



**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL 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: October 11, 2010 To October 21, 2010

1. Committee I.D. Number
P-2010-008

4. Committee's Mailing Address
516 West Cross
Ypsilanti, MI 48197
Area Code and Phone 734 368-4706
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

2. Committee Name
Stop Taxation on Property

5. Treasurer's Name and Residential Address
Bob Barnes
3637 Briarlee way
Ann Arbor, MI 48103

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)
Karen Maurer
35 South Summit
Ypsilanti, MI 48197
Area Code and Phone 734 260-5968

6. Treasurer's Business Address
516 West Cross
Ypsilanti, MI 48197
Area Code and Phone

8. TYPE OF STATEMENT:
APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE LEVEL

8a. TRIANNUAL STATEMENTS

Even Year	Odd Year
<input type="checkbox"/> April 25	<input type="checkbox"/> January 31
<input type="checkbox"/> July 25	<input type="checkbox"/> July 25
<input checked="" type="checkbox"/> October 25	<input type="checkbox"/> October 25

8b. QUARTERLY STATEMENTS
CAUCUS COMMITTEES (ONLY)

<input type="checkbox"/> January 31	<input type="checkbox"/> April 25
<input type="checkbox"/> July 25	<input type="checkbox"/> October 25

8c. SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT

8d. ANNUAL STATEMENT
(_____ Coverage Year)

8e. PRE-ELECTION OR

8f. POST-ELECTION

Pre-Election or Post-Election Statement relates to:

<input type="checkbox"/> PRIMARY	<input checked="" type="checkbox"/> GENERAL
<input type="checkbox"/> CONVENTION	<input type="checkbox"/> SCHOOL
<input type="checkbox"/> SPECIAL	<input type="checkbox"/> CAUCUS

Date of Election, Convention or Caucus:
November 2, 2010

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE AND COUNTY LEVEL

8g. AMENDMENT TO CAMPAIGN STATEMENT
(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h to indicate which Statement is being amended)

8h. DISSOLUTION OF COMMITTEE

Effective Date of Dissolution _____

By checking this item, I/We certify that the committee has no asset or outstanding debts, including late filing fees. Further, I request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 2B and the Summary Page.

FILED
 WASHINGTON COUNTY, MI
 2010 OCT 22
 11:38
 AMENDMENT REGISTER
 JENNIFER BAUM
 COUNTY CLERK

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6 or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.**

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record Keeper Karen Maurer Type or Print Name
Signature [Signature]
Date 10-21-10



1. Committee I.D. Number P-2010-008
 2. Committee Name Stop Taxation on Property

**SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8)	(3a.) \$ <u>1010⁰⁰</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1010</u>	(18.) \$ _____
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$ <u>1010</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized (Schedule 2-IK, Column 7)	(6a.) \$ <u>685.68</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>685.68</u>	(21.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized Direct (Schedule 2B, Column 7)	(8a.) \$ <u>940.80</u>	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) \$ _____	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) \$ _____	
d. Unitemized (less than \$50.01 each - no Schedule)	(8d.) \$ _____	
e. Subtotal of Expenditures	(8e.) \$ _____	(22.) \$ _____
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>940.80</u>	(24.) \$ _____
IN-KIND EXPENDITURES		
11. In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) \$ _____	(25.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 2E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 2E)	(12b.) \$ <u>616.48</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + <u>1010</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>1010</u>	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) - <u>940.80</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>69.20</u>	*

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



**ITEMIZED CONTRIBUTIONS
SCHEDULE 2A
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number P-2010-008
2. Committee Name State Taxation on Property

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

3. Contribution # 1
Is this contribution from a PAC? YES
Name & Address: Michael Eller
311 Westcross
Ypsilanti, MI 48197
4. Date of Receipt 7-23-10
6. Amount \$ 100⁰⁰
7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2
Is this contribution from a PAC? YES
Name & Address: Karen Maurer
35 South Summit
Ypsilanti, MI 48197
4. Date of Receipt 9-23-10
6. Amount \$ 100⁰⁰
7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Is this contribution from a PAC? YES
Name & Address: Maxe Obermayer
703 Cambridge St.
Ypsilanti, MI 48197
4. Date of Receipt 9-30-10
6. Amount \$ 50⁰⁰
7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Is this contribution from a PAC? YES
Name & Address: Andrew Gillman
909 Woods
Ypsilanti, MI 48197
4. Date of Receipt _____
6. Amount \$ 100⁰⁰
7. Cumulative for Calendar Year for Each Contributor (Through date of receipt) \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 350⁰⁰
Grand Total of All Schedules 2A (Complete on last page of Schedule) _____
Enter this total on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number

P-2010-008

2. Committee Name

Stop Taxation on Property

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

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 10-11-10

Name & Address:

Joyce Lyke
460 Osband St.
Ypsilanti, MI 48198

\$ 50⁰⁰

\$ _____

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization Type

Occupation _____ Employer _____

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 10-20-10

Name & Address:

Karen Maurer
35 South Summit
Ypsilanti, MI 48197

\$ 300⁰⁰

\$ _____

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization Type

Occupation Real Estate Developer Employer Maurer Management

Business Address 35 South Summit Ypsilanti, MI 48197

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? YES

4. Date of Receipt 10-20-10

Name & Address:

Phil Panzica
~~1000~~ 517 Washtenaw Ave
Ypsilanti, MI 48197

\$ 150⁰⁰

\$ _____

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization Type

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? YES

4. Date of Receipt 10-20-10

Name & Address:

Scott Sobry
20 E. Cross Street
Ypsilanti, MI 48198

\$ 50⁰⁰

\$ _____

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization Type

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal

550⁰⁰

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
ITEMIZED CONTRIBUTIONS

P-2010-008

SCHEDULE 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

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 10-20-10
Name & Address:

David Curtis
200 West Michigan
Ypsilanti, MI 48197

\$ 50⁰⁰ \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

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 10-21-10
Name & Address:

Karen Maurer
35 South Summit
Ypsilanti, MI 48197

\$ 60⁰⁰ \$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Real Estate Developer Employer Maurer Management

Business Address 35 South Summit Ypsilanti, MI 48197

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3
Is this contribution from a PAC? YES 4. Date of Receipt _____
Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4
Is this contribution from a PAC? YES 4. Date of Receipt _____
Name & Address:

\$ _____ \$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 110⁰⁰

Grand Total of All Schedules 2A
(Complete on last page of Schedule) 1010⁰⁰

Enter this total
on line 3a of
Summary Page



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 2-IK**

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I. D. Number P-2010-008
2. Committee Name Stop Taxation on Property

3. Name and Address from whom received <small>If contribution is from an individual, enter last name first. Check box to indicate if contribution is from another Political Committee or Independent Committee (Both are commonly called PACs).</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 Calendar Year (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>Karen Maurer</u> <u>35 South Summit</u> <u>Ypsilanti, MI 48197</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation: <u>Real Estate Developer</u> Employer Name & Address: <u>Maurer Management</u> <u>35 South Summit</u> <u>Ypsilanti, MI 48197</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or guarantee of bank loan <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 Printed</u> 5. DATE OF RECEIPT: <u>10-12-10</u> 6. VENDOR NAME & ADDRESS: <u>Overnight Prints.com</u>	\$ <u>153.99</u>	\$ _____ Click Here for Memo Itemization Type
Contribution # 2 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>Bob Barnes</u> <u>3637 Briarlee way</u> <u>Ann Arbor, MI 48103</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or guarantee of bank loan <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>Yard Signs</u> 5. DATE OF RECEIPT: <u>10-11-10</u> 6. VENDOR NAME & ADDRESS: <u>Signsonthecheap.com</u>	\$ <u>383.69</u>	\$ _____ Click Here for Memo Itemization Type
Contribution # 3 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>Bob Barnes</u> <u>3637 Briarlee way</u> <u>Ann Arbor, MI 48103</u> <small>If over \$100.00 cumulative, please provide:</small> Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or guarantee of bank loan <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>Yard Signs</u> 5. DATE OF RECEIPT: <u>10-20-10</u> 6. VENDOR NAME & ADDRESS: <u>Signsonthecheap.com</u>	\$ <u>148.00</u>	\$ _____ Click Here for Memo Itemization Type

Page Subtotal 685.68

Grand Total of all Schedules 2-IK
(Complete on last page of Schedule) 685.68

Enter this total
on line 6a of
Summary Page



**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number P-2010-008
2. Committee Name Stop Taxation on Property

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7 Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: <u>United States Post office</u> 4. Purpose: <u>Stamps 28¢ x 3360</u> <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>10-22-10</u> Date	<u>\$ 940.80</u> \$ _____	Click Here for Memo Itemization Type
Expenditure #2 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____ \$ _____	Click Here for Memo Itemization Type
Expenditure #3 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____ \$ _____	Click Here for Memo Itemization Type
Expenditure #4 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____ \$ _____	Click Here for Memo Itemization Type

Subtotal this page 940.80
 Grand Total of all Schedules 2B
 (Complete on last page of Schedule) 940.80
 Enter this total on line 8a of the Summary Page