

INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be leading toward as and at a second		TOROTTE	DIAL USE UNLT
Report must be legible, typed or printed in ink and s by the treasurer or designated record keeper	igned	3. This Statement covers From: 08/27/2	4 _{To} 10/20/24
1. Committee I.D. Number		4. Committee's Mailing Address	
P-2023-00	11	502 Burson PI	
2. Committee Name		Ann Arbor, MI 48104	
The second secon			
Ann Arbor for Everyone PAC		Area Code and Phone (734) 761-5248	
			committee mailing address on the Statement of
Treasurer's Name and Residential Address		Organization, mail may be sent to this address	ss by the filing official.
Joan Lowenstein			
502 Burson Pl			
Ann Arbor, MI 48104			
7 4 11 7 4 2 51 , 1011 4 5 1 6 4			
		Area Code and Phone (734)	761-5248
6. Treasurer's Business Address		7. Designated Record Keeper's Name and Ma	iling Address (If the committee has a Designated
		Record Keeper)	and a designated
		* x = 0	
Area Code and Phone			Area Code and Phone
8. TYPE OF STATEMENT:			T
APPLICABLE TO INDEPENDENT AND POLITICAL	1	APPLICABLE TO INDEPENDENT AND	APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED
COMMITTEES REGISTERED ON STATE LEVEL	PO	DLITICAL COMMITTEES REGISTERED	ON
8a. QUARTERLY STATEMENTS		ON <u>COUNTY LEVEL</u>	STATE AND COUNTY LEVEL
ou. GOANTENET STATEMENTS	_	_	
	8c	ANNUAL STATEMENT	8f. AMENDMENT TO CAMPAIGN
January 31		Coverage Year) Local Candidates Exempted	(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
	8d.		to indicate which Statement is being amended)
April 25	8e. [POST-ELECTION	amoriaday
April 25	00. L	_ FOST-ELECTION	
July 25		Pre-Election or Post-Election	
Land only 25	П.	Statement relates to:	
		RIMARY GENERAL	
October 25	С	ONVENTION SCHOOL	8g. DISSOLUTION OF COMMITTEE
		PECIAL CAUCUS	Effective Date of Dissolution
Bb. SPECIAL ELECTION INDEPENDENT		Pate of Election, Convention or Caucus:	By checking this item, INVe certify that
EXPENDITURE REPORT			the committee has no asset or outstanding.
	_	11/05/24	debts, including late filing fees. Further, I Trequest that if the dissolution cannot be
		hata or o	granted, that this be considered a request for
·		July 25 Quarterly	the Reporting Waiver.
/		October 25 Quarterly	Note: The disposition of residual funds must be reported on Schedule 2B and the
			Summary Page.
Verification: I certify that all reasonable diligence was snowledge and belief the contents are true, accurate an	used in	the preparation of this statement and attached a	chedules (if any) and to the head of
knowledge and belief the contents are true, accurate an	d comple	ete.	oriedules (ii arry) and to the best of my
loop Lowonst-!-		100	201 -
Joan Lowenstein		, TOUL KUUK	Date 10/25/24
esignated Record Keeper Type or Print Name		Signature	
			1



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 a. Itemized Contributions		Cultidative for Calefidat Fear
(Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a.) §5,595.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) § 5,595.00	7,710.00
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	•	
(Add line 3c + Line 4) IN-KIND CONTRIBUTIONS	(5.) §5,595.00	(20.) s7,710.00
		(20,) 4
6. 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.) \$
8. Expenditures	10 720 50	
a. Itemized Direct (Schedule 2B, Column 7)	(8a.) \$10,720.59	
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.) \$	
e. Subtotal of Expenditures	(8e.) § 10,720.59	(22.) \$ _19,489.97
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$	(23.) \$
10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES	(10.) \$10,720.59	(24.)\$ 19,489.97
11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11)	
DEBTS AND OBLIGATIONS	(11.)\$	(25.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 2E)	(12a.) \$	
b. Owed to the Committee (Schedule 2E)	(12b.) \$	
13. Ending Balance of last report filed BALANCE STATEMENT		
(Enter zero if no previous reports have been filed.)	(13.)\$13,055.34	
14. Amount received during reporting period		
(Line 5, Total Contributions & Other Receipts - Column I)	(14.) + 5,595.00	
15. SUBTOTAL Add lines 13 and 14	(15.) =18,650.34	
16. Amount expended during reporting period		
(Line 10, Total Expenditures - Column I)	(16.)10,720.59	
17. ENDING BALANCE (Subtract line 16 from line 15)	7,929.75	
(Subtract rife to from line 15)	(17.) \$ 1 ,929.73	*

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



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

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

INDEPENDENT OR POLITICAL COMMITTEE

2. Committee Name Ann Arbor for Everyone PAC

	Z. COMM	inter italie	oo. = . o. ,	
Committee (Both are commonly called P	ress. If contribution is from an individual, ente If contribution is from a Political Committee or ACs).	er last name, first name, r an Independent	6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through
3. Contribution # 1 Is this contribution from a PAC?	ES 4. Date of Receipt 09/12/24			date of receipt)
Name & Address:	4. Date of Receipt			
William Lockwood		_{\$_} 1	0	_{\$} 90
564 Galen Circle		\$ <u>'</u>		\$ 30
_				
Ann Arbor, MI 48103			•	
5. If over \$100.00 cumulative, please	provide:		Click Here for M	lemo Itemization Type
Occupation	Employer			ionia namization Typo
Business Address				
Type of Contribution: Direct	Loan from a person	Tours Dalace		
3. Contribution #2		Fund Raiser		1
	ES 4. Date of Receipt 09/18/24			
Gail Arnold			10	. 10
2 Jay Lee Ct		p _		a
Ann Arbor, MI 48108			0"	
			Click Here for Me	emo Itemization Type
If over \$100.00 cumulative, please pr	ovide:			
Occupation Not employed	Employer			
Business Address				
	Loan from a person	Fund Raiser		
3. Contribution # 3	S 4. Date of Receipt 09/18/24			
s this contribution from a PAC?	4. Date of Neceipt 03/10/24	-		
Name & Address:		0.7	-	
Debbie Tirico		_{\$} 25)	\$ 275
2320 Tall Oaks Dr				
Ann Arbor, MI 48103			Click Here for Mei	no Itemization Type
. If over \$100.00 cumulative, please pro	vido:			The Congress of the Constitution of the Consti
o to: \$100.00 damaiato, piease pro	vide.			
Occupation Not employed	_Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	und Raiser		
Contribution # 4		uliu Naisei		
s this contribution from a PAC?	4. Date of Receipt			
Name & Address:		40	^	1 4 9
Say Rosenwald		_{\$} _10	U	s 100
510 Granger				
nn Arbor, MI 48104		С	lick Here for Men	no Itemization Type
5. If over \$100.00 cumulative, please pr	ovide:			
Occupation Not employed	Employer			
Business Address ———————————————————————————————————			19	
ype of Contribution: Direct	Loan from a paraer	Cond Data		
Abe of Couttinguiou: Talpuect	Loan from a person	Fund Raiser		
		Page Subtotal	\$145.00	
		otal of All Schedules 2A		
	(Complete on	last page of Schedule)		
	7- 7-		nter this total	
			n line 3a of ummary Page	
<i>a i</i>		0.	, . ago	

Page _____ of _____



ITEMIZED CONTRIBUTIONS

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

SCHEDULE 2A 1. Committee	I.D. Number			
INDEPENDENT OR POLITICAL COMMITTEE 2. Committee N	_{Name} Ann A	rbor for Every	one PAC	
Please enter contributor's name and address. If contribution is from an individual, enter last rand middle initial. Check box to indicate if contribution is from a Political Committee or an Indicate (Both are commonly called PACs).	name, first name, dependent	6. Amount	7. Cumulative for Calendar Year for I Contributor (Through	
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 09/15/24 Name & Address:			date of receipt)	
Antoinette Carlbom 3120 Bolgos Circle	\$	15	_{\$} <u>15</u>	
Ann Arbor, MI 48105				
5. If over \$100.00 cumulative, please provide:		Official theory Comb		_
OccupationEmployer		Click Here for N	Memo Itemization Type	
Business Address				
Type of Contribution: A Direct	Raiser			
3. Contribution #2 Is this contribution from a PAC? YES 4. Date of Receipt 09/18/24 Name & Address:	(A. P. A. S. L. A. S.			
Janis Bobrin 3465 Vintage Valley		_{\$} 150	_{\$} 150	
Ann Arbor, MI 48105		Click Here for M	emo Itemization Type	-
5. If over \$100.00 cumulative, please provide: Occupation Not employed Employer	•			Lance
Business Address				
Type of Contribution: V Direct Loan from a person Fu	ınd Raiser			
3. Contribution #3				
Is this contribution from a PAC? LYES 4. Date of Receipt 09/18/24				
Name & Address:		500	500	
Brandon Dimcheff	\$.	500	_{\$} 500	
1401 Harpst St Ann Arbor, MI 48104		Official Land Co. M.		
		Click Here for Me	emo Itemization Type	
. If over \$100.00 cumulative, please provide:				
Occupation Software Engineer Employer Openly				
Business Address 131 Dartmouth St, Boston, MA 02116				
Type of Contribution: Direct Loan from a person Fund Ra	alser			
Contribution # 4 sthis contribution from a PAC? YES 4. Date of Receipt 09/19/24				
Name & Address: Viike Allemang	s.	100	_{\$} 100	
3465 Vintage Valley	~~~		¥	
Ann Arbor, MI 48105		Click Here for Me	mo 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 Subtotal	\$765.00		
Grand Total of	All Schedules 2A			

2 of <u>6</u>

Enter this total on line 3a of Summary Page

(Complete on last page of Schedule)



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

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

INDEPENDENT OR POLITICAL COMMITTEE

2. Committee Name Ann Arbor for Everyone PAC

Please enter contributor's name and addres and middle initial. Check box to indicate if c Committee (Both are commonly called PACS) 3. Contribution #1	ontribution is from a Political Comn	uai, enter last name, first r nittee or an Independent	name, 6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
Is this contribution from a PAC?	4. Date of Receipt 09/19/2	4		
Name & Address: Christie W Barrett			_{\$} 750	_{\$} 750
1111 Olivia Ave Ann Arbor, MI 48104				
•				
5. If over \$100.00 cumulative, please pro Occupation Not employed			Click Here for	Memo Itemization Type
Business Address	Employer	Water Manager Control of the Control		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC? YES Name & Address:	00/05/0	l-mand		
Lana Pollack			_{\$} 250	_{\$} 250
414 N Main St #12			·	*
Ann Arbor, MI 48104			Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please proving Occupation Not employed	ide: Employer		·	
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser	_	
3. Contribution #3		Land Control of the C		
Is this contribution from a PAC?	4. Date of Receipt 09/26/24	<u> </u>		
Name & Address:			_{\$} 50	50
Ronald Emaus			\$	_{\$} 50
2503 Hampshire Rd Ann Arbor, MI 48104			Click Here for N	Memo Itemization Type
•				nomo nemization Type
5. If over \$100.00 cumulative, please provide	le:			
OccupationE	mployer			
Business Address	***************************************			
Type of Contribution: Direct	Loan from a person	Пештра		
Contribution # 4		Fund Raiser		
s this contribution from a PAC?	4. Date of Receipt 09/27/24			
^{Name & Address:} Nilliam Brinbkerhoff			_{\$} 500	_{\$} 500
534 Glendale Circle			Ψ	•
Ann Arbor, MI 48103			Click Here for M	lemo Itemization Type
5. If over \$100.00 cumulative, please prov	ide:			
Occupation Grocer	Employer Argus			
Business Address 325 W Liberty, Ar				
Type of Contribution:	Loan from a person	Fund Raiser	•	'
		Page Su	btotal \$1,550.00	
		Grand Total of All Schedul plete on last page of Sche	es 2A	_
			Enter this total on line 3a of	
0 /			Summary Page	
$_{\text{\tiny ne}} 3 _{\text{\tiny of}} \phi$				



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

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

INDEPENDENT OR POLITICAL COMMITTEE

Ann Arbor for Everyone PAC

2. Committee Name 711	II VIDOLIOLEVEL	YOUR FAC
Please enter contributor's name and address. If contribution is from an individual, enter last name, first nat 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
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 09/29/24 Name & Address:		date of receipt)
Joe Malcoun	_{\$} 1000	s 1000
1516 Morton Ave	Ψ	
Ann Arbor, MI 48104		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization Type ▼
Occupation Not employedEmployer	_	· ·
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 09/30/24 Name & Address:		
Matthew Grocoff	_{\$} 500	_{\$} 500
217 S 7th St		
Ann Arbor, MI 48103	Click Here for N	Memo Itemization Type ▼
5. If over \$100.00 cumulative, please provide:		 -
Occupation Owner Employer FEW Energy	_	
Business Address 217 S 7th St, Ann Arbor, MI 48103	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 s this contribution from a PAC? 4. Date of Receipt 09/30/24		
Name & Address:		
Carston Hohnke	_{\$} _250	_{\$} 250
301 Revena Blvd		
Ann Arbor, MI 48103	Click Here for M	emo Itemization Type
. If over \$100.00 cumulative, please provide:		
Occupation Portfolio Management Employer Rocket Mortgage		
Business Address 301 N Revena Blvd, Ann Arbor, MI 48103		
Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution # 4 sthis contribution from a PAC? YES 4. Date of Receipt 09/30/24	***	
Name & Address:	~	
Bentley Johnson	_{\$} 25	_{\$} 25
48 Manor Drive	Click Horo for Ma	
Ann Arbor, MI 48105	Office Fig. 101 IME	emo 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 Subto	otal \$1,775.00	
Grand Total of All Schedules	2A	-
(Complete on last page of Schedi	· '	J
•	Enter this total	

Page 4 of 6

on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

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

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name Ann	Arbor for Every	one PAC
Please enter contributor's name and address. If contribution is from an individual, enter last name, first name 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 09/30/24 Name & Address:		date of receipty
Adam Goodman 400 Virginia Ave	_{\$} 1000	_{\$} 1000
Ann Arbor, MI 48103	,	
5. If over \$100.00 cumulative, please provide: Occupation Not employed Employer	Click Here for N	Memo Itemization Type
Business Address 123 N Ashley, Suite 100, Ann Arbor, MI 48104		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt 10/12/24 Name & Address:		
William Lockwood	_{\$} 10	_{\$} 100
564 Galen Circle Ann Arbor, MI 48104	Click Here for M	emo Itemization Type
5. If over \$100.00 cumulative, please provide:		ono nomization 1995
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Is this contribution from a PAC? YES 4. Date of Receipt 10/03/24		
Name & Address: Brian Hayden	¢ 250	_{\$} 250
1511 Granger Ave	\$	\$200
Ann Arbor, MI 48104	Click Here for Me	emo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation Employer HeatSpring		
Business Address 1511 Granger Ave, Ann Arbor, MI 48104		
Type of Contribution:		
3. Contribution # 4 Is this contribution from a PAC? YES 4. Date of Receipt 10/15/24		
Name & Address:	F0	F0
Lisa Lemble	_{\$} _50	_{\$} 50
2328 Fernwood	Click Horo for Ma	!! Tree
Ann Arbor, MI 48104	Click Here for Mei	mo Itemization Type

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

Occupation _____ Employer ____

Business Address

Type of Contribution: Direct Loan from a person

Page Subtotal

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

Fund Raiser

1,310.00

Enter this total on line 3a of Summary Page



ITEMIZED CONTRIBUTIONS SCHEDULE 2A

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

INDEPENDENT OR POLITICAL COMMITTEE 2. Com	mittee Name Ann A	Arbor for Every	one PAC
Please enter contributor's name and address. If contribution is from an individual, entended and middle initial. Check box to indicate if contribution is from a Political Committee of Committee (Both are commonly called PACs).	ter last name, first name, or an Independent	6. Amount	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 10/17/24 Name & Address:			date of redeipt)
Ellen Taylor		_{\$} 50	_{\$} 50
1407 Lincoln Avenue Ann Arbor, MI 48104			
5. If over \$100.00 cumulative, please provide:		Click Here for N	Memo Itemization Type
OccupationEmployer			Lance Lance
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 2 Is this contribution from a PAC? Name & Address: YES 4. Date of Receipt Name & Address:		***************************************	The second secon
Name a Addiese.		\$	
			
		Click Here for M	emo Itemization Type
5. If over \$100.00 cumulative, please provide:			
OccupationEmployer_			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3			
Is this contribution from a PAC?			
Name & Address:			
	\$	S	\$
		Click Here for Me	mo Itemization Type
5. If over \$100.00 cumulative, please provide:	•		
OccupationEmployer_			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 4 s this contribution from a PAC? YES 4. Date of Receipt Name & Address:	runu (Kaisei		
	\$		\$
		Click Here for Me	mo Itemization Type
5. If over \$100.00 cumulative, please provide:			\$Accessed.
Openingties			

Page Subtotal

\$50.00

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

Fund Raiser

\$5,595.00

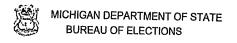
Enter this total on line 3a of Summary Page

Business Address -

Type of Contribution:

Direct

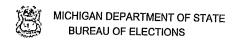
Loan from a person



ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B INDEPENDENT OR POLITICAL COMMITTEE

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

THE PROPERTY OF THE PROPERTY OF	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 Election Cycle
Expenditure #1				
Name & Address:	5.			
Intuit Mailchimp	Name of Candidate	09/23/24	_s 26.50	,238.50
405 N Angier Ave NE		Date	. \$ <u></u>	\$
Atlanta, GA 30308	Office Sought & District # or Jurisdiction	Date		
, , , , , , , , , , , , , , , , , , , ,	Office Sought & District # of Jurisdiction			
4. Purpose: Email services	County	Click He	re for Memo Item	nization Type
Fund Raiser	Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #2	5.			
Name & Address:		00/26/24	10000	40000
Voters for Reliable Low Cost Energy	Name of Candidate	09/26/24	_{\$} 10000	_{\$} 10000
538 Fifth St		Date		
Ann Arbor, MI 48103	Office Sought & District # or Jurisdiction	Click Here	for Memo Itemiz	ation Type
	County			
	Proposal A			
4. Purpose: Donation	Ballot Proposal			
 	Check box if expenditure is payment of Debt			•
Fund Raiser	or Obligation reported on previous statement			
Expenditure #3 Name & Address:	-			
1837 Partners LLC	5			
	Name of Candidate	10/02/24	_s 500	,1000
2075 W Stadium		Date	\$	<u>ф</u>
Ann Arbor, MI 48108	Office Sought & District # or Jurisdiction			
		Click Here	for Memo Itemiz	ation Type
	County			
4. Purpose: PAC Management				
4. Purpose: 1110 Managoment	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt			
Expenditure #4	or Obligation reported on previous statement			
Name & Address:	5.			
Intuit Mailchimp	Name of Candidate			
405 N Angier Ave NE		10/03/24	_s 26.50	_{\$} 265
Atlanta, GA 30308	Office Sought & District # or Jurisdiction	Date	Φ	\$
	in the second se			
	County	Click Here	for Memo Itemiz	zation Type 🔻
Email consists	·			المصطا
4. Purpose: Email services	Ballot Proposal			ĺ
Fund Raiser	Check box if expenditure is payment of Debt			
	or Obligation reported on previous statement			
	Subi	total this page	\$10,553.00	
	Grand Total of all	Schedules 2R		
	(Complete on last pag	e of Schedule)		
		•	Enter this total	
1 2			on line 8a of the	•
Page of			Summary Page	
· · · · · · · · · · · · · · · · · · ·				



ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B**

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

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name

3. 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				1
Name & Address:	5			
Intuit Mailchimp	Name of Candidate	10/11/24	₂ 83.50	. 348.50
405 N Angier Ave NE		Date	\$	ф
Atlanta, GA 30308	Office Sought & District # or Jurisdiction	Date		
	County	Click Her	e for Memo Item	ization 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	5.			
Name & Address:		10/01/24	94 AA	400.07
ActBlue	Name of Candidate	10/01/24	_{\$} 84.09	_{\$} 139.67
PO Box 441146		Date		
Somerville, MA 02144	Office Sought & District # or Jurisdiction	Click Here t	for Memo Itemiza	ation Type
	County		- memo nome	anon Typo
4. Purpose: Online service fees				
4. Purpose:	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #3 Name & Address:	5.			
Tame a Nacional				
	Name of Candidate		S	s
		Date	Ψ	Ψ
	Office Sought & District # or Jurisdiction	Click Here	for Memo Itemiz	ration Type
	County			السا
4. Purpose:	444			
	Ballot Proposal Check box if expenditure is payment of Debt			
Fund Raiser	or Obligation reported on previous statement			
Expenditure #4				
Name & Address:	5			
	Name of Candidate			1
			\$	s
	Office Sought & District # or Jurisdiction	Date	·	Te
		Click Here	for Memo Itemi	zation Type
	County			
4. Purpose:	Ballot Proposal			
Fund Raiser	Check box if expenditure is payment of Debt or Obligation reported on previous statement			
	Sub	total this page	\$167.59	
	Grand Total of all	I Schodulas OD		
	(Complete on last pag		\$10,720.59	
_			Enter this total	
2 2			on line 8a of the	9

Page ____ of ____

Summary Page