



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B2012009

2. Committee Name Protect Our Libraries FILED
WASHTENAW COUNTY, MI

3. Name and Address from whom received <small>If contribution is from an individual, please enter last name first.</small>	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: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr</u> <u>Ann Arbor, MI 48105</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation <u>retired</u> Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input checked="" type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Advertisement</u>	\$ <u>15.00</u>	\$ <u>7,407.35</u>
<input type="checkbox"/> Fund Raiser	5. DATE OF RECEIPT: <u>10-12-12</u> <small>Click Here for Memo Itemization</small> 6. VENDOR NAME & ADDRESS: <u>Booth Newspaper</u> <u>Liberty St.</u> <u>Ann Arbor, MI 48104</u>		
Contribution #2 Name & Address: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr.</u> <u>Ann Arbor, MI 48105</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation <u>retired</u> Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input checked="" type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>toner, labels, envelopes</u>	\$ <u>314.83</u>	\$ <u>7,722.18</u>
<input type="checkbox"/> Fund Raiser	5. DATE OF RECEIPT: <u>10-13-12</u> <small>Click Here for Memo Itemization</small> 6. VENDOR NAME & ADDRESS: <u>Staples</u> <u>2601 W. Jackson</u> <u>Ann Arbor, MI 48103</u>		
Contribution #3 Name & Address: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr</u> <u>Ann Arbor, MI 48105</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation <u>retired</u> Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Food</u>	\$ <u>49</u>	\$ <u>7,771.18</u>
<input checked="" type="checkbox"/> Fund Raiser	5. DATE OF RECEIPT: <u>10-20-12</u> <small>Click Here for Memo Itemization</small> 6. VENDOR NAME & ADDRESS:		

Page Subtotal

378.83

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

7,771.18

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number B2012009
2. Committee Name Protect Our Libraries

3. 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: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer Name & Address: <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input checked="" type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>yard signs</u> 5. DATE OF RECEIPT: <u>9/18/12</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>Sawiki & Sons</u> <u>1521 W. Lafayette</u> <u>Detroit, MI 48216</u>	\$ <u>1,489.30</u>	\$ <u>1,489.30</u>
Contribution #2 Name & Address: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer Name & Address: <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input checked="" type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>postcards & printing</u> 5. DATE OF RECEIPT: <u>10-1-12</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>Kolosso Printing</u> <u>2055 W. Stadium</u> <u>Ann Arbor, MI 48103</u>	\$ <u>4271.05</u>	\$ <u>5,760.35</u>
Contribution #3 Name & Address: <u>Kathy Griswold</u> <u>3565 Fox Hunt Dr</u> <u>Ann Arbor, MI 48105</u> If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer Name & Address: <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input checked="" type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Stamp</u> 5. DATE OF RECEIPT: <u>10-2-12</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>USPS</u> <u>Green Rd</u> <u>Ann Arbor, MI 48105</u>	\$ <u>1632.00</u>	\$ <u>7,392.35</u>

Page Subtotal

7392.35

Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

Enter this total on
line 6a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

B-2012-009

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number Protect Our Libraries

2. Committee Name _____

	Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>700.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>700.00</u>	(18.) \$ <u>700.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>700.00</u>	(20.) \$ <u>700.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>7771.18</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>7771.18</u>	(21.) \$ <u>7771.18</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ _____	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ _____	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ _____	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ _____	
e. Subtotal of Expenditures	(8e.) \$ _____	(22.) \$ _____
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>∅</u>	(24.) \$ <u>∅</u>
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>∅</u>	(25.) \$ <u>∅</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>∅</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>700.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>700.00</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>∅</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>700.00</u>	*

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