

## MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

## **ORIGINAL OR AMENDED**

STATEMENT OF ORGANIZATION FORM FOR LOCAL BALLOT QUESTION COMMITTEES FILED WITH COUNTY CLERK Information on this form is made public.

1. Committee ID #: B-2019-009	*2. Type of Filing:			Eff. Date: 10/17/2019
*3. Date Committee was Formed: 10/	17/2019	_ Amendment to	items: original form	Eff. Date: 10/17/2019
*4. Full Name of Committee: Coalition for Transparency and Fiscal Responsibility from AAPS				
5. Acronym or Abbreviation (if any):				
*6. Complete Committee Mailing Address (May be PO Box): 716 Lans Way, Ann Arbor, MI 48103				
*7. Complete Committee Street Address (May not be PO Box):				
Coalition for Transparency and Fiscal Responsibilty from AAPS				
*Committee Phone: (734) 635-2917 *Committee Email Address: amymillerjordan@gmail.com				
Committee Fax #:	Committee We	ebsite Address:		
*8. Treasurer Name and Complete Address: Amy Jordan 716 Lans Way, Ann Arbor, MI 48103				
Phone #: (734) 635-2917 Email Address: amymillerjordan@gmail.com				
9. Designated Record Keeper Name and Complete Address:				
AAmy Jordan 716 Lans Way, Ann Arbor, MI 48103				
Phone #: (734) 635-2917	Email Address:	amymillerjordar	@gmail.com	
*10. REPORTING WAIVER REQUEST:				
YES, I/WE WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to spend or receive in excess of \$1,000 in				
an election. I/We understand that if the committee does not spend or receive in excess of \$1,000 in an election, the committee does				
not owe Pre, Post, and Quarterly Campaign Statements. I/We further understand that the Reporting Waiver will be automatically				
lost if the committee exceeds the \$1,000 threshold and all required campaign statements must be filed. A Reporting Waiver does not				
exempt a committee from filing Late Contribution Reports.				
NO, I/WE DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to spend or receive in excess of \$1,000 in				
an <u>election</u> . I/We understand that the committee owes Pre, Post, and Quarterly Campaign Statements even if the committee does				
not spend or receive in excess of \$1,000 in an election. I/We further understand that the Reporting Waiver cannot be requested				
retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can				
be found in <u>Appendix C</u> of the Committee Manual.				
*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan				
Association)				
*Official Depository (name and address): Chase Bank				
Secondary Depository (name and address): 2475 W Stadium Blvd, Ann Arbor, Mi 48103				
12. List the specific ballot proposal(s) involved using the official ballot designation if available and mark support or oppose as appropriate: Support Oppose				
Description: Opposition of the AAPS Billion Dollar Bond				
Indicate the ballot proposal district below by selecting County (include the county name), Multi-County or Local (include the name of				
the jurisdiction). If multi-county, list the county where the greatest number of voters eligible to vote on the proposal reside.				
	ti-County	8	Local Ann Arbor Publ	•
			V Ann Arbor Publ	ic Schools
13. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are				
true, accurate and complete to the best				
preparation of each statement electroni		ommittee and that th	e contents of each statement wi	ill be true, accurate and
complete to the best of my/our knowledge or belief.				
*Current Treasurer		*Bacianata	d Record Keeper (if Applicable)	
		Designate	a necora neeper (II Applicable)	
Amy Jordan	Date: <b>01/30</b> /	2020	Amy Jordan	N Date: 01/30/2020

CFR BQSO.doc REV 08/2016: Authority granted under Act 388 of 1976, as amended \* = Required Field on Originals