

INDEPENDENT/POLITICAL **COMMITTEE COVER PAGE**

OSMINITIEE GOVERTAGE		FOR OFF	ICIAL USE ONLY
Report must be legible, typed or printed in ink and s by the treasurer or designated record keeper	igned	3. This Statement covers From: 10/21/2	ть 12/31/2023
1. Committee I.D. Number		4. Committee's Mailing Address	
P-2023-00	11	502 Burson PI	
2. Committee Name		Ann Arbor, MI 48104	
Ann Arbor For Everyone PAC			
Ann Arbor For Everyone PAC		Area Code and Phone (734) 761-524	8
			committee mailing address on the Statement of
5. Treasurer's Name and Residential Address		J Samuellon, man may be cont to this address	See by the ming official.
Joan Lowenstein			
502 Burson Pl			
Ann Arbor, MI 48104			
*		Area Code and Phone (734	1) 761-5248
6. Treasurer's Business Address			ailing Address (If the committee has a Designated
N/A		Record Keeper)	aming / duriess (if the committee ries a Designated
18. \$39			
		~	
Area Code and Phone			Area Code and Phone
8. TYPE OF STATEMENT:			APPLICABLE TO INDEPENDENT AND
APPLICABLE TO INDEPENDENT AND POLITICAL		APPLICABLE TO INDEPENDENT AND OLITICAL COMMITTEES REGISTERED	POLITICAL COMMITTEES REGISTERED
COMMITTEES REGISTERED ON STATE LEVEL		ON COUNTY LEVEL	ON STATE AND COUNTY LEVEL
8a. QUARTERLY STATEMENTS	-		STATE AND COUNTY LEVEL
	8c. 6	ANNUAL STATEMENT	8f. AMENDMENT TO CAMPAIGN
	_	(2,023.00 Coverage Year) Local	(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
January 31	8d. [Candidates Exempted PRE-ELECTION OR	to indicate which Statement is being
	_		amended)
April 25	8e	POST-ELECTION	WASHTENAW COUNTY, MI
		Pre-Election or Post-Election	FILED 2024 JAN 30 PM1:11
July 25	<u></u>	Statement relates to:	
		PRIMARY GENERAL	
October 25	С	CONVENTION SCHOOL	8g. DISSOLUTION OF COMMITTEE
	П		
	П°	CAUCUS	Effective Date of Dissolution
8b SPECIAL ELECTION INDEPENDENT	Γ	Date of Election, Convention or Caucus:	By checking this item, I/We certify that
EXPENDITURE REPORT			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
,		July 25 Quarterly	the Reporting Waiver.
		0.11	Note: The disposition of residual funds must
, , , , , , , , , , , , , , , , , , , ,		October 25 Quarterly	be reported on Schedule 2B and the Summary Page.
Verification: I certify that all responsible dille		Al-	
Verification: I certify that all reasonable diligence was knowledge and belief the contents are true, accurate ar	usea in id compl	the preparation of this statement and attached ete.	schedules (if any) and to the best of my
		140 /	•
urrent Treasurer or Joan Lowenstein		, TO OU HOUR	Date 01/31/2024
esignated Record Keeper Type or Print Name		Signature	



1. Committee I.D. Number P-2023-001

SUMMARY PAGE 2. Committee Name Ann Arbor For Everyone PAC INDEPENDENT OR POLITICAL COMMITTEE

INDEPENDENT OR POLITICAL COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		Camalante for Calcillate feat
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a.) \$4,170.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 4,170.00	(18.) \$24,795.00
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) s	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4) IN-KIND CONTRIBUTIONS	(5.) \$4,170.00	(20.) \$ _24,795.00
In-Kind Contributions a. Itemized (Schedule 2-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) EXPENDITURES	(7.) \$	(21.)\$162.00
Expenditures a. Itemized Direct (Schedule 2B, Column 7)	(8a.) § 5,063.29	
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.) \$	F 000 00
e. Subtotal of Expenditures	(8e.) \$5,063.29	(22.) \$ _5,063.29
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$	(23.) \$
10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES	(10.) \$ 5,063.29	(24.) \$21.89
11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8) <u>DEBTS AND OBLIGATIONS</u>	(11.) \$	(25.) \$
12. Debts and Obligations a. Owed by the Committee (Schedule 2E)	(12a.) S	
b. Owed to the Committee (Schedule 2E) BALANCE STATEMENT	(12b.) S	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.)\$20,603.11	
 Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I) 	(14.)+4,170.00	Politica de la companione
15. SUBTOTAL Add lines 13 and 14	(15.) = 24,773.11	
 Amount expended during reporting period (Line 10, Total Expenditures - Column I) 	5,063.29	
17. ENDING BALANCE (Subtract line 16 from line 15)	19,709.82	

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



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

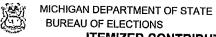
ITEMIZED CONTRIBUTIONS SCHEDULE 2A

1. Committee I.D. Number P-2023-001

INDEPENDENT OR POLITICAL COMMITTEE

Ann Arbor For Everyone PAC

	17 (IDOI 1 OI LLVC	ryone i Ao
Please enter contributor's name and address. If contribution is from an individual, enter last name, first nar and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	me, 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 10/25/2023 Name & Address:		tate of receipt)
Daniel Adams	_{\$} 500	\$ <u>500</u>
1016 Daniel St Ann Arbor, MI 48103		
5. If over \$100.00 cumulative, please provide:	00.141	A.R
Occupation Attorney Employer General Motors	Click Here for	Memo Itemization Type
Business Address 1016 Daniel St, Ann Arbor, MI 48103	•	
Type of Contribution: V Direct Loan from a person Fund Raiser	•	
3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 12/23/2023		4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4
Name & Address: James Fields	_s 100	_{\$} 100
2539 Prairie St	φ	Ψ
Ann Arbor, MI 48105	Click Here for N	Memo Itemization Type
5. If over \$100.00 cumulative, please provide: Occupation Not Employed Employer		
Business Address	•	
Type of Contribution:		
3. Contribution #3 YES 4. Date of Receipt 11/13/202/3		
is this contribution from a PAC?		
Name & Address:	_{\$} 250	_s 250
Debbie Tirico 2320 Tall Oaks Dr	\$	\$
Ann Arbor, MI 48103	Click Here for M	emo Itemization Type
5. If over \$100.00 cumulative, please provide:		•
Not Employed		
Occupation Not Employed Employer		
Business Address		
Type of Contribution:		
8. Contribution #4 s this contribution from a PAC? YES 4. Date of Receipt 11/12/2023		
Name & Address: William Lockwood	_{\$} 10	_{\$} 20
564 Galen Circle	•	emo Itemization Type
Ann Arbor, MI 48103		<i>,</i> ,
5. If over \$100.00 cumulative, please provide:		
Occupation Sales Employer Alpha Telsys Consulting	-	
Business Address 564 Galen Circle, Ann Arbor, MI 48103		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subto	otal \$760.00	
Grand Total of All Schedules		
(Complete on last page of Schedu	· ·	J
	Enter this total on line 3a of	
	Summary Page	



BUREAU OF ELECTIONS ITEMIZED CONTRIBUTIONS **SCHEDULE 2A**

1. Committee I.D. Number P-2023-001

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name Ani	n Arbor For Eve	ryone PAC
Please enter contributor's name and address. If contribution is from an individual, enter last name, first na and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	me, 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 12/26/2013 Name & Address: Mike Allemang	_{\$} 100	\$ 100
3465 Vintage Valley Rd Ann Arbor, MI 48105		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization Type
Occupation Not Employed Employer	_	Later-co.
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 12/26/2033 Name & Address:		
Janis Bobrin 3465 Vintage Valley	_{\$} 500	_{\$} 500
Ann Arbor, MI 48105	Click Here for N	Memo Itemization Type ▼
5. If over \$100.00 cumulative, please provide:		
Occupation Not Employed Employer	_	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 YES 4. Date of Receipt 12/04/2023		W. 14. T. W. 14.
s this contribution from a PAC? 4. Date of Receipt 12/04/2020		
Name & Address:	_{\$} 100	_{\$} 100
Adam Jaskiewicz	\$	\$ 100
1430 Las Vegas Dr Ann Arbor, MI 48103	Click Here for M	emo Itemization Type
	OROK FICIO IOI IVI	emo temization Type
. If over \$100.00 cumulative, please provide:		
Occupation Software Engineer Employer General Electric		
Business Address 1 Village Center Dr, Belleville, MI 48111		
Type of Contribution: Direct Loan from a person Fund Raiser		
Sthis contribution from a PAC? YES 4. Date of Receipt 12/03/2023		
Name & Address: Gay Rosenwald	_{\$} 100	_{\$} 100
510 Granger Ave		
Ann Arbor, MI 48104	Click Here for Ma	emo Itemization Type ▼
5. If over \$100.00 cumulative, please provide:		
Occupation Not Employed Employer	_	
Business Address —		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Sub	Ψ000.00	
Grand Total of All Schedule		
(Complete on last page of Sched	Enter this total	J
	on line 3a of Summary Page	

 $_{\text{Page}}$ $\underline{2}$ of $\underline{3}$



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 2A

1. Committee I.D. Number P-2023-001

on line 3a of Summary Page

INDEPENDENT OR POLITICAL COMMITTEE

2. Committee Name Alli	AIDOI FOI EVE	I YOU'R PAG
Please enter contributor's name and address. If contribution is from an individual, enter last name, first nam and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	ne, 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 12/12/2023		uate of receipt)
Name & Address: William Lockwood 564 Galen Circle Ann Arbor, MI 48103	_{\$} 10	\$ 30
5. If over \$100.00 cumulative, please provide: Occupation Sales Employer Alpha Telsys Consulting Business Address 564 Galen Circle, Ann Arbor, MI 48103	Click Here for	Memo Itemization Type
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 Is this contribution from a PAC? Name & Address: Leah Gunn 2830 S Main St	_{\$} 100	_{\$} 100
Ann Arbor, MI 48103	Click Here for N	femo Itemization Type ▼
5. If over \$100.00 cumulative, please provide: Occupation Not Employed Employer		in i
Business Address		
Type of Contribution:		
3. Contribution # 3 s this contribution from a PAC? YES 4. Date of Receipt 12/27/2023		
Name & Address: Harry Cohen	_{\$} 2500	_{\$} 2500
546 Highland Rd	a	\$
Chelsea, MI 48118	Click Here for Me	emo Itemization Type
. If over \$100.00 cumulative, please provide:		
Occupation Psychologist Employer Self		
Business Address 546 Highland Rd, Chelsea, MI 48118		
Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution # 4 s this contribution from a PAC? YES 4. Date of Receipt Name & Address:		
Name & Address.	\$	\$
	Click Here for Me	mo 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 Subtot		-
Grand Total of All Schedules 2 (Complete on last page of Schedul		
	Enter this total	=

 $_{\text{Page}}$ 3 of 3

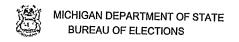


ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B** INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number P-2023-001
Ann Arbor For Everyone PAC

2. Committee Name_

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: 1837 Partners 2075 W Stadium Blvd, Ste 2495 Ann Arbor, MI 48106	5Name of Candidate Office Sought & District # or Jurisdiction	10/24/20 2 /	³ _{\$} 1000	*1 0 00
4. Purpose: PAC Consulting	County Ballot Proposal	Click Here	e for Memo Item	zation Type
Fund Raiser Expenditure #2	Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Name & Address: 1837 Partners 2075 W Stadium Blvd, Ste 2495 Ann Arbor, MI 48106	Name of Candidate Office Sought & District # or Jurisdiction	10/31/23 Date	<u>\$500</u>	_{\$} 1500
·	County	Click Here fo	or Memo Itemiza	ation Type
4. Purpose: PAC Consulting Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #3 Name & Address: Vote Jen Eyer 716 Braeside Ann Arbor, MI 48103	5. Jen Eyer Name of Candidate Ann Arbor City Council, Ward 4 Office Sought & District # or Jurisdiction Washtenaw County	11/01/2023 Date Click Here t	\$ 1000 for Memo Itemiz	<u>\$</u> 1000ation Type
4. Purpose: Contribution Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #4 Name & Address: 1837 Partners 2075 W Stadium Blvd, Ste 2495 Ann Arbor, MI 48106	5. Name of Candidate Office Sought & District # or Jurisdiction County	12/03/2023 Date Click Here	\$500 for Memo Itemiz	\$2000
4. Purpose: PAC Consulting Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
1 2		ge of Schedule)	\$3,000.00 Enter this total on line 8a of the	
Page of			Summary Page	



ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number P-2023-001
Ann Arbor For Everyone PAC 2. Committee Name

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
Expenditure #1		Election Cycle
Name & Address:	_{5.} Erica Briggs	
Vote Erica Briggs	Name of Candidate	11/01/2023 _{\$} 750
538 Fifth St	Ann Arbor City Council, Ward 5	\$
Ann Arbor, MI 48103	Office Sought & District # or Jurisdiction	
	Washtenaw	
4. Purpose: Contribution	County	Click Here for Memo Itemization Type ▼
Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement	
Expenditure #2	_{5.} Lisa Disch	
Name & Address:	Name of Candidate	12/30/20 ²³ s1000 s1000
Lisa Disch for City Council	Ann Arbor City Council, Ward 1	Date \$1000
441 Hilldale Dr	Office Sought & District # or Jurisdiction	Date
Ann Arbor, MI 48105		Click Here for Memo Itemization Type
	Washtenaw	Click Fiele for Metho Remization Type
	County	
4. Purpose: Contribution	Ballot Proposal	
	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #3 Name & Address:	5.	
ActBlue	Name of Candidate	12/01/2073 2.00 212.20
PO Box 441146	Name of Candidate	12/01/20 ²³ \$3.90 \$313.29
Somerville, MA 02144	Office Cought 9 District How had disting	Date
301101 VIIIO, 1VII (02 144	Office Sought & District # or Jurisdiction	Click Here for Memo Itemization Type ▼
	County	A CONTRACTOR OF THE CONTRACTOR
4. Purpose: Service fee		
4. Purpose:	Ballot Proposal Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #4	5.	
Name & Address:		
ActBlue	Name of Candidate	11/01/20)3 \$309.39 \$313.29
PO Box 441146	Office Sought & District # or Jurisdiction	<u> </u>
Somerville, MA 02144	Office Sought & District # of Jurisdiction	Date
	County	Click Here for Memo Itemization Type
Service fee		
4. Purpose: Service fee	Ballot Proposal Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
	Subt	total this page \$2,063.29
	Grand Total of all	
	Grand Total of all (Complete on last pag	
		Enter this total
2 2		on line 8a of the Summary Page
Page of		Sammary 1 ago

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