FILED 18 FEB - 6 PM 4: 26



#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# MACUMB COUNTY CLERK MT. CLEMENS. MICHIGAN

# BALLOT QUESTION COMMITTEE COVER PAGE

				FOR	OFFICIAL USE ONLY	
Report must be legible, typed or printed in link and signed by the treasurer or designated record keeper.		terapina nadabades	3. This Statement covers From: 1/1/1	8	то 2/10/18	
1 Committee ID Number 67113-50			4 Committee's Mailing Address			
<sup>2</sup> Committee Name L'Anse Creuse Citizens Committee			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 filling official.			
Susan Sillene and Residentia 39363 West Archer, H		MI 4	8045			
			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			
					r Hills, MI 48307	
Area Code and Phone		Area (	Code and Phone (586)321-97			
8. TYPE OF STATEMENT:  8a. O PRE-ELECTION  OR O POST- ELECTION  Pre-Election or Post-Election Statement relates to: O PRIMARY O GENERAL O SCHOOL O SPECIAL O OTHER:  Date of Election: March8,2016	8b.  © FEBRUARY STATEMENT  OAPRIL STATEMENT  OCTOBER STATEMENT  BC ANNUAL STATEMEN  (Coverage Year)	r	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)  Be OAMENDMENT_TO CAMPAIGN STATEMENT (Complete Item 8a. 8b. 8c 8d. or 8f to indicate which Statement is being amended)	Elfect By che the cor- outstan	DISSOLUTION OF ITTEE REQUEST tive Date of Dissolution cking this item, I certify that nmittee has no assets or riding debts, including late less. Note, The disposition of all funds must be reported on ute 48 and the Summary	
A committee that does not have a F Schedules. Direct contributions, in- it any of the information listed in ite amendment to the Statement of Org or before the filling deadline of a i	teporling Waiver must flie all re kind contributions, loans, exper ms 4, 5, 6, or 7 has changed sit ganization should accompany it required campaign statement	quired Conditures noe the ins Cam	Campaign Statements. The Campaign S and outstanding debts count against th information was snown on the committe paign Statement. If a request for a Re ampaign statement can not be waived	Statement e \$1,000 e's State porting \	ts must include all applicable Reporting Waiver threshold, ment of Organization, an Nativer is not received on	
Verification: I certify that all reason my knowledge and belief the col	nable diligence was used in the ntents are true, accurate and co	prepara implete.	tion of this statement and attached scho	edules (if	any) and to the best of	
Current Treasurer or Designated Record Keeper Typ	Susan Silich De or Print Name	į.	Signature Sulf	7h		



## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_

L'Anse Creuse Citizens Committee

	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
Contributions     a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) § 0.00	January 10 2000 10 10 10 10 10 10 10 10 10 10 10 10
b. Unitermized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) \$ 0.00	(18.) \$
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ 0.00	(20.)\$
IN-KIND CONTRIBUTIONS		
In-Kind Contributions     a. Itemized In-Kind Contributions     (Schedule 4-IK, Column 7)	(6a.) \$ <u>0.00</u>	
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.) \$ 0.00	
b. Itemized Get-Out-The Vote (Schedule 48-G, Column 6)	(8b.) \$ 0.00	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) s	
d. Uniternized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ 0.00	
e. Subtotal of Expenditures	(8e.) \$ 0.00	(22.) \$
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ 0.00	(23.) \$
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	(24.) \$
IN-KIND EXPENDITURES  11. Total in-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 48-2, Column 8)	(11.) \$ 0.00	(25.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	0.00	
a. Owed by the Committee (Schedule 4E)	(12a.)\$ 0.00	
b. Owed to the Committee (Schedule 4E)	(12b.) S 0.00	
BALANCE STATEMENT		
<ol> <li>Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li> </ol>	(13.) \$	
<ol> <li>Amount received during reporting period (Line 5, Column I, Total Contributions &amp; Other Receipts)</li> </ol>	(14.) + \$0.00 \$1687.99	
15. SUBTOTAL Add lines 13 and 14	(15.) =	
<ol> <li>Amount expended during reporting period (Line 10, Column I, Total Expenditures)</li> </ol>	(16.)	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	•

<sup>\*</sup>If your ending balance is negative, please recheck your math.