

ORIGINAL OR AMENDED STATEMENT OF ORGANIZATION FORM FOR BALLOT QUESTION COMMITTEES

1. Committee ID#: 8-2012-009	Name and Address of Depositories or Intended Depositories of committee funds.
2. Type of Filing:	a. Official Depository
Original #10 alo. La	20
Amendment to Items: 4/0 Eff. Date: 9/26/12	WASH 7012 70117
3. Date Committee was Formed:	7 OC HIE
4. Full Name of Committee:	b. Secondary Depository
5. Acronym or Abbreviation (if any):	
6. Complete Committee Mailing Address (May be PO Box):	12. Complete if Committee is being registered to support or oppose a specific ballot proposal: Support or Oppose
	Description/bulibrary Bond of Basmillion
	If not a statewide proposal, list the county, city, township, village or school
7.Complete Committee. Street Address (May not be PO Box):	district involved. If multi-county, list the county where the greatest number of voters eligible to vote on the proposal reside: Statewide
	County:
	Multi County:
Committee Phone #:	Local:
Committee Fax #:	13. ELECTRONIC FILING: This item applies to committees that file with
Committee E-mail Address:	the Michigan Department of State Bureau of Elections only and does not apply to Ballot Question Committees that file with the County Clerk's
Committee Website Address:	office.
8. Treasurer Name and Complete Address:	The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.
	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
	** OR **
Phone #:	Committee did not spend or receive or does not expect to spend or
E-mail Address:	receive in excess of \$20,000 and would like to file electronically voluntarily.
9. Designated Record Keeper Name and Complete Address:	14. 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 of my/our knowledge or belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that
	verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the
	preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best
	of my/our knowledge or belief. (Sign Name and Date below)
Phone #:	Latherine Masurdd 9/26/12 Current Treasurer (Date)
E-mail Address:	Current Treasurer (Date)
40 DEPORTING WAIVER REQUIEST. If the committee door and overall	
10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box;	
the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.	Designated Record Keeper (Date) (Required only if filing electronically)
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