



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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 I.D. Number B-2010-002		3. This Statement covers From: <u>04/21/20</u> To <u>07/17/20</u>	
2. Committee Name Partners for Transit		4. Committee's Mailing Address PO Box 2861 Ann Arbor, MI 48103 Area Code and Phone: <u>(734) 995-0947</u> 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 Mike Allehang 3565 Vintage Valley Ann Arbor, MI 48105 Area Code and Phone <u>(734) 995-0947</u>			
6. Treasurer's Business Address 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: <u>08/02/20</u>		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 <u>MIKE ALLEHANG</u> Type or Print Name		<u>M.C. Allehang</u> Signature	

LAWRENCE KESTENBAUM
COUNTY CLERK / REGISTER



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2010-002

2. Committee Name Partners for Transit

	Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>66687.72</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>66687.72</u>	(18.) \$ <u>67687.72</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>66687.72</u>	(20.) \$ <u>67687.72</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>0</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>0</u>	(21.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>50587.38</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>0</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>0</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>0</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>0</u>	(22.) \$ <u>0</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>0</u>	(23.) \$ <u>0</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>0</u>	(24.) \$ <u>0</u>
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>0</u>	(25.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>1862.95</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>66687.72</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>68550.67</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>50587.38</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>17963.29</u>	*

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

COMPLETING BALLOT QUESTION COMMITTEE SUMMARY PAGE

ITEM 3a-c: ITEMIZED CONTRIBUTIONS: Enter, in Column I, the grand total of the direct contributions of money listed on Schedule 4A, Column 6. Enter the cumulative amount of the *direct contributions* of money received by the committee for the election cycle **Item 18**.

ITEM 4: OTHER RECEIPTS: Enter in Column I the grand total of the "*other receipts*" listed on Schedule 4A-1, Column 6. Enter the cumulative of the "*other receipts*" received for the election cycle **(Item 19)**.

ITEM 5: TOTAL CONTRIBUTIONS AND OTHER RECEIPTS: Add Item 3 and Item 4 and enter the total in Column I, Item 5. Enter in Column II **(Item 20)** the sum of Item 18 and Item 19.

ITEM 6-7: ITEMIZED IN-KIND CONTRIBUTIONS: Enter in Column I the grand total of the in-kind contributions listed on Schedule 4-IK, Column 7. Enter the cumulative amount of the *in-kind contributions* received by the committee for the election cycle **(Item 21)**.

ITEMS 7a-d: ITEMIZED EXPENDITURES:

8a. Enter in Column I the grand total of the *direct expenditures* listed on Schedule 4B, Column 7.

8b. Enter in Column I, the total from Schedule B-G, Column 6.

8c: Enter in Column I the total from Schedule 2B-2, Column 7.

8d: Enter in Column I the lump sum total of the *direct expenditures* made by the committee during the period covered by the Campaign Statement that were \$50.00 or less and were not itemized on any schedule.

ITEM 8e: SUBTOTAL ITEMIZED EXPENDITURES: Add Items 7a, 7b, 7c and 7d and enter the total in Item 8, Column I. Enter the cumulative amount of expenditures of money made by the committee during the election cycle in Column II **(Item 22)**.

ITEM 9: INDEPENDENT EXPENDITURES: Enter in Column I, Item 9, the grand total of the independent expenditures listed on Schedule 4B-1, Column 7. Enter the cumulative amount of the independent expenditures made by the committee during the election cycle **(Item 23)**.

ITEM 10: TOTAL EXPENDITURES: Add Item 8 and Item 9 and enter the total in Column I, Item 10. Enter the cumulative amount of total expenditures made by the committee during the election cycle in Column II **(Item 24)**.

ITEM 11: IN-KIND EXPENDITURES - ENDORSEMENTS, DONATIONS OR LOANS OF GOODS OR SERVICES: Enter in Column I, Item 11, the grand total of the in-kind expenditures **(NON-MONETARY)** listed on Schedule 4B-2, Column 8. Enter the cumulative amount of the in-kind expenditures made by the committee during the election cycle in Column II **(Item 25)**.

ITEM 12a: DEBTS AND OBLIGATIONS: Enter the grand total of the debts and obligations owed by the committee at the closing date of the Campaign Statement which were listed on Schedule 4E, Column 9 ("owed by").

ITEM 12b: DEBTS AND OBLIGATIONS: Enter the grand total of the debts and obligations owed to the committee at the closing date of the Campaign Statement which were listed on Schedule 4E, Column 9 ("owed to").

ITEM 13: BEGINNING BALANCE: Enter the "Ending Balance" from the last Campaign Statement filed.

ITEM 14: Enter the "Total Contributions and Other Receipts" from Column I, Item 5.

ITEM 15: SUBTOTAL: Add Item 13 and 14 and enter the total in Item 15.

ITEM 16: Enter the "Total Expenditures" from Column I, Item 10.

ITEM 17: ENDING BALANCE: Subtract Item 16 from Item 15. The result should reflect the committee's cash balance at the closing date of the Campaign Statement. If the result in Item 17 is a negative amount, check the addition of all Schedules and recalculate the Summary Page totals. The only time the committee should indicate a negative number as the ending balance is if the committee bank account is overdrawn on the closing date of the Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002
2. Committee Name Partners for Transit

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

4/21/2022

Name & Address:

Susan Pollay
2776 Page Ave
Ann Arbor, MI 48104

\$ 1000 \$ 1000

[Click Here for Memo Itemization](#)

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

Occupation retired Employer retired

Business Address

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt

4/29/2022

Name & Address:

Chip Smith
517 Krause St
Ann Arbor, MI 48103

\$ 250 \$ 250

[Click Here for Memo Itemization](#)

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

Occupation Urban Planner Employer Wade Trim

Business Address 500 Griswold St. Detroit, MI 48226

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

4. Date of Receipt

5/1/2022

Name & Address:

Marie Klopff
4608 Cottonwood Dr.
Ann Arbor, MI 48108

\$ 257.94 \$ 257.94

[Click Here for Memo Itemization](#)

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

Occupation Executive Director Employer Great Lakes Center for the Arts

Business Address 800 Bary Harbor Drive Petosky, MI 49770

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

4. Date of Receipt

5/2/2022

Name & Address:

Robert Boonin
2099 Castello Circle
Ann Arbor, MI 48108

\$ 257.94 \$ 257.94

[Click Here for Memo Itemization](#)

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

Occupation Lawyer Employer Dykema

Business Address 2723 South State Street Ann Arbor, MI 48104

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

1765.91

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002
2. Committee Name Partners for Transit

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: <u>Richard Chang</u> <u>5846 Staghorn Dr</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>5/4/2022</u>	\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Chief Executive Off.</u> Employer <u>New Foundry</u> Business Address <u>1950 Manchester Rd. Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Jesse Miller</u> <u>93 Oakwood</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>5/4/2022</u>	\$ <u>51.99</u>	\$ <u>51.99</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: <u>Linh Song</u> <u>1290 Bardstown Trail</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>5/9/2022</u>	\$ <u>3089.78</u>	\$ <u>3089.78</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Social Worker</u> Employer _____ Business Address <u>435 South State St. Ann Arbor, MI 48109</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Matthew Carpenter</u> <u>6770 Ford Rd.</u> <u>Ann Arbor, MI 48105</u>	4. Date of Receipt <u>4/29/2022</u>	\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>The Ride</u> Business Address <u>2700 S. Industrial Hwy. Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 4641.77

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002
2. Committee Name Partners for Transit

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: <u>Eric Mahler</u> <u>3257 Turnberry Ln</u> <u>Ann Arbor, MI 48108</u>		4. Date of Receipt <u>5/2/2022</u>	\$ <u>1500</u> \$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Meritor, Inc.</u> Business Address <u>2135 W Maple Rd. Troy, MI 48064</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 2 Name & Address: <u>Jill Marie A McDonough</u> <u>2515 Country Village Ct</u> <u>Ann Arbor, MI 48103</u>		4. Date of Receipt <u>4/27/2022</u>	\$ <u>500</u> \$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer <u>Not employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 Name & Address: <u>Leah Gunn</u> <u>2115 Nature Cove Ct. No 207</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>5/6/2022</u>	\$ <u>500</u> \$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer <u>Not Employed</u> Business Address <u>2115 Nature Cove Ct. No 207 Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: <u>Kathleen MOZAK</u> <u>705 Henry St Apt 105</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt _____	\$ <u>21.10</u> \$ <u>21.10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal

2521.10

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002
2. Committee Name Partners for Transit

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: <u>DTE</u> <u>1 energy plaza</u> <u>Detroit, MI 48226</u>		4. Date of Receipt <u>5/11/2022</u> 6. Amount \$ <u>40000</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>40000</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: <u>Adam Goodman</u> <u>400 Virginia Ave.</u> <u>Ann Arbor, MI 48103</u>		4. Date of Receipt <u>5/16/2022</u> 6. Amount \$ <u>2060</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>2060</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Principal Software</u> Employer <u>Cisco Systems Inc.</u> Business Address <u>123 N. Ashley Ste 100 Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 Name & Address: <u>Brandon Dimcheff</u> <u>1401 Harpst St.</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>5/16/2022</u> 6. Amount \$ <u>51.99</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>51.99</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Engineer</u> Employer <u>Openly</u> Business Address <u>135 Dartmouth St. Boston, MA 02116</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: <u>Bank of Ann Arbor</u> <u>125 S Fifth Ave.</u> <u>Ann Arbor, MI 48104</u>		4. Date of Receipt <u>5/27/2022</u> 6. Amount \$ <u>5000</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ <u>5000</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

47111.99

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002

2. Committee Name Partners for Transit

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: <u>Mike Garfield</u> <u>310 Hiscock St.</u> <u>Ann Arbor, MI 48103</u>	4. Date of Receipt <u>5/27/2022</u>	\$ <u>206.46</u>	\$ <u>206.46</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>Ecology Center</u> Business Address <u>339 E Liberty St. Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Joan Lowenstein</u> <u>502 Burson Pl</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>5/27/2022</u>	\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Not employed</u> Employer <u>Not employed</u> Business Address <u>502 Burson Pl. Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Laurence Kreig</u> <u>252 Carriage Way</u> <u>Ypsilanti, MI 48197</u>	4. Date of Receipt <u>5/28/2022</u>	\$ <u>1030.26</u>	\$ <u>1030.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>252 Carriage way Ypsilanti, MI 48197</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Richard Sheridan</u> <u>2338 Yorkshire</u> <u>Ann Arbor, MI 48104</u>	4. Date of Receipt <u>5/31/2022</u>	\$ <u>1030.26</u>	\$ <u>1030.26</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Menlo Innovations</u> Business Address <u>505 E Liberty Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

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2516.98

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
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1. Committee I.D. Number B-2010-002

2. Committee Name Partners for Transit

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: <u>League of Conservation Voters</u> <u>3029 Miller</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>6/8/2022</u> 6. Amount \$ <u>1000</u> \$ <u>1000</u> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) 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: <u>Adam Jaskiewicz</u> <u>1430 Las Vegas Dr.</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>7/1/2022</u> 6. Amount \$ <u>100</u> \$ <u>100</u> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) Click Here for Memo Itemization			
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Engineer</u> Employer <u>General Electric</u> Business Address <u>1 Village Center Dr. Van Buren Twp. MI 48111</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 Name & Address: <u>Michelle Hughes</u> <u>214 Charles St.</u> <u>Ann Arbor, MI 48103</u> 4. Date of Receipt <u>7/10/2022</u> 6. Amount \$ <u>30</u> \$ <u>30</u> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) 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: <u>Transit Workers Union</u> <u>1220 19th Street, NW</u> <u>Washington, DC 20036</u> 4. Date of Receipt <u>7/13/2022</u> 6. Amount \$ <u>5000</u> \$ <u>5000</u> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) 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			

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6130

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2010-002
2. Committee Name Partners for Transit

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: <u>Lori Sarns</u> <u>7301 Webster Station Dr.</u> <u>Dexter, MI 48130</u> 4. Date of Receipt <u>7/13/2022</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>not employed</u> Employer <u>not employed</u> Business Address <u>7301 Webster Station Dr. Dexter, MI 48130</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>2000</u>	\$ <u>2000</u>
		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

2000

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

66687.72

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2010-002

2. Committee Name Partners for Transit

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: <u>Pay Pal</u> <u>2211 N. First St</u> <u>San Jose, CA 95131</u>	4. Purpose: <u>Service Fee</u> 5. Ballot Proposal: <u>Transit Expansion</u>	<u>4/29/22</u> Date of Expenditure	<u>\$ 7.72</u> 	<u>\$ 7.72</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>Square Space</u> <u>8 clarkson st.</u> <u>New York, NY 10014</u>	4. Purpose: <u>Website Hosting</u> 5. Ballot Proposal: <u>Transit Expansion</u>	<u>5/6/22</u> Date of Expenditure	<u>\$ 168</u>	<u>\$ 168</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Pay Pal</u> <u>2211 N. First St</u> <u>San Jose, CA 95131</u>	4. Purpose: <u>Service Fee</u> 5. Ballot Proposal: <u>Transit Expansion</u>	<u>5/31/22</u> Date of Expenditure	<u>\$ 260.40</u>	<u>\$ 268.12</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>Allied Printing</u> <u>240 Fenway Dr.</u> <u>Fenton, MI 48430</u>	4. Purpose: <u>Direct Mail</u> 5. Ballot Proposal: <u>Transit Expansion</u>	<u>6/15/22</u> Date of Expenditure	<u>\$ 12,198.53</u>	<u>\$ 12,198.53</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		

Subtotal this page

12634.65

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2010-002

2. Committee Name Partners for Transit

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: <u>Allied Printing</u> <u>240 Fenway Dr.</u> <u>Fenton, MI 48430</u>				
4. Purpose: <u>Direct Mail</u>		5. Ballot Proposal: <u>Transit Expansion</u>		
6/16/22 \$ <u>787.75</u> \$ <u>2006.28</u>		Date of Expenditure		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser		County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>Sawicki + Sons</u> <u>1521 W Lafayette Blvd.</u> <u>Detroit, MI 48216</u>				
4. Purpose: <u>Yard Signs</u>		5. Ballot Proposal: <u>Transit Expansion</u>		
6/16/22 \$ <u>2056.40</u> \$ <u>2056.40</u>		Date of Expenditure		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser		County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Blue Path Solutions LLC</u> <u>PO Box 2861</u> <u>Ann Arbor, MI 48103</u>				
4. Purpose: <u>Consulting</u>		5. Ballot Proposal: <u>Transit Expansion</u>		
6/21/22 \$ <u>3750</u> \$ <u>3750</u>		Date of Expenditure		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser		County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local Click for Memo Itemization Type		
Expenditure # 4 Name & Address: <u>Allied Printing</u> <u>240 Fenway Dr.</u> <u>Fenton, MI 48430</u>				
4. Purpose: <u>Direct Mail</u>		5. Ballot Proposal: <u>Transit Expansion</u>		
6/22/22 \$ <u>3286.07</u> \$ <u>23302.35</u>		Date of Expenditure		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser		County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local Click for Memo Itemization Type		

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16 910.22

Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2010-002
2. Committee Name Partners for Transit

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: <u>Sawicki + Sons</u> <u>1521 W. Lafayette Blvd.</u> <u>Detroit, MI 48216</u>	4. Purpose: <u>Yard Signs</u> 5. Ballot Proposal: <u>Transit Expansion</u> County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	<u>6/24/22</u> Date of Expenditure	<u>\$ 2056.40</u>	<u>\$ 4112.80</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	Click for Memo Itemization Type			
Expenditure # 2 Name & Address: <u>SMW Creative Services LLC</u> <u>341 E. Southside Ct.</u> <u>Louisville, Ky 40214</u>	4. Purpose: <u>Ad design</u> 5. Ballot Proposal: <u>Transit Expansion</u> County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	<u>6/24/22</u> Date of Expenditure	<u>\$ 374.50</u>	<u>\$ 374.50</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	Click for Memo Itemization Type			
Expenditure # 3 Name & Address: <u>Meyer Consulting LLC</u> <u>4741 Central St.</u> <u>Kansas City, MO 64108</u>	4. Purpose: <u>Digital Ads</u> 5. Ballot Proposal: <u>Transit Expansion</u> County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	<u>6/29/22</u> Date of Expenditure	<u>\$ 10000</u>	<u>\$ 10000</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	Click for Memo Itemization Type			
Expenditure # 4 Name & Address: <u>Pay Pal</u> <u>2216 N. First St.</u> <u>San Jose, CA 95131</u>	4. Purpose: <u>Service Fee</u> 5. Ballot Proposal: <u>Transit Expansion</u> County: <u>Washtenaw</u> ☒ Support ☐ Oppose ☐ Statewide ☒ Local	<u>7/13/22</u> Date of Expenditure	<u>\$ 4.74</u>	<u>\$ 272.86</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	Click for Memo Itemization Type			

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12435.64

Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B-2010-002

2. Committee Name Partners for Transit

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: <u>Allied Printing</u> <u>240 Fenway Dr.</u> <u>Fenton, MI 48430</u>				
4. Purpose: <u>Direct Mail</u>		6. Date <u>7/13/22</u>		
5. Ballot Proposal: <u>Transit Expansion</u>		7. Amount <u>\$ 8606.87</u>		
County: <u>Washtenaw</u>		8. Cumulative <u>\$ 31909.22</u>		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	☒ Support ☐ Oppose ☐ Statewide ☒ Local	Click for Memo Itemization Type		
☐ Fund Raiser				
Expenditure # 2 Name & Address:				
4. Purpose:		6. Date		
5. Ballot Proposal:		7. Amount		
County:		8. Cumulative		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		
☐ Fund Raiser				
Expenditure # 3 Name & Address:				
4. Purpose:		6. Date		
5. Ballot Proposal:		7. Amount		
County:		8. Cumulative		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		
☐ Fund Raiser				
Expenditure # 4 Name & Address:				
4. Purpose:		6. Date		
5. Ballot Proposal:		7. Amount		
County:		8. Cumulative		
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		
☐ Fund Raiser				

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8606.87

Grand Total of Schedules 4B
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50587.38

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