

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

		FOR OFFICIAL USE ONLY			
Report must be legible, typed or printed in ink and si by the treasurer or designated record keeper	gned 3. This Statement covers From: 04/21/	/24 _{To} 07/21/24			
1. Committee I.D. Number P-2023-00	4. Committee's Mailing Address 502 Burson Pl				
2. Committee Name Ann Arbor For Everyone PAC	Area Code and Phone (734) 761-514 If the address in this box is different from the Companization, mail may be sent to this address.	he committee mailing address on the Statement of			
5. Treasurer's Name and Residential Address Joan Lowenstein 502 Burson Pl Ann Arbor, MI 48104	On the second of	ress by the filing official.			
	Area Code and Phone (73	34) 761-5248			
3. Treasurer's Business Address		Mailing Address (If the committee has a Designate			
	0.180.8				
Area Code and Phone	2 1	Area Code and Phone			
3. TYPE OF STATEMENT: APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE LEVEL	APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON COUNTY LEVEL	APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE AND COUNTY LEVEL			
a. QUARTERLY STATEMENTS January 31	8c. ANNUAL STATEMENT (Coverage Year) Local Candidates Exempted 8d. PRE-ELECTION OR	8f. AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h to indicate which Statement is being amended)			
April 25	8e. POST-ELECTION	WASHTENAW COUNTY, MI FILED 2024 JUL 24 PM1:0			
July 25 October 25	Pre-Election or Post-Election Statement relates to: PRIMARY GENERAL CONVENTION SCHOOL	8g. DISSOLUTION OF COMMITTEE			
	SPECIAL CAUCUS	Effective Date of Dissolution			
b. SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT	Date of Election, Convention or Caucus: July 25 Quarterly	By checking this item, IWe certify that 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 the Reporting Waiver.			
08	October 25 Quarterly	Note: The disposition of residual funds must be reported on Schedule 2B and the Summary Page.			



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

SUMMARY PAGE
PENDENT OR POLITICAL COMMITTEE

2. Committee Name Ann Arbor For Everyone PAC

Column I	Column II Cumulative for Calendar Year
This I Clied	Cumulative for Calendar Tear
(3a.) \$	
(3b.) SNOT APPLICABLE	
(3c.) \$	(18.) \$2,105.00
(4.) \$	(19.) \$
(5.) \$	(20.) \$2,105.00
(6a.) \$	·
(6b.) \$ NOT APPLICABLE	
(7.) \$	(21.) \$
(8a.) S5,081.30	
(8b.) \$	
(8c.) S	
(8d.) \$	
(8e.) \$5,081.30	(22.) \$ 8,742.88
(9.) \$	(23.) \$
(10.) \$ 5,081.30	(24.) \$8,742.88
(11.)\$	(25.) \$
(12a.) S	
(12b.) \$	
(13.)\$18,123.24	
(14.)+30.00	
(15.) = 18,153.24	
5,081.30	
13,071.94	*
	This Period (3a.) \$ 30.00 (3b.) \$ NOT APPLICABLE (3c.) \$ 30.00 (4.) \$ 30.00 (6a.) \$ 30.00 (6a.) \$ NOT APPLICABLE (7.) \$ 5,081.30 (8b.) \$ 5,081.30 (8c.) \$ 5,081.30 (9.) \$ (8e.) \$ 5,081.30 (11.) \$ 18,123.24 (14.) + 30.00 (15.) = 18,153.24 (16.) - 5,081.30

^{*}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

SCHEDULE 2A 1. Committee i.b	. Number		
INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Nar		oor For Eve	ryone PAC
Please enter contributor's name and address. If contribution is from an individual, enter last nar and middle initial. Check box to indicate if contribution is from a Political Committee or an Indep Committee (Both are commonly called PACs).	ne, first name, endent	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 05/12/24 Name & Address:		J	date of receipt)
William Lockwood	,	10	_s 50
564 Galen Circle	Φ_		
Ann Arbor, MI 48103			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization Type
OccupationEmployer			•
Business Address			
Type of Contribution: Direct Loan from a person Fund Ra	aiser		
3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 06/12/24			
Name & Address: William Lockwood		10	_{\$} 60
564 Galen Circle	\$	10	\$00
Ann Arbor, MI 48103		Click Here for N	lemo Itemization Type
5. If over \$100.00 cumulative, please provide:			· · · · · · · · · · · · · · · · · · ·
Occupation Employer			
Business Address			
	Raiser		
3. Contribution # 3	, tuibo,		
Is this contribution from a PAC? LYES 4. Date of Receipt 07/12/24			
Name & Address:	_{\$_} 1	n	. 70
William Lockwood 564 Galen Circle	\$		\$10
Ann Arbor, MI 48103	•	Click Here for Me	emo Itemization Type
			· · · · · · · · · · · · · · · · · · ·
. If over \$100.00 cumulative, please provide:			
OccupationEmployer_			
Business Address			er i er
Type of Contribution: Direct Loan from a person Fund Raise	ar		
3. Contribution # 4 YES 4 Date of Receipt	21		
s this contribution from a PAC? ————————————————————————————————————			
	\$		\$
		Cliek Henry for Ma	
		Click Here for Ivie	mo Itemization Type
5. If over \$100.00 cumulative, please provide:			
On the Completion of the Compl			
Occupation Employer			
Business Address			•
Type of Contribution: Direct Loan from a person Fund Rai	ser Page Subtotal	¢20.00	
Grand Total of All	· _	\$30.00	
(Complete on last page		\$30.00	

Grand Total of All Schedules 2A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page

Page 1 of 1

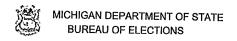


ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B**

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

INDEPENDENT OR POLITICAL COMM	WITTEE 2.	Committee

INDEPENDENT OR POLITICAL CO	DMMITTEE 2. Committee Name		•	
Name and address of person or vendor to whom the expenditure was made	Candidate or Ballot Question Information	6. Date	7 Amount	8. Cumulative for Election or Election Cycle
Expenditure #1		· · · · · · · · · · · · · · · · · · ·		
Name & Address:	5			
Intuit Mailchimp	Name of Candidate	05/03/24	,26.50	_{\$} 132.50
405 N Angier Ave NE		Date	\$	\$102.00
Atlanta, GA 30308	Office Sought & District # or Jurisdiction	Date		
	omed deaght & District # of Julisdiction			
		Clieb He	f bd 11	
Empil convices	County	Click Hei	re for Memo Iten	nization Type
4. Purpose: Email services				
Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #2				
Name & Address:	5	00/00/0	00.50	
Intuit Mailchimp	Name of Candidate	06/03/24	_{\$} 26.50	_{\$} 159
405 N Angier Ave NE		Date		¥
Atlanta, GA 30308	Office Sought & District # or Jurisdiction			
•		Click Here	for Memo Itemiz	ation Type
	County			adon type
	Sounty			
4. Purpose: Email services	Bellat D			
	Ballot Proposal Check box if expenditure is payment of Debt			
Fund Raiser	or Obligation reported on previous statement			
Expenditure #3 Name & Address:				
	5			
Intuit Mailchimp	Name of Candidate	07/03/24	,26.50	_{\$} 185.50
405 N Angier Ave NE		Date	\$	\$
Atlanta, GA 30308	Office Sought & District # or Jurisdiction	Date		
	J	Click Here	for Memo Itemiz	zation Type
	County			,,
F=1	County			
4. Purpose: Email services	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt			
<u>Lud</u>	or Obligation reported on previous statement			
Expenditure #4 Name & Address:	5.			· · · · · · · · · · · · · · · · · · ·
ActBlue	Name of Candidate			
	Name of Candidate	07/16/24	4.00	57.00
PO Box 441146	016	07710/24	_{\$} 1.80	_{\$} 57.38
Somerville, MA 02144	Office Sought & District # or Jurisdiction	Date		
		Cliate Litera	4 NA	
	County	Click Here	for Memo Itemi	zation Type
4. Purpose: Service fee				
	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt or Obligation reported on previous statement			
		total this page	004.00	<u> </u>
	Sub	iolai illis page	\$81.30	
	Grand Total of al	l Schedules 2B		
	(Complete on last pag	ge of Schedule)		
			Enter this total	
1 2			on line 8a of the	•
Page of			Summary Page	
· 495 OI				



ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B**

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

INDEPENDENT OR POLITICAL CO	OMMITTEE 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. ·			
Jim Toy Community Center	Name of Candidate	07/12/24	_s 5000	_{\$} 5000
PO Box 1152			\$ <u>0000</u>	\$2000
Ann Arbor, MI 48106	0.6	Date		
7 WIN 7 WEST, WIT 40 100	Office Sought & District # or Jurisdiction			
				
a.	County	Click Her	e for Memo Item	ization Type 🔻
Purpose: Charitable contribution				Lancani
-	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt			
Freedit 10	or Obligation reported on previous statement			
Expenditure #2 Name & Address:	5.	***************************************		
Name & Address.				
	Name of Candidate		\$	\$
		Date		
	Office Sought & District # or Jurisdiction			
		Click Here f	or Memo Itemiza	tion Type
	County			
	Journy			
4. Purpose:	D.III. (D.			
	Ballot Proposal Check box if expenditure is payment of Debt			
Fund Raiser	or Obligation reported on previous statement			
Expenditure #3				
Name & Address:	5.			
•	Name of Candidate			
			\$	\$
	Office County & District II	Date		
	Office Sought & District # or Jurisdiction	Click Here	for Memo Itemiza	ation Type
			ioi monio nonie	attori Type
	County			
4. Purpose:				
r. r dipose.	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt			
Expenditure #4	or Obligation reported on previous statement			
Name & Address:	5.			
	Name of Candidate	•		
			_	
	Office Sought & District # or Jurisdiction	Date	\$	\$
	omoo cought a District # of our saidtion	Date		
	County	Click Here	for Memo Itemiz	ation Type
	County		io. Monio Renniza	ation Type
. Purpose:	Pollot Drawage			
	Ballot Proposal Check box if expenditure is payment of Debt			
Fund Raiser	or Obligation reported on previous statement			ĺ
		atal this I		
	Supro	otal this page	\$5,000.00	
	Grand Total of all S	Schedules 3D		
	(Complete on last page	of Schedule)	\$5,081.30	
	, , ,	΄.		
2	•		Enter this total on line 8a of the	
	•		Summary Page	
Page of		`	ugu	