MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED
17 MAY 15 PM 4:18
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

AMENDED 5-11-17

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.

3. This Statement covers From: 2-11-17 To 4-16-17

1. Committee I.D. Number
695173-50

2. Committee Name
Citizen for Warren Consolidated Schools

4. Committee's Mailing Address
37445 Tamarack Dr
Sterling Heights MI 48310
Area Code and Phone: 586-795-0005
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
Lisa Karasinski
37445 Tamarack Dr
Sterling Heights MI 48310
Area Code and Phone 586-795-0005

6. Treasurer's Business Address
Same as above
Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)
Area Code and Phone

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: _____

8b.
☐ FEBRUARY STATEMENT
☒ APRIL STATEMENT
☐ JULY STATEMENT
☐ OCTOBER STATEMENT

8c. ☐ ANNUAL STATEMENT
(____ Coverage Year)

8d:
☐ Post Petition Sample Filing under MCL 168.483a
(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 Lisa Karasinski
Type or Print Name

Signature

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

SUMMARY PAGE
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 69513-50

2. Committee Name Citizens for Warren Cons Schools

		Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS			
3. Contributions a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) $	3115 00	
b. Unitemized Contributions (less than $20.01 - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) $		(18.) $
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) $		(19.) $
5. **TOTAL CONTRIBUTIONS AND OTHER RECEIPTS** (Add Line 3 c + Line 4)	(5.) $	3115 00	(20.) $
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions a. Itemized In-Kind Contributions (Schedule 4-IK, 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)	(7.) $		(21.) $
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) $	25606 00	
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.) $	25606 00	(24.) $
N-KIND EXPENDITURES 1. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) $		(25.) $
EBTS AND OBLIGATIONS 2. Debts and Obligations a. Owed by the Committee (Schedule 4E)	(12a.)$		
b. Owed to the Committee (Schedule 4E)	(12b.) $		

BALANCE STATEMENT

. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	2081.02
. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	3115.00
SUBTOTAL Add lines 13 and 14	(15.) =	5196.02
Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	25606 00
ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	2630 02 *

r ending balance is negative, please recheck your math.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 69513-50
2. Committee Name Citizens for Warren Cons. Schools

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:
Todd Moen
23728 Ravesh Eastpointe MI 48021
4. Date of Receipt 3-8-17
$ 100.00 $
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:
Todd Moen
36137 Acton Clinton Twp MI 48035
4. Date of Receipt 3-8-17
$ 100.00 $
Click Here for Memo Itemization
5. If over $100.00 cumulative, ple
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 3
Name & Address:
Michael Vancouwenberghe
55405 Snead Dr
Macomb MI 48042
4. Date of Receipt 3-13-17
$ 100.00 $
Click Here for Memo Itemization
5. If over $100.00 cumulative, pl
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 4
Name & Address:
Christopher Lieder
799 Rochelle St.
White Lake MI 48386
4. Date of Receipt 3-16-17
$ 100.00 $
Click Here for Memo Itemization
5. If over $100.00 cumulative, ple
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

Page Subtotal	400.00
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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 69573-50
2. Committee Name Citizens for Warren Cons Schools

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 3-16-17
Name & Address:
Mark Fine
8764 Trenton Dr White Lake MI 48386
Click Here for Memo Itemization
$ 100.00 $
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 — 4. Date of Receipt 3-13-17
Name & Address:
Christine Coulter
28629 Greyfield Dr Farmington Hills MI 48334
Click Here for Memo Itemization
$ 100.00 $
5. If over $100.00 cumulative, ple
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 3 — 4. Date of Receipt ____
Name & Address:
AFSCME Local 1346
3701 Forge Dr Troy MI 48083
Click Here for Memo Itemization
$ 500.00 $
5. If over $100.00 cumulative, pl
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 3-21-17
Name & Address:
Warren Education Assoc
13069 Plumbrook Ste B Sterling Heights MI 48312
Click Here for Memo Itemization
$ 1000.00 $
. If over $100.00 cumulative, ple:
Occupation ____ Employer ____
Business Address ____
Type of Contribution: (Direct) Loan from a person Fund Raiser

Page Subtotal 1700.00

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 69513-50
2. Committee Name Citizens for Warren Cons Schools

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 3-2-17
Name & Address:
Donald P Denault Jr
15731 Marcie Fraser MI 48026

$ 100.00 $

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 4. Date of Receipt 3-17-17
Name & Address:
Phoebe Schoenherr
21655 Old Colony St. Farmington Hills MI 48334

$ 50.00 $

5. If over $100.00 cumulative, ple: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 3-22-17
Name & Address:
Ernest L. Robinette Jr
38600 Van Dyke Ave Sterling Heights MI 48312

$ 50.00 $

5. If over $100.00 cumulative, pl Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 3-18-17
Name & Address:
Lawrence M Scott
No address on check

$ 50.00 $

5. If over $100.00 cumulative, ple: Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

Page Subtotal 250.00

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 695172-00

2. Committee Name Citizens for Warren Cons Schools

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 3-17-17

Name & Address:
Clark A Andrews
53985 Sutherland Lane Shelby Twp MI 48316

$ 50.00 $

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 — 4. Date of Receipt 3-17-17

Name & Address:
Charles E Turnbull
53957 Sutherland Ct. Shelby Twp MI 48316

$ 50.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, ple

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 3-17-17

Name & Address:
John D. Bartley
58370 Pine Dr Clinton Twp MI 48038

$ 50.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, pl

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 3-31-17

Name & Address:
Rosanna Dignan
no address on check

$ 25.00 $

5. If over $100.00 cumulative, ple Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: (Direct) Loan from a person Fund Raiser

Page Subtotal	175.00
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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 69513-50
2. Committee Name Citizens for Warren Cons Schools

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 3-22-17
Name & Address:
Eric Kausch
no address on check
Click Here for Memo Itemization
$ 15.00 $

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 4. Date of Receipt 3-24-17
Name & Address:
Curt Dumas Jr.
36220 Weber Richmond MI 48062
Click Here for Memo Itemization
$ 50.00 $

5. If over $100.00 cumulative, ple
Occupation _____ Employer _____
Business Address _____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 3 4. Date of Receipt 3-24-17
Name & Address:
Marilyn Karpinski
1803 Sycamore Ave Royal Oak
Click Here for Memo Itemization
$ 25.00 $

5. If over $100.00 cumulative, pl
Occupation _____ Employer _____
Business Address _____
Type of Contribution: (Direct) Loan from a person Fund Raiser

3. Contribution # 4 4. Date of Receipt 3-24-17
Name & Address:
Michigan Council No 25
AFSCME AFL-CIO General Account
1034 N Washington Ave Lansing MI 48906
Click Here for Memo Itemization
$ 500.00 $

5. If over $100.00 cumulative, ple
Occupation _____ Employer _____
Business Address _____
Type of Contribution: (Direct) Loan from a person Fund Raiser

Page Subtotal 590.00

Grand Total of All Schedules 4A (Complete on last page of Schedule) 3115.00

Enter this total on line 3a of Summary Page