STATEMENT OF ORGANIZATION FORM FOR LOCAL BALLOT QUESTION COMMITTEES FILED WITH COUNTY CLERK
Information on this form is made public.

1. Committee ID #: *B- 2026 - 001*	*2. Type of Filing: ☐ Original: ☑ Amendment to items: *10*	Eff. Date: *1/16/2026*

*3. Date Committee was Formed:

*4. Full Name of Committee:

5. Acronym or Abbreviation (if any):   LAWRENCE KESTENBAUM
COUNTY CLERK / REGISTER

*6. Complete Committee Mailing Address (May be PO Box):

*7. Complete Committee Street Address (May not be PO Box):

*Committee Phone: ***Committee Email Address:**

Committee Fax #:   **Committee Website Address:**

*8. Treasurer Name and Complete Residential Address:

Phone #:   **Email Address:**

9. Designated Record Keeper Name and Complete Address:

Phone #:   **Email Address:**

*10. REPORTING WAIVER REQUEST:

☑ **YES, I/WE WANT TO APPLY FOR THE REPORTING WAIVER.** The committee does not expect to spend or receive in excess of $1,000.00 in an *election.* I/We understand that if the committee does not spend or receive in excess of $1,000.00 in an *election*, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the $1,000.00 threshold and all required campaign statements must be filed. *A Reporting Waiver does not exempt a committee from filing Late Contribution Reports.*

☐ **NO, I/WE DO NOT WANT TO APPLY FOR THE REPORTING WAIVER.** The committee expects to spend or receive in excess of $1,000.00 in an *election.* I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of $1,000.00 in an *election.* I/We further understand that the **Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees.** Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.

*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)
  *Official Depository (name and address):

  Secondary Depository (name and address):

12. List the specific ballot proposal(s) involved using the official ballot designation if available and mark support or oppose as appropriate: ☐ Support   ☐ Oppose
Description:
Indicate the ballot proposal district below by selecting County (include the county name), Multi-County or Local (include the name of the jurisdiction). If multi-county, list the county where the greatest number of voters eligible to vote on the proposal reside.
       ☐ County   ☐ Multi-County   ☐ Local

13. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief.

*Current Treasurer   ***Designated Record Keeper (If Applicable)**
Frank Wilhelme   Date: *1/16/2026*   Date:

CFR BQSO.doc REV 7/25: Authority granted under Act 388 of 1976, as amended   * = Required Field on Originals

ITEM 9: If the committee has a designated recordkeeper enter his or her full name (last name, first name middle initial) complete residential address, telephone number and e-mail address. This is the person, other than the treasurer, who will be responsible for the committee's records and campaign statements filings. If the committee's treasurer will personally handle these responsibilities, leave this item blank. An individual designated in this item may sign campaign statements in place of the treasurer, but does not have the authority to sign a Statement of Organization form in place of the treasurer.

*ITEM 10: Reporting Waiver Request
 • Select **"YES, I/WE WANT TO APPLY FOR THE REPORTING WAIVER"** if the committee does not expect to spend or receive more than $1,000.00 in an election. The committee does not owe detailed campaign statements as long as the committee does not receive or spend more than $1,000.00 in an election.
 • Select **"NO, I/WE DO NOT WANT TO APPLY FOR THE REPORTING WAIVER"** if the committee expects to spend or receive in excess of $1,000.00 in an election. This means that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of $1,000.00 in an election. Election means primary, general, special or millage election.

*ITEM 11: Enter the name and address of the Michigan bank, savings and loan association or credit union that the committee now uses or intends to use as its "official depository." The committee's official depository must be located in Michigan. List the names and addresses of any "secondary depository" the committee currently uses or intends to use. A secondary depository may be used only for the deposit of contributions (for example, as a temporary holding place for receipts from a joint fund raiser); it may not be used for committee expenditures.

ITEM 12: Indicate the letter or number designation of the ballot issue supported or opposed or a description of the proposal. Check the appropriate box to indicate whether the committee supports or opposes the proposal. Check the appropriate box to indicate whether the proposal will be voted on in multiple counties, in one county or at the local level (city, township, village or school district).

*ITEM 13: This form **must** be signed and dated by the active committee treasurer and designated recordkeeper inf applicable. This form serves as an electronic signature for electronically filing campaign statements and reports.