



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
16 FEB 25 PM 1:44
CARHELLA SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

**BALLOT QUESTION 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

1 Committee ID Number 67113-50		3 This Statement covers From _____ To _____	
2 Committee Name L'Anse Creuse Citizens Committee		4 Committee's Mailing Address Area Code and Phone _____ 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.	
5 Treasurer's Name and Residential Address Susan Silich 39363 West Archer Harrison Township, MI 48045 Area Code and Phone (586) 307-8967			
6 Treasurer's Business Address N/A Area Code and Phone _____		7 Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Kelly Allen 2163 Highsplint Drive Rochester Hills, MI 48307 Area Code and Phone (586) 321-9798	
8. TYPE OF STATEMENT 8a ☒ PRE-ELECTION OR ☐ POST-ELECTION Pre-Election or Post-Election Statement relates to: ☐ PRIMARY ☐ GENERAL ☒ SCHOOL ☐ SPECIAL ☐ OTHER _____ Date of Election: March 8, 2016		8b ☐ FEBRUARY STATEMENT ☐ APRIL STATEMENT ☐ JULY STATEMENT ☐ OCTOBER STATEMENT 8c ☐ ANNUAL STATEMENT (____ Coverage Year)	8d ☐ Post-Petition Sample Filing under MCL 168-463a (Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition) 8e ☐ AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c, 8d, or 8f to indicate which Statement is being amended)
8f ☐ DISSOLUTION OF COMMITTEE REQUEST Effective Date of Dissolution _____ By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.			
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 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 Susan Silich Type or Print Name		Susan Silich Signature	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

	Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a) \$ 5,538.74	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b) \$ NOT APPLICABLE	
c. Subtotal of Contributions	(3c) \$ 5,538.74	(18) \$ _____
4. Other Receipts (Schedule 4A-1, Column 6)	(4) \$ 1.27	(19) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5) \$ 5,540.01	(20) \$ _____
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a) \$ 0.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b) \$ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7) \$ 0.00	(21) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a) \$ 2,785.93	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b) \$ 0.00	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c) \$ 0.00	
d. Unitemized Expenditures (\$50.00 or less - no Schedule)	(8d) \$ 0.00	
e. Subtotal of Expenditures	(8e) \$ 2,785.93	(22) \$ _____
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9) \$ 0.00	(23) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10) \$ 2,785.93	(24) \$ _____
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11) \$ 0.00	(25) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a) \$ 0.00	
b. Owed to the Committee (Schedule 4E)	(12b) \$ 0.00	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed)	(13) \$ 933.54	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14) \$ \$5,540.01	
15. SUBTOTAL Add lines 13 and 14	(15) \$ \$6,473.55	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16) \$ \$2,785.93	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17) \$ 3,687.62	

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Johnston, Jacqueline A. 5049 Wavewood Commerce Township, MI 48382		4. Date of Receipt 11/9/15 \$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Gauthier, Rochelle M 52477 Silent Ridge Drive Chesterfield, MI 48051		4. Date of Receipt 11/9/15 \$ 100.00	\$ 200.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Vigneron, Kimberly Smith 1401 Oakland Saint Clair Shores, MI 48079		4. Date of Receipt 11/9/15 \$ 100.00	\$ 300.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Montpas, Lisa E. 21507 Chadbury Court Macomb, MI 48044-1860		4. Date of Receipt 11/9/15 \$ 100.00	\$ 400.00
5. If over \$100.00 cumulative, please provide: Occupation Asst. Superintendent Employer L'Anse Creuse Public Schools Business Address 24076 F.V. Pankow Blvd, Clinton Township, MI 48036 Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$400.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Polega, Beverly A. 15041 Heather Pointe Drive Sterling Heights, MI 48313-2846		4. Date of Receipt <u>11/10/15</u> \$ <u>50.00</u>	\$ <u>450.00</u> Click Here for Memo Itemization
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 Name & Address: Lenhardt, Robert J. 35649 Seville Street Clinton Township, MI 48035		4. Date of Receipt <u>11/12/15</u> \$ <u>100.00</u>	\$ <u>550.00</u> Click Here for Memo Itemization
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 Name & Address: Allen, Kelly 2163 Highsplint Drive Rochester Hills, MI 48307		4. Date of Receipt <u>11/30/15</u> \$ <u>50.00</u>	\$ <u>600.00</u> Click Here for Memo Itemization
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 Name & Address: Hart, Ann L. 38120 Willowmere Street Harrison Township, MI 48045-5327		4. Date of Receipt <u>11/30/15</u> \$ <u>100.00</u>	\$ <u>700.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

\$300.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Aull, Heidi 24445 Kolleen Lane Clinton Township, MI 48035		4. Date of Receipt 12/11/15 \$ 91.80	\$ 791.80
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Fritts, Patricia 37517 Grindstone Trail Lenox, MI 48048		4. Date of Receipt 12/12/15 \$ 8.91	\$ 800.71
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Kibler, Barbara 7583 Streamwood Drive Ypsilanti, MI 48197		4. Date of Receipt 1/2/16 \$ 18.12	\$ 818.83
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Montpas, Lisa 21507 Cadbury Court Macomb, MI 48044		4. Date of Receipt 1/4/16 \$ 68.78	\$ 887.61
5. If over \$100.00 cumulative, please provide: Occupation Asst. Superintendent Employer L'Anse Creuse Public Schools 24076 F.V. Pankow Blvd, Clinton Township, MI 48036 Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$187.61

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address Van Camp, Michael 23627 Fenton Clinton Township, MI 48036		4. Date of Receipt 1/5/16 \$ 91.80	\$ 979.41 Click Here for Memo Itemization
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 Name & Address Domestic, Matt 49534 Lehr Drive Macomb, MI 48044		4. Date of Receipt 1/5/16 \$ 137.85	\$ 1,117.26 Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Sales Director Employer Cambridge Consulting Group 101 West Big Beaver Road - Suite 600, Troy, MI 48084 Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 Name & Address Edoff, Erik 1605 Muer Troy, MI 48084		4. Date of Receipt 1/5/16 \$ 91.80	\$ 1,209.06 Click Here for Memo Itemization
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 Name & Address Sarnecky, Joseph 24799 Briar Bay Drive Macomb, MI 48042		4. Date of Receipt 1/5/16 \$ 137.85	\$ 1,346.91 Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Regional Vice Pres. Employer AXA Advisors 201 West Big Beaver Road - Suite 300, Troy, MI 48084 Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

\$459.30

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I D Number 67113-50

2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	4. Date of Receipt 1/6/16		
Name & Address: Czapski, Stephen 23630 Cottrell Clinton Township, MI 48035		\$ 45.75	\$ 1,392.66
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2	4. Date of Receipt 1/6/16		
Name & Address: Haas, John 521 University Grosse Pointe, MI 48230		\$ 45.75	\$ 1,438.41
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	4. Date of Receipt 1/6/16		
Name & Address: Sabelhaus, Dean 24725 Armada Center Road Armada, MI 48005		\$ 45.75	\$ 1,484.16
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	4. Date of Receipt 1/6/16		
Name & Address: Davis, Nina 48827 Rattle Run Drive Macomb, MI 48044		\$ 18.12	\$ 1,502.28
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal: \$155.37

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Glynn, Andrea 760 North Oxford Grosse Pointe Woods, MI 48236		4. Date of Receipt 1/6/16 \$ 45.75	\$ 1,548.03
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Szczepanski, Angela 46718 Edgewater Drive Macomb, MI 48044		4. Date of Receipt 1/6/16 \$ 22.73	\$ 1,570.76
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Horgan, Amy 32824 Kathleen Drive Chesterfield, MI 48047		4. Date of Receipt 1/6/16 \$ 22.73	\$ 1,593.49
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: May, Chris 53651 Sophia Drive Shelby Township, MI 48316		4. Date of Receipt 1/6/16 \$ 22.73	\$ 1,616.22
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$113.94

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee ID Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6 Amount	7 Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Hoover, Kenneth 38620 Pineridge Harrison Township, MI 48045		4 Date of Receipt <u>1/6/16</u> \$ 50.00	\$ 1,666.22 Click Here for Memo Itemization
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 Name & Address: Hubler, Donald 23959 Deanhurse Clinton Township, MI 48035		4 Date of Receipt <u>1/6/16</u> \$ 50.00	\$ 1,716.22 Click Here for Memo Itemization
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 Name & Address: DeAngelis, Emma 27530 Bertrand Street Chesterfield, MI 48051		4 Date of Receipt <u>1/6/16</u> \$ 50.00	\$ 1,766.22 Click Here for Memo Itemization
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 Name & Address: Sorrentos Pizza 14 Market Street Mt. Clemens, MI 48043		4 Date of Receipt <u>1/6/16</u> \$ 50.00	\$ 1816.22 Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

\$200.00

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	4. Date of Receipt <u>1/6/16</u>		
Name & Address: Marco's Pizza 28207 Kingsberry Street Chesterfield, MI 48047		\$ <u>133.00</u>	\$ <u>1,949.22</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Lend Ventures LLC DBA Marcos</u> Business Address <u>28207 Kingsberry Street, Chesterfield, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2	4. Date of Receipt <u>1/7/16</u>		
Name & Address: Moss, Thomas Jr. 18220 West 11 Mile Road Lathrup Village, MI 48076		\$ <u>22.73</u>	\$ <u>1,971.95</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	4. Date of Receipt <u>1/7/16</u>		
Name & Address: Supanich, John 14172 Larkspur Drive Shelby Township, MI 48315		\$ <u>91.80</u>	\$ <u>2,063.75</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	4. Date of Receipt <u>1/7/16</u>		
Name & Address: McLatcher, Linda 25202 Anchorage Harrison Township, MI 48045		\$ <u>45.75</u>	\$ <u>2,109.50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$293.28

Grand Total of All Schedules 4A
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Williams, Rob 4815 Norway Drive Sterling Heights, MI 48314	4. Date of Receipt <u>1/11/16</u>	\$ <u>22.73</u>	\$ <u>2,132.23</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Lasala, Paul 21236 Briar Rose Drive Macomb, MI 48044	4. Date of Receipt <u>1/11/16</u>	\$ <u>22.73</u>	\$ <u>2,154.96</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Sorgeloos, Paula 28371 Gamble Chesterfield, MI 48047	4. Date of Receipt <u>1/13/16</u>	\$ <u>8.91</u>	\$ <u>2,163.87</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Dixon, Carl 39504 Detroit Street Harrison Township, MI 48045	4. Date of Receipt <u>1/28/16</u>	\$ <u>920.70</u>	\$ <u>3084.57</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Substitute Teacher</u> Employer <u>Edustaff</u> Business Address <u>24076 F. V. Pankow Blvd, Clinton Township, MI 48036</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$975.07

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Dixon, Charlton 39504 Detroit Street Harrison Township, MI 48045		4. Date of Receipt <u>1/28/16</u> \$ <u>920.70</u>	\$ <u>\$4007.27</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Law Student Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 2 Name & Address: Christman, Erica 1977 Harvard Road Berkley, MI 48072		4. Date of Receipt <u>2/1/16</u> \$ <u>18.12</u>	\$ <u>4,023.39</u> Click Here for Memo Itemization
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 Name & Address: Dixon, Greg 8970 Inverness Washington Township, MI 48095		4. Date of Receipt <u>2/5/16</u> \$ <u>460.20</u>	\$ <u>4,483.59</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: LCHSNorthPrincipal L'Anse Creuse Public Schools Occupation _____ Employer _____ 23700 21 Mile Road, Macomb, MI 48042 Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: Larson, Floyd 36170 Lincoln New Baltimore, MI 48047		4. Date of Receipt <u>2/9/16</u> \$ <u>\$45.75</u>	\$ <u>4,529.34</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal:

\$1,444.77

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name middle initial		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Carolyn, Kirk 25880 Ivanhoe Road Huntington Woods, MI 48070-1608	4. Date of Receipt <u>2/9/16</u>	\$ 45.75	\$ 4,575.09
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Nelson, Karen 53100 West Ridge Chesterfield, MI 48051	4. Date of Receipt <u>2/9/16</u>	\$ 22.73	\$ 4,597.82
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Fahning, Brian 66501 Powell Road Washington, MI 48095-2118	4. Date of Receipt <u>2/10/16</u>	\$ 22.73	\$ 4,620.55
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: L'Anse Creuse Foundation 24076 F.V. Pankow Boulevard Clinton Township, MI 48042	4. Date of Receipt <u>2/10/16</u>	\$ 800.00	\$ 5,420.55
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal:

\$891.21

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens Committee

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Paton, Carol L. 22537 Hall Road Macomb, MI 48042-5219		4. Date of Receipt <u>2/10/16</u> \$ <u>25.00</u>	\$ <u>5,445.55</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Schuster, Carole R. 25662 Maritime Circle N #117 Harrison Township, MI 48045		4. Date of Receipt <u>2/10/16</u> \$ <u>25.00</u>	\$ <u>5,470.55</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Trebilcock, Susan 7886 Long Island Court Fair Haven, MI 48023		4. Date of Receipt <u>2/16/16</u> \$ <u>22.73</u>	\$ <u>5,493.28</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Sacquety, Rich 21023 Thiele St. Clair Shores, MI 48081		4. Date of Receipt <u>2/16/16</u> \$ <u>22.73</u>	\$ <u>5,516.01</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$95.46

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Davis, Nina 48827 Rattle Run Drive Macomb, MI 48044	4. Date of Receipt 2/16/16	\$ 22.73	\$ 5,538.74
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address:	4. 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		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address:	4. 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		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address:	4. 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		Click Here for Memo Itemization	

Page Subtotal:

\$22.73

Grand Total of All Schedules 4A
(Complete on last page of Schedule)

\$5,538.74

Enter this total
on line 3a of
Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED OTHER RECEIPTS
SCHEDULE 4A-1
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number **67113-50**
2. Committee Name **L'Anse Creuse Citizens Committee**

3. Name & Address From Whom Received Receipt	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address Michigan Schools & Government Credit Union 45120 Market Place Boulevard Chesterfield Township, MI 48051	Date of Receipt 3/31/15	☐ Loan from a Lending Institution ☒ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$ 0.31
Receipt #2 Name & Address Michigan Schools & Government Credit Union 45120 Market Place Boulevard Chesterfield Township, MI 48051	Date of Receipt 6/30/15	☐ Loan from a Lending Institution ☒ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$ 0.32
Receipt #3 Name & Address Michigan Schools & Government Credit Union 45120 Market Place Boulevard Chesterfield Township, MI 48051	Date of Receipt 9/30/15	☐ Loan from a Lending Institution ☒ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$ 0.32
Receipt #4 Name & Address Michigan Schools & Government Credit Union 45120 Market Place Boulevard Chesterfield Township, MI 48051	Date of Receipt 12/31/15	☐ Loan from a Lending Institution ☒ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$ 0.32
Receipt #5 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$
Receipt #6 Name & Address	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest Click Here for Memo Itemization Type ☐ Refund/Rebate ☐ Other (Specify) _____ ☐ Fund Raiser	\$
Page Subtotal			\$1.27
Grand Total of All Schedules 4A-1 (Complete on last page of Schedule)			\$1.27

Enter this total on
line 4 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

67113-50

1 Committee I.D. Number

BALLOT QUESTION COMMITTEE

2 Committee Name L'Anse Creuse Citizens Committee

3. Name and address of person to whom paid	4. State purpose of expenditure 5. Identify the ballot proposal involved Indicate whether supported or opposed	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1				
Name & Address: FedEx Office 133 South Main Street Rochester, MI 48037-2032	4. Purpose Postcards	1/5/16	\$ 101.56	\$ 101.56
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	5. Ballot Proposal Renewal Non-Homestead A	Date of Expenditure		
☐ Fund Raiser	County: Macomb	Click for Memo Itemization Type		
	☐ Support ☐ Oppose ☐ Statewide ☒ Local			
Expenditure # 2				
Name & Address: Mount Clemens Post Office 155 South Main Street Mount Clemens, MI 48046	4. Purpose Postage	1/6/16	\$ 1,085.00	\$ 1,186.5
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	5. Ballot Proposal Renewal Non-Homestead A	Date of Expenditure		
☐ Fund Raiser	County: Macomb	Click for Memo Itemization Type		
	☐ Support ☐ Oppose ☐ Statewide ☒ Local			
Expenditure # 3				
Name & Address: Mount Clemens Post Office 155 South Main Street Mount Clemens, MI 48046	4. Purpose Postage	1/19/16	\$ 1,050.00	\$ 2,236.5
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	5. Ballot Proposal Renewal Non-Homestead A	Date of Expenditure		
☐ Fund Raiser	County: Macomb	Click for Memo Itemization Type		
	☐ Support ☐ Oppose ☐ Statewide ☒ Local			
Expenditure # 4				
Name & Address: Printing By Johnson 1430 South Gratiot Avenue Mount Clemens, MI 48043	4. Purpose Postcard Printing	1/22/16	\$ 369.00	\$ 2,605.5
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	5. Ballot Proposal Renewal Non-Homestead A	Date of Expenditure		
☐ Fund Raiser	County: Macomb	Click for Memo Itemization Type		
	☐ Support ☐ Oppose ☐ Statewide ☒ Local			

Subtotal this page \$2,605.56

Grand Total of Schedules 4B
(Complete on last page of Schedule)



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

67113-50

1. Committee I. D. Number

2. Committee Name L'Anse Creuse Citizens Committee

3. Name and address of person to whom paid	4. State purpose of expenditure 5. Identify the ballot proposal involved Indicate whether supported or opposed	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address Allen, Kelly 2163 Highsplint Drive Rochester Hills, MI 48037	4. Purpose Address Labels / Copies 5. Ballot Proposal Renewal Non-Homestead M	1/27/16	\$ 53.97	\$ 2,659.5
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: Macomb ☐ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address All American Screen Printing Inc 42496 Mound Road Sterling Heights MI 48314	4. Purpose 25 Election Day Aprons 5. Ballot Proposal Renewal Non-Homestead M	2/13/16	\$ 126.40	\$ 2,785.9
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: Macomb ☐ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address:	4. Purpose: 5. Ballot Proposal	Date of Expenditure	\$	\$
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: ☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address:	4. Purpose: 5. Ballot Proposal	Date of Expenditure	\$	\$
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: ☐ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		

Subtotal: this page \$180.37

Grand Total of Schedules 4B
(Complete on last page of Schedule) \$2,785.93

Enter this total
on Line 8a of
the Summary
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