of Expenditure		
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose		Memo Itemization	Туре
Fund Raiser	Statewide	Local			
xpenditure # 3	4. Purpose:		····		
Name & Address:	petty cash				
Cash	5. Ballot Proposal:		02/26/14	_s 200	
	Transit Improvemer	nt Millage	Date of	\$ 200	\$
	County: Washtenaw		Expenditure		
Check box if expenditure is payment of debt or obligation	Support	Oppose	Click for	Memo Itemization	Туре
reported on previous statement Fund Raiser	Statewide				
xpenditure # 4	4. Purpose:	Local		· · · · · · · · · · · · · · · · · · ·	
Name & Address:		<u> </u>			
fain Street Strategies	Campaign support	<u> </u>	02/26/14	2500	_
30 W Ionia St Lansing MI 48933	5. Ballot Proposal: Transit Improvemer	nt Millage	Date of	\$	\$
	· · · · · · · · · · · · · · · · · · ·		Expenditure	B4+	-
Check box if expenditure is payment of debt or obligation	County: Washtenaw		CHICK FOR	Memo Itemization	rype
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			·
		Subto	otal this page	\$4,630.00	
		rand Total of S e on last page	Schedules 4B		
	,		ا ا	Enter this total	1
e 2 of 4				on Line 8a of the Summary Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

Committee I. D. Number B-2010-0

SCHEDULE 4B	Committee I. D. Number				
BALLOT QUESTION COMMITTEE 2.0	Committee Name Partners fo	r Transit			
3. Name and address of person to whom paid	State purpose of expen Identify the ballot propose indicate whether supporter	6. Date	7. Amount	8. Cumulative for election	
Expenditure # 1 Name & Address:	4. Purpose:				-
Sawicki & son	Yard signs				
1521 W. Lafayette, Detroit MI 48216			04/09/14	_s 3013.05	
, , , , , , , , , , , , , , , , , , , ,	5. Ballot Proposal:	A. N. AROLL	Date of	\$ 50 10.00	. \$
	Transit Improveme	ent ivilliage	Expenditure		
Charlebau Kannan Nilanda	County:Washtenaw		Click fo	or Memo Itemization	Type
Check box if expenditure is payment of debt or obligation reported on previous statement	Support				
Fund Raiser	Statewide	Oppose ✓ Local			
Expenditure # 2	4. Purpose:	VILOCAI	······································		
Name & Address:	petty cash				
Cash	5. Ballot Proposal:		04/004/4	000	
	Transit Improveme	nt Millage	04/08/14	_{\$} 200	\$
			Date of Expenditure		
	County: Washtenaw		Exportations		
Check box if expenditure is payment of debt or obligation	Support	Па	Click for	Memo Itemization	Гуре
reported on previous statement		U Oppose			
Fund Raiser Expenditure # 3	Statewide	✓ Local			
Name & Address:	4. Purpose: Advertisement				
Ann Arbor Observer	Advertisement				
2390 Winewood	5. Ballot Proposal:		04/15/14	_{\$} 3316	\$
Ann Arbor, Michigan 48103	Transit Improveme	nt Millage	Date of		\ <u></u>
<u>.</u>	O M/o.chiom.co.		Expenditure		
Check box if expenditure is payment of debt or obligation	County: Washtenaw		Click for	Memo Itemization	Гуре
reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide	✓ Local			
Expenditure # 4 Name & Address:	4. Purpose:				V-1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
Martha Valadez	contract staff			700	
310 Maple Street	5. Ballot Proposal:	 -	04/11/14	_{\$} 700	\$
Ypsilanti, MI 48198	Transit Improveme	nt Millage	Date of		
			Expenditure		
	County: Washtenaw		Click for	r Memo Itemization 1	Гуре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
		المخوا	· · · · · · · · · · · · · · · · · · ·		
		•	otal this page	\$7,229.05	
		Grand Total of S ete on last page		ļ	
	,,	, 3-		- 1	

Enter this total on Line 8a of the Summary Page



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

1. Committee I. D. Number B-2010-0

	Committee Name Partners f	or Transit			
Name and address of person to whom paid	State purpose of experious Identify the ballot proported indicate whether supported.	sal involved.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address:	4. Purpose:				I
Paypal.com	credit card proc	essing fee			
San Jose, CA	5. Ballot Proposal:		04/22/14	_{\$} 103.8	\$
	Transit Improvem	ent Millage	Date of Expenditure		
Check box if expenditure is payment of debt or obligation reported on previous statement Fund Raiser Expenditure # 2	County: Washtenaw Support Statewide 4. Purpose:	☐ Oppose ☑ Local	Click fo	or Memo Itemizatio	on Type
Name & Address:	5. Ballot Proposal: Transit Improveme	ent Millage	Date of	\$..
Check box if expenditure is payment of debt or obligation reported on previous statement	County: Washtenaw	Oppose		Memo Itemization	ı Туре
Expenditure # 3 Name & Address:	Statewide 4. Purpose:	✓ Local			
A Vidayood.	5. Ballot Proposal: Transit Improveme	ent Millage	Date of Expenditure	\$	\$
Check box if expenditure is payment of debt or obligation	County: Washtenaw	——————————————————————————————————————	Click for	Memo Itemization	Туре
reported on previous statement Fund Raiser	Support	Oppose			
Expenditure # 4 Name & Address:	Statewide 4. Purpose:	✓ Local			
	5. Ballot Proposal: Transit Improveme	ent Millage	Date of	\$	<u> </u>
			Expenditure Click for	· Mama Itania-ti-u	. T
Check box if expenditure is payment of debt or obligation reported on previous statement	County: Washtenaw Support	Oppose	CHER IOI	Memo Itemization	ı ıype
Fund Raiser	Statewide	Local			
	Farmed .		otal this page	\$103.80	

2 4 of 4

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

16 047 65

Enter this total

on Line 8a of the Summary Page

1



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

FUND RAISEI SCHEDULE 4 BALLOT QUESTION CO	F	Committee I.D. I	Partner:	2010-0 s for Transit	
	- USE A SE	PARATE SHE	ET FOR EA	ACH EVENT -	
3. Date Event Was Held	4. Number of Indiv or Participating (wi greater)	viduals Attending hichever is		Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held Ladies Literary Club
04/03/14	25	·			218 Washington Ypsilanti, MI 48197
		-			Private Residence
7. Total Contributions	\$ 942.00			<u>. </u>	
8. Other Receipts	\$ 0.00		· · · · · · · · · · · · · · · · · · ·	_	
9. Gross Receipts (Add lines 7 and 8)	\$ 942.00				
10. Total Cost of Event	\$ 0.00	·		*Includes In-Kind 6 Expenditures Mad	Contributions and All de For the Event
11. Check if event was a	joint fund raiser and	d complete the	following:		
Co-Sponsor(s)		Contribution (%)	Split	Ex	penditure Split (%)
					
B-4-4-1			-		
	_				

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	2



MICHIGAN DEPARTMENT OF STATE

BUREAU OF ELECTIONS

FUND RAISER **BALLOT QUESTION COMMITTEE**

Cor 1.

Committee I.D. Nur	mber	
Committee Name	Partners for Transit	
Committee Name	The state of the s	

	- USE A S	SEPARATE SHEE	T FOR EA	CH EVENT -	
3. Date Event Was Held 04/10/14	4. Number of Index or Participating of greater)	ng (whichever is		Fund Raising Activity ght Fundraiser	6. Address and Name (if any) of the place where the activity was held vvolverime State Brewing 2019 W. Stadium Blvd, Ann Arbor, MI 48103
				-	Private Residence
7. Total Contributions	\$ <u>475.00</u>				
8. Other Receipts	\$ 0.00			_	
9. Gross Receipts (Add lines 7 and 8)	\$ <u>475.00</u>				
10. Total Cost of Event	\$ 0.00			*Includes In-Kind (Expenditures Mad	Contributions and All de For the Event
i1. Check if event was	s a joint fund raiser a	and complete the f	oflowing:		
Co-Sponsor(s)		Contribution S (%)	plit	Ех	penditure Split (%)

		Water Company of the			
****			,	. 	100-P
		•	 -	·	

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 2	2	of	2		
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ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2010-002	
2. Committee Name Partners for Transit	

3. Name and Address from whom received	Type of In-Kind Contribution (Check applicable box) Date of Receipt	7. Amount or Fair Market Value	8. Cumulative for Election
If contribution is from an Individual, please enter last name first.	Name & Address of Vendor from whom goods or services were purchased	Willingt Value	Cycle (Through date in Item 5)
Contribution #1 Name & Address:	4. Loan endorsement or guarantee		
Gillian Ream-Gainsley	✓ Goods Donated or loaned Services Donated	1	
726 Prospect Rd.	Goods or Services Purchased by Others	.	
Ypsilanti, MI 48198	Goods or Services Purchased by Others - LOAN	_{\$} 85	\$
If over \$100.00 cumulative, please provide:	Description room rental		
Occupation	5. DATE OF RECEIPT: 04/03/14		
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Iter	nization
	Ladies Literary Club		
	218 N. Washington St.		
✓ Fund Raiser	Ypsilanti, MI 48197		
Contribution #2 Name & Address:	4. Loan endorsement or guarantee		
Sidetrack Bar and Grill	Goods Donated or loaned Services Donated		
56 e. Cross St.	Goods or Services Purchased by Others		
Ypsilanti, MI 48198	Goods or Services Purchased by Others - LOAN	50	
If over \$100.00 cumulative, please provide:	Description catering	_{\$_} 50	\$
Occupation			
Employer Name & Address:	····	Click Here for Memo Iter	mization
	6. VENDOR NAME & ADDRESS:		
	Sidetrack Bar and Grill		-
[-]	56 e, Cross St.		
Fund Raiser	Ypsilanti, MI 48198		
Contribution #3 Name & Address:	4. Loan endorsement or guarantee		
Beezy's	Goods Donated or loaned Services Donated		
20 N. Washington St. 48197	Goods or Services Purchased by Others		
Ypsilanti, MI 48197	Goods or Services Purchased by Others - LOAN	2.0	
If over \$100.00 cumulative, please provide:	Description catering	_{\$} 30	\$
Occupation	04/03/14		
Employer Name & Address:	5. DATE OF RECEIPT: 04/03/14	Click Here for Memo Item	nization
• • • • • • • • • • • • • • • • • • • •	6. VENDOR NAME & ADDRESS:		
	Beezy's		
[7] -	20 N. Washington St. 48197		
✓ Fund Raiser	Ypsilanti, MI 48197		
•	Page Subtotal	\$165.00	
	Grand Total of all Schedules 4-IK	1	
4	(Complete on last page of Schedule)		

Page 1 of 3

Enter this total on line 6a of Summary Page



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

1. Committee I. D.	Number B-2010-0	
• • • • • • • • • • • • • • • • • • • •	Partners for Transit	

	2. Committee Name		
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: Bona Sera Cafe 200 W. Michigan Ave. Ypsilanti, MI 48197 If over \$100.00 cumulative, please provide:	4.	30	\$
Occupation Employer Name & Address: Fund Raiser	5. DATE OF RECEIPT: 07/03/14 6. VENDOR NAME & ADDRESS: Bona Sera Cafe 200 W. Michigan Ave. Ypsilanti, MI 48197	Click Here for Memo ite	mization
Contribution #2 Name & Address: Arbor Brewing Company 114 E. Washington St. Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide:	4.	_{\$} 72	\$
Occupation Employer Name & Address: Fund Raiser	5. DATE OF RECEIPT: 6. VENDOR NAME & ADDRESS: Arbor Brewing Company 114 E. Washington St. Ann Arbor, MI 48104	Click Here for Memo Ite	mization
Contribution #3 Name & Address: Ecology Center 339 E. Liberty Ste 300 Ann Arbor, MI 48104 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 campaign staff 5. DATE OF RECEIPT: 04/20/14 6. VENDOR NAME & ADDRESS:	\$ 5048 Click Here for Memo Iter	\$mization
Fund Reiser	2-0-1444	V05 450.00 V	
	Page Subtotal Grand Total of all Schedules 4-IK (Complete on last page of Schedule)	\$5,150.00	

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Enter this total on line 6a of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK

1. Committee I. D. Number B-2010-0 2. Committee Name Partners for Transit **BALLOT QUESTION COMMITTEE** 3. Name and Address from whom received 4. Type of In-Kind Contribution (Check applicable box) 7. Amount or Fair 8. Cumulative 5. Date of Receipt Market Value for Election 6. Name & Address of Vendor from whom goods or If contribution is from an individual, please enter last Cycle (Through name first. services were purchased date in Item 5) Contribution #1 4. Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Ecology Center 339 E. Liberty Ste 300 Goods or Services Purchased by Others Ann Arbor, MI 48104 185 _{\$} 5233 Goods or Services Purchased by Others - LOAN If over \$100.00 cumulative, please provide: Description use of office equipment Occupation 5. DATE OF RECEIPT: 04/20/14 Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: Fund Raiser Contribution #2 Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN If over \$100.00 cumulative, please provide: Description Occupation 5. DATE OF RECEIPT: Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: Fund Raiser Contribution #3 Loan endorsement or guarantee Name & Address: Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN if over \$100.00 cumulative, please provide: Description Occupation 5. DATE OF RECEIPT: Click Here for Memo Itemization Employer Name & Address: 6. VENDOR NAME & ADDRESS: Fund Raiser Page Subtotal \$185.00

(Complete on last page of Schedule)

Grand Total of all Schedules 4-IK

\$5,400.00

Enter this total on line 6a of Summary Page