

INDEPENDENT/POLITICAL

COMMITTEE COVER PAGE	FOR OFFICIA	AL 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: 06/01/08	то 197/20/08
1. Committee I.D. Number	4. Committee's Mailing Address	Ç.,
P-2002-010	118 S. Washington St.	
2. Committee Name	Ypsilanti, MI 48197	1 P 2
		Some Some
THE COMMITTEE FOR BETTER	Area Code and Phone (734) 482-9682	D G
GOVERNMENT	If the address in this box is different from the co Organization, mail may be sent to this address	mmittee mailing address on the Statement of by the filing official.
5. Treasurer's Name and Residential Address		-103
Steve Pierce		
118 S. Washington St.	•	
Ypsilanti, Mi 48197		
6. Treasurer's Business Address	Area Code and Phone 7. Designated Record Keeper's Name and Maili	A d d d d d d d d d d d d d d d d d d d
	Record Keeper)	ng Address (If the committee has a Designated
1013 San Mateo SE		
Albuquerque, NM 87108		
Area Code and Phone (505) 349-3470		Area Code and Phone
8. TYPE OF STATEMENT:		
		APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED
APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE LEVEL	APPLICABLE TO INDEPENDENT AND	ON ON
	POLITICAL COMMITTEES REGISTERED	STATE AND COUNTY LEVEL
88. TRIANNUAL STATEMENTS	ON COUNTY LEVEL	
Even Year Odd Year	8d. ANNUAL STATEMENT	89. AMENDMENT TO CAMPAIGN STATEMENT
Odd (EM	(Coverage Year)	(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
April 25 January 31	8e PRE-ELECTION OR	to indicate which Statement is being amended)
July 25 July 25		arriended)
October 25 October 25	8f. POST-ELECTION	8h. DISSOLUTION OF COMMITTEE
October 25	Pre-Election or Post-Election	
8b. <u>QUARTERLY STATEMENTS</u>	Statement relates to:	Effective Date of Dissolution
CAUCUS COMMITTEES (ONLY)	✓ PRIMARY GENERAL	
	CONVENTION SCHOOL	By checking this item, ItWe certify that the committee has no asset or outstanding
January 31 April 25	CONVENTION SCHOOL	debts, including late filing fees. Further, I
	SPECIAL CAUCUS	request that if the dissolution cannot be granted, that this be considered a request for
July 25 October 25	Date of Election, Convention or Caucus:	the Reporting Waiver.
SPECIAL ELECTION INDEPENDENT	08/05/08	Note: The disposition of residual funds must
EXPENDITURE REPORT		be reported on Schedule 2B and the Summary Page.
A committee that does not have a Reporting Waiver must file a Schedules. Direct contributions, in-kind contributions, loans, e of the information listed in items 2, 4, 5, 6 or 7 has changed sin the Statement of Organization should accompany this Campaig deadline of a required campaign statement, that campaign	xpenditures and outstanding debts count against to see the information was shown on the committee's gn Statement. If a request for a Reporting Walvi	Statements must include all applicable he \$1,000 Reporting Waiver threshold. If any Statement of Organization, an amendment to
9. Verification: I certify that all reasonable diligence was used it	n the preparation of this statement and attacked a	chartilize (if any) and to the back of any
knowledge and belief the contents are true, accurate and com	n the preparation of this statement and attached solete.	cnedules (if any) and to the best of my
0.	31	
Current Treasurer or Steve Pierce	THER VICE	© Date07/24/08
Designated Record Keeper Type or Print Name	Signature	
<u>-</u>		



1. Committee I.D. Number P-2002-010

SUMMARY PAGE
EPENDENT OR POLITICAL COMMITTEE

2. Committee Name THE COMMITTEE FOR BETTER GOVERNMENT

INDEPENDENT OR POLITICAL COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions a. Itemized Contributions		Culturative for Calendar Year
(Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a.) \$1,180.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$1,180.00	1,180.00
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$	(19.)\$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	· · · · · · · · · · · · · · · · · · ·	
(Add line 3c + Line 4) IN-KIND CONTRIBUTIONS	(5.) \$1,180.00	(20.)\$1,180.00
In-Kind Contributions a. Itemized (Schedule 2-lK, Column 7)	(6a.) \$	
b. Unitemized (less than \$20,01 each - no Schedule)	(6b.) \$NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b) EXPENDITURES	(7.) \$	(21.) \$
8. Expenditures a. Itemized Direct (Schedule 2B. Column 7)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 8-G, Column 6)	(8b.) s 0.00	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 28-2, Column 7)	(8c.) \$0.00	
d. Uniternized (less than \$50.01 each - no Schedule)	(8d.) \$ 9.65	
e. Subtotal of Expenditures	(8e) \$9.65	9.65
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$ 0.00	(23.) \$ 0.00
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ 9.65	(24.) \$ 9.65
IN-KIND EXPENDITURES 11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 28-2, Column 8) DEBTS AND OBLIGATIONS	(11.) \$	(25.) \$
12. Debts and Obligations a. Owed by the Committee (Schedule 2E)	(12a.)\$	
b. Owed to the Committee (Schedule 2E)	(126.) \$ 0.00	
BALANCE STATEMENT 13. Ending Selance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	
4. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + 1,180.00	
5. SUBTOTAL Add lines 13 and 14	(15.) = 1,180.00	
6. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) - 9.65	
7. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 1,171.35	<u> </u>



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS

SCHEDULE 2A	1. Committee I.D.	Number P-2002-010	•
INDEPENDENT OR POLITICAL COMMITTEE	2. Committee Nan		R BETTER GOVERNMENT
Please enter contributor's name and address. If contribution is from and middle initial. Check box to indicate if contribution is from a Politi Committee (Both are commonly called PACs).	an individual, enter last nan	ne first name 6 Amount	7.0000000000000000000000000000000000000
Contribution # 1 Is this contribution from a PAC7 YES 4. Date of Receipt Name & Address:	07/05/08		
Grace Sweeney		_{\$} 25	<u>\$ 25</u>
504 N River St			
Ypsilanti, MI 48198	•		
5. If over \$100.00 cumulative, please provide:		Click Here	for Merno Itemization Type
OccupationEmployer Business Address			
Type of Contribution: ✓ Direct Loan from a per	rson Fund Ra	uiser	
Contribution # 2 Is this contribution from a PAC? YES Address: 4. Date of Receipt			
Peter Murdock		<u>\$ 25 </u>	_{\$} 25
504 N River St		Click Here f	or Memo Itemization Type
Ypsilanti, MI 48198 5. If over \$100.00 cumulative, please provide:	•		or memo namización (pe
Occupation Employer			•
Business Address	· · · · -		
Type of Contribution:	rson 🗸 Fund	Raiser	
3. Contribution # 3	in mil.		
Is this contribution from a PAC? LIYES 4. Date of Receipt	07/08/08		
Name & Address:		_s 500	_s 500
Peter Fletcher		\$ <u>000</u>	_ \$500
25 S Huron St		Click Here fo	r Memo Itemization Type
Ypsilanti, MI 48197			
5. If over \$100.00 cumulative, please provide:			
Occupation Notary Public Employer Ypsilanti Cre	edit Brueau		
Business Address 25 S Huron St Ypsilanti, MI 48197			
Type of Contribution:	n Fund Rais	er	
3. Contribution # 4 Is this contribution from a PAC? YES 4. Date of Receipt 0	7/05/08		
Name & Address:		F0	56
Karen Maurer		_{\$} 50	_{\$} 50
35 S Summit Ypsilanti, MI 48197		Click Here fo	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:			
Committee			
OccupationEmployer			
Business Address Type of Contribution: Direct Loan from a person	on Fund Ra		
Type of Contambusin. He justices	Literare	Page Subtotal \$600.00)
	Grand Total of Ai	Schedules 2A	-
	(Complete on last page	ge of Schedule) Enter this lot	
		on line 3a of Summary Pa	



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMI	TTEE
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1. Committee I.D. Number P-2002-010

INDEPENDENT OR POLIT	ICAL COMMITTEE	2. Committee Name THE	COMMITTEE FOR E	BETTER GOVERNMENT
Please enter contributor's name and address and middle initial. Check box to indicate if a Committee (Both are commonly called PAC	contribution is from a Political Con	dual, enter last name, first nam nmittee or an Independent	e. 6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES	4. Date of Receipt 07/05/	08		1 Gale of fecelor
Name & Address:	4. Date of Receipt			
LTC Preston Plews			_{\$} 50	_{\$} 50
302 S Huron St				-
Ypsilanti, MI 48197				
5. If over \$100.00 cumulative, please pr	ovide:		Male Horn San	ht
Occupation	Employer		Click neie for	Memo Itemization Type
Business Address	Employer			
Type of Contribution:	Loan from a person	Fund Raiser		
Contribution #2 Is this contribution from a PAC? YE	07/05		. <u> </u>	
Name & Address:			_{\$} 15	_{\$} 15
Shamar Herron			\$ <u>13</u>	\$ <u>13</u>
104 S Huron St				
Ypsilanti, MI 48197			Click Here for I	Memo Itemization Type
5. if over \$100.00 cumulative, please pro-	vide:			
Occupation	Employer	·		
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3				
Is this contribution from a PAC?	4. Date of Receipt <u>07/04/</u>	08		
Name & Address:			40.50	
Barb Prater	•		_{\$} 12.50	_{\$} 12.50
8303 Warner Rd				
Saline, MI 48176			Click Here for N	lemo Itemization Type
5. If over \$100.00 cumulative, please prov	ide:			
Occupation	Employer			
Business Address		· · · · · · · · · · · · · · · · · · ·		
Type of Contribution: Virect	Loan from a person	✓ Fund Raiser		
3. Contribution #4 Is this contribution from a PAC? Name & Address:	4. Date of Receipt 07/04/08			
Wes Prater			_s 12.50	_s 12.50
8303 Warner Rd			·	<u> </u>
Saline, MI 48176			Click Here for M	iemo Itemization Type
6. If over \$190.00 cumulative, please pro	vide:			
Occupation	Employer		<u>.</u>	
Business Address —			,	
Type of Contribution:	Loan from a person	Fund Raiser		
THE OF COMMISSION IS TO TOWN	- Poladii	Page Subto	otal \$90.00	
		Grand Total of All Schedules	-	
	(C	omplete on last page of Schedu		_
			Enter this total on line 3a of Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

SCHEDULE ZA 1. Committee I.D. Nu

1. Committee I.D. Number P-2002-010

Calendar Versific Committee of an independent Committee or an independent Committee of Actions. Susan Rodoffs Susan Rod	and middle finals. Check box to indicate if contribution is from a Political Committee or an Independent Calendar Year for Contribution 3 Contribution 87 3 Contribution 87 3 Contribution 87 4 Date of Receipt 07/04/08 Name & Address: Susan Roeloffs 963 W Cross St Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution from a PAC? VES 4. Date of Receipt 07/04/08 Velerie Kabat SW Michigan Ave Ypsilanti, MI 48197 Employer Sushess Address Type of Contribution: Find over \$100.00 cumulative, please provide: Cocupation Employer Sushess Address Type of Contribution from a PAC? VES 4. Date of Receipt Type of Contribution from a PAC? VES 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemization Type Cick Here for Memo Itemization Type Sushess Address Type of Contribution from a PAC? VES 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemization Type Sushesses Address Find Winding Ave Cick Here for Memo Itemization Type Cick Here for Memo Itemization Ty	INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name TH	E COMMITTEE FOR I	BETTER GOVERNMEN
Is this contribution from a PAC?	Is this contribution from a PAC?	and middle initial. Check box to indicate it contribution is from a Political Committee or an independent Committee (Both are commonly called PACs).	ame, 6. Amount	Calendar Year for E. Contributor (Through
ACT (PSI) Anti, MI 46197 If over \$100,00 cumulative, please provide: Click Here for Memo hemization Type Supe of Contribution: Vest Loan from a person Vest Fund Raiser Vest V	963 W Cross St Ypsilanti, MI 46197 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Type Contribution #2	Is this contribution from a PAC? YES 4. Date of Receipt 07/04/08		t date of federally
Posilanti, MI 48197 Click Here for Memo Remitation Type Countribution #2 Click Here for Memo Remitation Type Contribution #2 Contribution from a PAC7 YES A. Dele of Receipt 07/04/08 Section	Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Type Cocupation	·	<u>\$</u> 40	s 40
Employer Since Stroke	Employer Susiness Address Type of Contribution: Direct			
Docupation Employer Employer Submess Address Type of Contribution: Direct Loan from a person Fund Raiser Submess Address Type of Contribution from a PAC? YES Submess Address Type of Contribution from a PAC? YES Submess Address Type of Contribution from a PAC? YES Submess Address Tope of Contribution from a PAC? YES Submess Address Tope of Contribution from a PAC? Type of Contribution from	Occupation		****	
Sustriess Address 3. Contribution:	Business Address Type of Contribution: Direct		Click Here for	Memo Remization Type
Type of Contribution: Planet Loan from a person Fund Raiser	Type of Contribution:		·	
3. Centribution # 2 arms & Address: arms & Address: arms & Address: bright YES 4. Date of Receipt 07/04/08 arms & Address: bright YES 4. Date of Receipt 07/04/08 bright YES 07/04/08 bright YES 07/04/08 bright YES 07/04/08 bright 07/0	3. Contribution #2 Is this contribution from a PAC?		_	
Coseph D. Lawrence \$60 \$60 Compiler of Section 1 Compiler of Memo (temization Type of Contribution) Compiler of Contribution Contribution Compiler of Contribution	## Second Process of Contribution: ## Contribu	Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 07/04/08		
Click Here for Memo Itemization Type To sell anti, MI 48197 Click Here for Memo Itemization Type Click He	Click Here for Memo (ternization Type Click Here for Memo) (ternization Type Click Here	Joseph D. Lawrence	_{\$} 60	_{\$} 60
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allerie Kabat 8 W Michigan Ave (psilanti, Mi 48197 If over \$100.00 cumulative, please provide: Contribution # 4	### 25 \$25 ### 25	Contribution #3		· · · · · · · · · · · · · · · · · · ·
alerie Kabat 8 W Michigan Ave psilanti, MI 48197 If over \$100.00 cumulative, please provide: ccupation Employer	## Section of the provided representation of the provided rep	this contribution from a PAC? YES 4. Date of Receipt 07/04/08		
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If over \$100.00 cumulative, please provide: ccupation	If over \$100.00 cumulative, please provide: ccupation	8 W Michigan Ave		
ccupationEmployer	Direct Loan from a person	/psilanti, MI 48197	Click Here for M	lemo Itemization Type
usiness Address //pe of Contribution:	ype of Contribution:	If over \$100.00 cumulative, please provide:		
usiness Address //pe of Contribution:	ype of Contribution:	occupation Employer		
Appendix Contribution: Direct Loan from a person Fund Raiser Contribution # 4 this contribution from a PAC? A Date of Receipt arne & Address: Like Kabat B W Michigan Ave psilanti, MI 48197 If over \$100.00 cumulative, please provide: Direct Employer Usiness Address Address Address Appendix Address Address Appendix Address	ype of Contribution: Direct Loan from a person Fund Raiser Contribution #4 this contribution from a PAC? VES 4. Date of Receipt Jame & Address: Alike Kabat 8 W Michigan Ave Spallanti, MI 48197 S. If over \$100.00 cumulative, please provide: Decupation Employer Business Address			
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this contribution from a PAC? TES 4. Date of Receipt arms & Address: Sike Kabat \$25 \$25	this contribution from a PAC?	4 1 d/lc 1/d/sc		
like Kabat 8 W Michigan Ave psilanti, MI 48197 If over \$100.00 cumulative, please provide: Cocupation	Alike Kabat 8 W Michigan Ave Spallanti, MI 48197 6. If over \$100.00 cumulative, please provide: Decupation Employer	this contribution from a PAC? 4. Date of Receipt		-
Click Here for Memo Iternization Type psilanti, MI 48197 If over \$100.00 cumulative, please provide: Cocupation	8 W Michigan Ave (psilanti, MI 48197) i. If over \$100.00 cumulative, please provide: Decupation Employer		_{\$} 25	_s 25
psilanti, MI 48197 If over \$100.00 cumulative, please provide: Complete on last page of Schedule) Complete on last page of Schedule) Complete on last page of Summary Page Complete on last page of	psilanti, MI 48197 i. If over \$100.00 cumulative, please provide: Docupation Employer			<u> </u>
Loan from a person Grand Total of Ali Schedules 2A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page	Decupation Employer	· · · · · · · · · · · · · · · · · · ·	Click Here for M	emo Iternization Type
usiness Address /pe of Contribution: Direct Loan from a person Fund Raiser Page Subtotal \$150.00 Grand Total of Ali Schedules 2A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page	Business Address —			
Vice of Contribution: Value of Contribution: Value Direct Loan from a person Value Fund Raiser		Decupation Employer	 -	•
Page Subtotal \$150.00 Grand Total of All Schedules 2A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page	Voe of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		-	
Grand Total of All Schedules 2A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page		ype of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
(Complete on last page of Schedule) Enter this total on line 3a of Summary Page	Page Subtotal \$150.00	Page Suf	btotal \$150.00	
Enter this total on line 3a of Summary Page				_
on line 3a of Summary Page		(Complete on last page of Sche	· · · · · · · · · · · · · · · · · · ·	
	3 6 Summary Page		Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

1. Committee I.D. Number P-2002-010

INDEPENDENT OR POLITI	CAL COMMITTEE 2.0	committee Name THE C	OMMITTEE FOR B	ETTER GOVERNMENT
Please enter contributor's name and address and middle initial. Check box to indicate if committee (Both are commonly called PACs	intribution is from a Political Committee	enter last name, first name ee or an Independent	6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES	4. Date of Receipt 07/04/08	<u>. </u>		
Name & Address:			, 27.50	27 EA
Tim Vetter			\$ <u>27.50</u>	_{\$} 27.50
305 S Washington St				
Ypsilanti, MI 48197 5. If over \$100.00 cumulative, please pro-	adala.			
			Click Here for I	Viemo Itemization Type
Occupation Business Address	Employer			
Type of Contribution: Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #2		W IT UND NAISE		
Is this contribution from a PAC? YES Name & Address:	4. Date of Receipt 07/04/08			
Debra Vetter			s 27.50	_{\$} 27.50
305 S Washington St				
Ypsilanti, MI 48197			Click Here for M	lemo Itemization Type
5. If over \$100.00 cumulative, please provi	de:			
Occupation	Employer			
Business Address	,			
Type of Contribution: 🗸 Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 3				
Is this contribution from a PAC?	4. Date of Receipt <u>07/04/08</u>			
Name & Address:			40	4.0
Adam Riccinto	•		<u> </u>	<u>\$ 10</u>
722 E Cross	•			
Ypsilanti, MI 48198			Click Here for Mi	emo Itemization Type
5. If over \$100.00 cumulative, please provid	le:			
OccupationE	mplayer			
Business Address				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution #4 Is this contribution from a PAC?	4. Date of Receipt 07/04/08			
Name & Address:			_{\$} 10	_s 10
Colleen Riccinto			<u> </u>	<u> </u>
722 E Cross Ypsilanti, MI 48198			Click Here for Me	emo Itemization Type
5. If over \$100.00 cumulative, please provi	ide:			
Occupation	Employer			
Type of Contribution: Direct	Loan from a person	✓ Fund Raiser		
1100 OF OBJETHANDIT. 14 TORROW		Page Subtoh	el \$65.00	
	Gr	and Total of All Schedules 2	V	-{
		ete on last page of Schedul		
			Enter this total on line 3a of	
			Summary Page	

√ Direct

is this contribution from a PAC?

Maxe Obeymeyer 703 Cambridge Ypsilanti, MI 48197



3. Contribution #3

Name & Address: Teri Obeymeyer 703 Cambridge Ypsilanti, MI 48197

Occupation

Business Address

3. Contribution # 4

Name & Address:

Occupation

Business Address

Type of Contribution:

MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 2A

Employer.

BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS	r	P-2002-010	
	Committee I.D. Number	2002-010	
	Committee Name THE	COMMITTEE FOR E	ETTER GOVERNMENT
Please enter contributor's name and address. If contribution is from an individual and middle initial. Check box to indicate if contribution is from a Political Committee (Both are commonly called PACs).	, enter last name, first nam lee or an Independent	6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 06/06/08 Name & Address:			date of receipt)
Steve Pierce		_s 100	_s 100
118 S Washington St Ypsilanti, MI 48197			
5. If over \$100.00 cumulative, please provide:		Click Hare for (Memo Itemization Type
OccupationEmployer		OHOR FIELDS	vielilo Reililzakon i ype
Business Address			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 06/06/08 Name & Address:			
Maggie Brandt		s 100	<u>\$ 100</u>
118 S Washington St Ypsilanti, MI 48197		Click Here for N	lemo Itemization Type
i. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
ype of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #3 Types 4. Date of Receipt 07/04/08			
lame & Address:		10	
Teri Obeymeyer 103 Cambridge		ş <u>10</u>	_{\$} 10
psilanti, MI 48197		Click Here for Me	emo Itemization Type
if over \$100.00 cumulative, please provide:			•
occupation Employer			
usiness Address			
ype of Contribution: V Direct Loan from a person	✓ Fund Raiser		
Contribution # 4 this contribution from a PAC? YES 4. Date of Receipt 07/04/08 Jame & Address:			
Maxe Obeymeyer		s_10	_{\$} 10
03 Cambridge		Chale Harris Co. 44	
psilanti, MI 48197		UROK Mere for Me	emo Iternization Type
5. If over \$100.00 cumulative, please provide:			

Loan from a person Fund Raiser Page Subtotal \$220.00 Grand Total of All Schedules 2A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS

P-2002-010

Summary Page

SCHEDULE 2	- *	1. Committee I.D. Numb	per	
INDEPENDENT OR POLIT				BETTER GOVERNMENT
Please enter contributor's name and addres and middle initial. Check box to indicate if of Committee (Both are commonly called PAC	contribution is from a Political C	dividual, enter last name, firs committee or an Independen	t name, 6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through
3. Contribution # 1 Is this contribution from a PAC? YES Name & Address:	4. Date of Receipt 07/0	04/08		date of receipt)
Leonardo Christian			_s 20	_s 20
526 W Michigan Ave			* <u></u>	-
Ypsilanti, MI 48197				
5. If over \$100.00 cumulative, please pre	ovide:	•	Click Here fo	r Memo Itemization Type
Occupation	Employer			
Business Address				
Type of Contribution: V Direct	Loan from a person	✓ Fund Raiser		
Contribution # 2 Is this contribution from a PAC? YES Name & Address:	S 4. Date of Receipt			
Deb Frederich			s 20	<u>\$ 20 </u>
747 Six Mile Road	•			•
Whitmore Lake, MI 48189			Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please prov	vide;			
Occupation	Employer			•
Business Address				
Type of Contribution:	Loan from a person	✓ Fund Raise	<u></u>	
3. Contribution # 3 Is this contribution from a PAC?	4. Date of Receipt			
Name & Address:			4	4
Ray Williams			s 15	_ <u>\$</u> 15
514 Jefferson St				
Ypsilanti, Mi 48197			Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please provi	ide:			
OccupationI	Employer		_	
Business Address			_	
Type of Contribution: Direct	Loan from a person	Fund Raiser	<u> </u>	
3. Contribution # 4 Is this contribution from a PAC? Name & Address:	4. Date of Receipt			
			. \$	<u> </u>
			Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please pro	vide:			
Occupation	_ Employer	· · · · · · · · · · · · · · · · · · ·		
Business Address —	··· []			
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page	Subtotal \$55.00	_}
		Grand Total of All Sche (Complete on last page of S		0
			Enter this total on line 3a of	

Page 6 of 6



FUND RAISER SCHEDULE 2F INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number P-2002-010

2. Committee Name _____THE COMMITTEE FOR BETTER GOVERNMENT

	- USE A SEPARATE SH	EET FOR EACH EVENT	•
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is	5. Type of Fund Raising Activ	vity 8. Address and Name (If any) of the place where the activity was held
07/04/08	greater) 150	Open Hou	118 S Washington St Ypsilanti, MI 48197
·			Private Residence
7. Total Contributions	\$335.	00	
8. Other Receipts	\$0.0	0	
9. Gross Receipts (Add lines 7 and	8) \$335.	00	
10. Total Cost of Event	\$0.00		Includes In-Kind Contributions and All Expenditures Made For the Event
11. Check if event was a joint f	und raiser and complete the following	ng:	
Co-Sponsor(s)	Contribution 5 (%)	Split	Expenditure Split (%)
		<u>. </u>	
			· water and the same and the sa
			
· 			
			

- 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 Direct Contributions Schedule
 (2A), Itemized In-Kind Contributions Schedule (2-IK), Itemized Expenditures Schedule (2B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page	1	of	1	