



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

WASHTENAW COUNTY, MI
FILED 2026 JUL 27 PM 12:14

BALLOT QUESTION COMMITTEE
COVER PAGE

LAWRENCE KESTENBALM
COUNTY CLERK / REGISTER
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.

3. This Statement covers From: 04/21/2026 To 07/20/2026

1. Committee I.D. Number B2025003

4. Committee's Mailing Address 2370 E Stadium Blvd
#725

Ann Arbor, MI 48104

Area Code and Phone: (734) 330-3795

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.

2. Committee Name

Ann Arbor for Public Power Ballot Question Committee

5. Treasurer's Name and Residential Address

Michael Nowak

1394 Coler Road, Ann Arbor MI 48104

Area Code and Phone

6. Treasurer's Business Address

1394 Coler Road

Ann Arbor, MI 48104

Area Code and Phone (734) 216-8541

7. Designated Record Keeper's Name and Mailing Address
(If the committee has a Designated Record Keeper)

Brian Geiringer

415 Pearl St, Ypsilanti, MI 48197

Area Code and Phone (734) 330-3795

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:

11/3/2026

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 Michael Nowak

Type or Print Name

Signature



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

RECEIPTS		Column I This Period	Column II Cumulative for Election Cycle
3. Contributions			
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$	<u>6,297.02</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$	<u>6,297.02</u>	(18.) \$ <u>12,277.02</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>20,000.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$	<u>6,297.02</u>	(20.) \$ <u>32,277.02</u>
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions			
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$	<u>832.25</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>832.25</u>	(21.) \$ <u>14,711.77</u>
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$	<u>7,606.34</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$	<u>0.00</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$	<u>0.00</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$	<u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$	<u>7,606.34</u>	(22.) \$ <u>15,845.22</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	<u>0.00</u>	(23.) \$ <u>0.00</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	<u>7,606.34</u>	(24.) \$ <u>15,845.22</u>
IN-KIND EXPENDITURES			
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$	<u>0.00</u>	(25.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 4E)	(12a.) \$	<u>0.00</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>17,691.12</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	<u>6,297.02</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) =	<u>23,988.14</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	<u>7,606.34</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>16,381.80</u>	*

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Maithilee Kanthi 2004 Medford Rd, Apt 222 Ann Arbor, MI 48104		4. Date of Receipt <u>4/21/2026</u> \$ <u>15</u>	\$ <u>15</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: David Minnix 1911 Pontiac trail Ann Arbor, MI 48105		4. Date of Receipt <u>4/21/2026</u> \$ <u>10</u>	\$ <u>50</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 # 3 Name & Address: Peter terHorst 707 Princeton Ave Ann Arbor, MI 48103		4. Date of Receipt <u>4/22/2026</u> \$ <u>50</u>	\$ <u>50</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 # 4 Name & Address: Brenda Benjamin 1557 Franklin St Ann Arbor, MI 48103		4. Date of Receipt <u>4/22/2026</u> \$ <u>25</u>	\$ <u>35</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

100

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
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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jeremy Glover 411 High Street, Apt. A2 Ann Arbor, MI 48104		4. Date of Receipt <u>4/23/2026</u> \$ <u>40</u>	\$ <u>60</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: Sanjukta Paul 1111 paul sy Ann Arbor, MI 48103		4. Date of Receipt <u>4/24/2026</u> \$ <u>10</u>	\$ <u>30</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 # 3 Name & Address: Lisa Johnson 1649 Hillridge Blvd Ann Arbor, MI 48103		4. Date of Receipt <u>4/24/2026</u> \$ <u>40</u>	\$ <u>120</u> Click Here for Memo Itemization
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 # 4 Name & Address: Jeremy Glover 411 High Street, Apt. A2 Ann Arbor, MI 48104		4. Date of Receipt <u>4/24/2026</u> \$ <u>10</u>	\$ <u>70</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			

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Grand Total of All Schedules 4A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Benjamin Kramer 31 Sycamore Circle Stony Brook, NY 11790		4. Date of Receipt <u>4/25/2026</u> \$ <u>10</u>	\$ <u>10</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: Dominykas Siaudvytis 823 Addington lane Ann Arbor, MI 48108		4. Date of Receipt <u>4/30/2026</u> \$ <u>60</u>	\$ <u>60</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 # 3 Name & Address: Jeff Takacs 1935 Upland Drive Ann Arbor, MI 48105		4. Date of Receipt <u>5/1/2026</u> \$ <u>10</u>	\$ <u>45</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 # 4 Name & Address: Lara Pierce 5655 Hearthstone Ct Ann Arbor, MI 48108		4. Date of Receipt <u>5/2/2026</u> \$ <u>10</u>	\$ <u>10</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			

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jacqui Hinchey 1018 Fountain Street Ann Arbor, MI 48103		4. Date of Receipt <u>5/8/2026</u> \$ <u>10</u>	\$ <u>60</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 # 2 Name & Address: Michael Meyer 821 Westwood Ave Ann Arbor, MI 48103		4. Date of Receipt <u>5/9/2026</u> \$ <u>10</u>	\$ <u>10</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: Rebecca Cooke 2020 Murray Hill Rd Cleveland, OH 44106		4. Date of Receipt <u>5/11/2026</u> \$ <u>10</u>	\$ <u>20</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 # 4 Name & Address: Maya Pasini 2470 nottingham road ann arbor, MI 48104		4. Date of Receipt <u>5/11/2026</u> \$ <u>40</u>	\$ <u>50</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	

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SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jennifer Jones 7050 Talladay Rd Milan, MI 48160		4. Date of Receipt <u>5/14/2026</u> \$ <u>50</u>	\$ <u>50</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: Mark Clevey 2917 Brockman Blvd Ann Arbor, MI 48104		4. Date of Receipt <u>5/14/2026</u> \$ <u>100</u>	\$ <u>100</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 # 3 Name & Address: Mary Deanna Miner 1264 Laurel View Dr. Ann Arbor, MI 48105		4. Date of Receipt <u>5/17/2026</u> \$ <u>10</u>	\$ <u>20</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 # 4 Name & Address: William Blackwell 22 University Ave NE Apt 310 Minneapolis, MN 55413		4. Date of Receipt <u>5/19/2026</u> \$ <u>100</u>	\$ <u>100</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			

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ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Shannon Hoy 3461, Burbank Drive Ann Arbor, MI 48105		4. Date of Receipt <u>5/19/2026</u> \$ <u>10</u>	\$ <u>10</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: Anita Pandit 636 Duane Ct Ann Arbor, MI 48103		4. Date of Receipt <u>5/20/2026</u> \$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
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: Yulesh Patel 330 Maple St Ypsilanti, MI 48198		4. Date of Receipt <u>5/20/2026</u> \$ <u>30</u>	\$ <u>30</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 # 4 Name & Address: Victoria Neff 409 Arbana Dr Ann Arbor, MI 48103		4. Date of Receipt <u>5/20/2026</u> \$ <u>20</u>	\$ <u>20</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			

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jamila Martin 3827 Belmont ST Hamtramck, MI 48212		4. Date of Receipt <u>5/21/2026</u> \$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>State Advisor</u> Employer <u>Movement Voter Project</u> Business Address <u>37 Bridge St, Northampton, MA</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 2 Name & Address: David Minnix 1911 Pontiac trail Ann Arbor, MI 48105		4. Date of Receipt <u>5/22/2026</u> \$ <u>10</u>	\$ <u>60</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 # 3 Name & Address: Sanjukta Paul 1111 paul sy Ann Arbor, MI 48103		4. Date of Receipt <u>5/24/2026</u> \$ <u>10</u>	\$ <u>40</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 # 4 Name & Address: Lisa Johnson 1649 Hillridge Blvd Ann Arbor, MI 48103		4. Date of Receipt <u>5/24/2026</u> \$ <u>40</u>	\$ <u>160</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			

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ITEMIZED CONTRIBUTIONS
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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: Jeremy Glover 411 High Street, Apt. A2 Ann Arbor, MI 48104		4. Date of Receipt <u>5/24/2026</u> \$ <u>10</u>	\$ <u>80</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 # 2 Name & Address: Kevin Griffin 622 Six Mile Rd Whitmore Lake, MI 48189		4. Date of Receipt <u>5/27/2026</u> \$ <u>30</u>	\$ <u>30</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: Lisa Nichols 2502 Tremmel Ave. Ann Arbor, MI 48104		4. Date of Receipt <u>5/27/2026</u> \$ <u>25</u>	\$ <u>25</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 # 4 Name & Address: CHRISTOPHER BATTEY 23905 104TH AVE W EDMONDS, WA 98020		4. Date of Receipt <u>5/29/2026</u> \$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Engineer</u> Employer <u>Amazon</u> Business Address <u>23905 104TH AVE W, Edmonds, WA 98020</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 4A
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Enter this total
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Daniel Trenz 2302 Vinewood BLVD Ann Arbor, MI 48104-2766		4. Date of Receipt <u>5/30/2026</u> \$ <u>25</u>	\$ <u>50</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: Ian Cole 11900 Morrissey Road Grass Lake, MI 49240		4. Date of Receipt <u>5/30/2026</u> \$ <u>40</u>	\$ <u>40</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 # 3 Name & Address: Fiona Dunlop 109 N Thayer St Ann Arbor, MI 48104		4. Date of Receipt <u>5/31/2026</u> \$ <u>40</u>	\$ <u>40</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 # 4 Name & Address: Ashley Wines 22329 Mill Rd Novi, MI 48375		4. Date of Receipt <u>6/1/2026</u> \$ <u>10</u>	\$ <u>10</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			

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2. Committee Name Ann Arbor for Public Power BQC

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: Jim Leach 428 2nd St ANN ARBOR, MI 48103-4952		4. Date of Receipt <u>6/1/2026</u> \$ <u>25</u>	\$ <u>25</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: Joshua Ehrlich 306 Mark Hannah Place Ann Arbor, MI 48103		4. Date of Receipt <u>6/1/2026</u> \$ <u>25</u>	\$ <u>25</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 # 3 Name & Address: Thomas seiple 3205 Sunnywood Drive Ann Arbor, MI 48103		4. Date of Receipt <u>6/1/2026</u> \$ <u>25</u>	\$ <u>25</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 # 4 Name & Address: Jeff Takacs 1935 Upland Drive Ann Arbor, MI 48105		4. Date of Receipt <u>6/3/2026</u> \$ <u>10</u>	\$ <u>55</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

85

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

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on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Margaret Zeddies 376 Harbor Way Ann Arbor, MI 48103	4. Date of Receipt <u>6/3/2026</u>	\$ <u>5</u>	\$ <u>5</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 # 2 Name & Address: Anna Attie 885 West End Ave New York, NY 10025	4. Date of Receipt <u>6/3/2026</u>	\$ <u>100</u>	\$ <u>100</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: Kit Fuller 1403 Iroquois Place Ann Arbor, MI 48104	4. Date of Receipt <u>6/6/2026</u>	\$ <u>25</u>	\$ <u>25</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 # 4 Name & Address: Rebecca Cooke 2020 Murray Hill Rd Cleveland, OH 44106	4. Date of Receipt <u>6/7/2026</u>	\$ <u>10</u>	\$ <u>30</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	

Page Subtotal

140

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jacqui Hinchey 1018 Fountain Street Ann Arbor, MI 48103		4. Date of Receipt <u>6/8/2026</u> \$ <u>10</u>	\$ <u>70</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: Tom Stulberg 1202 Traver Ann Arbor, MI 48105		4. Date of Receipt <u>6/8/2026</u> \$ <u>30</u>	\$ <u>30</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 # 3 Name & Address: Douglas Finch 112 S Main St Ste C Ann Arbor, MI 48104		4. Date of Receipt <u>6/9/2026</u> \$ <u>100</u>	\$ <u>100</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 # 4 Name & Address: Braxton Blake 1508 Longshore Dr. Ann Arbor, MI 48105		4. Date of Receipt <u>6/9/2026</u> \$ <u>50.02</u>	\$ <u>50.02</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

190.02

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Aaron Cummins 124 E Summit St Ann Arbor, MI 48104		4. Date of Receipt <u>6/13/2026</u> \$ <u>10</u>	\$ <u>10</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: Mary Deanna Miner 1264 Laurel View Dr. Ann Arbor, MI 48105		4. Date of Receipt <u>6/17/2026</u> \$ <u>10</u>	\$ <u>30</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 # 3 Name & Address: Hanna Larcinese 616 N 5th Ave Ann Arbor, MI 48104		4. Date of Receipt <u>6/17/2026</u> \$ <u>500</u>	\$ <u>500</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>GeoScope Rock Shop</u> <u>616 N 5th Ave, Ann Arbor, MI 48104</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: Robert Gleba 314 Hilldale Dr Ann Arbor, MI 48105-1119		4. Date of Receipt <u>6/18/2026</u> \$ <u>50</u>	\$ <u>50</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

570

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Yulesh Patel 330 Maple St Ypsilanti, MI 48198		4. Date of Receipt <u>6/20/2026</u> \$ <u>30</u>	\$ <u>60</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: Victoria Neff 409 Arbana Dr Ann Arbor, MI 48103		4. Date of Receipt <u>6/20/2026</u> \$ <u>20</u>	\$ <u>40</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 # 3 Name & Address: David Minnix 1911 Pontiac trail Ann Arbor, MI 48105		4. Date of Receipt <u>6/22/2026</u> \$ <u>10</u>	\$ <u>70</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 # 4 Name & Address: Lisa Johnson 1649 Hillridge Blvd Ann Arbor, MI 48103		4. Date of Receipt <u>6/24/2026</u> \$ <u>40</u>	\$ <u>200</u> Click Here for Memo Itemization
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			

Page Subtotal 100

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Sanjukta Paul 1111 paul sy Ann Arbor, MI 48103		4. Date of Receipt <u>6/24/2026</u> \$ <u>10</u>	\$ <u>50</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: Jeremy Glover 411 High Street, Apt. A2 Ann Arbor, MI 48104		4. Date of Receipt <u>6/24/2026</u> \$ <u>10</u>	\$ <u>90</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 # 3 Name & Address: Amy Higgins 2073 Chaucer Drive Ann Arbor, MI 48103		4. Date of Receipt <u>6/25/2026</u> \$ <u>80</u>	\$ <u>330</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 # 4 Name & Address: Kevin Griffin 622 Six Mile Rd Whitmore Lake, MI 48189		4. Date of Receipt <u>6/27/2026</u> \$ <u>7</u>	\$ <u>37</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

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

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jackson Koeppel 189 Monterey St Highland Park, MI 48203		4. Date of Receipt <u>6/27/2026</u> \$ <u>1000</u>	\$ <u>1000</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Program Manager</u> Employer <u>Public Grids</u> Business Address <u>189 Monterey St, Highland Park, MI 48203</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 2 Name & Address: Cid Dabaja 3318 Green Rd Ann Arbor, MI 48105		4. Date of Receipt <u>6/27/2026</u> \$ <u>20</u>	\$ <u>20</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 # 3 Name & Address: Lauren Tatarsky 3028 Williamsburg Rd. Ann Arbor, MI 48108		4. Date of Receipt <u>6/27/2026</u> \$ <u>250</u>	\$ <u>250</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Counselor</u> Employer <u>Lauren Tatarsky</u> Business Address <u>300 N. Huron St., Ypsilanti, MI 48197</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: Madison Lukomski 519 6th St Ann Arbor, MI 48103		4. Date of Receipt <u>6/28/2026</u> \$ <u>80</u>	\$ <u>80</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 1350

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Kelman Wolfkostin 513 Potter Ave Ann Arbor, MI 48103		4. Date of Receipt <u>6/29/2026</u> \$ <u>40</u>	\$ <u>40</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: Thomas seiple 3205 Sunnywood Drive Ann Arbor, MI 48103		4. Date of Receipt <u>7/1/2026</u> \$ <u>25</u>	\$ <u>50</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 # 3 Name & Address: Yvette Starbuck 213 w Liberty suite 10 Ann Arbor, MI 48105		4. Date of Receipt <u>7/1/2026</u> \$ <u>1000</u>	\$ <u>1000</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Labor union</u> Employer <u>Geo</u> Business Address <u>213 w Liberty suite 10, Ann Arbor, MI 48104</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: Margaret Zeddies 376 Harbor Way Ann Arbor, MI 48103		4. Date of Receipt <u>7/3/2026</u> \$ <u>5</u>	\$ <u>10</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 1070

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Jeff Takacs 1935 Upland Drive Ann Arbor, MI 48105		4. Date of Receipt <u>7/5/2026</u> \$ <u>10</u>	\$ <u>65</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: Rebecca Cooke 2020 Murray Hill Rd Cleveland, OH 44106		4. Date of Receipt <u>7/7/2026</u> \$ <u>10</u>	\$ <u>40</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 # 3 Name & Address: Anita Pandit 636 Duane Ct Ann Arbor, MI 48103		4. Date of Receipt <u>7/7/2026</u> \$ <u>100</u>	\$ <u>350</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer <u>Anita Pandit</u> <u>636 Duane Ct, Ann Arbor, MI 48103</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: Jacqui Hinchey 1018 Fountain Street Ann Arbor, MI 48103		4. Date of Receipt <u>7/8/2026</u> \$ <u>10</u>	\$ <u>80</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 130

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

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Tom Stulberg 1202 Traver Ann Arbor, MI 48105		4. Date of Receipt <u>7/8/2026</u> \$ <u>30</u>	\$ <u>60</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: Rita Mitchell 621 Fifth St Ann Arbor, MI 48103		4. Date of Receipt <u>7/12/2026</u> \$ <u>50</u>	\$ <u>50</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 # 3 Name & Address: Nancy Schlabach 900 Brooks St Ann Arbor, MI 48103		4. Date of Receipt <u>7/13/2026</u> \$ <u>20</u>	\$ <u>20</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 # 4 Name & Address: Joseph Lalonde 1434 Kingwood St. Ypsilanti, MI 48197		4. Date of Receipt <u>7/16/2026</u> \$ <u>25</u>	\$ <u>25</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

125

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

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B2025003
2. Committee Name Ann Arbor for Public Power BQC

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: Mary Deanna Miner 1264 Laurel View Dr. Ann Arbor, MI 48105		4. Date of Receipt <u>7/17/2026</u> \$ <u>10</u>	\$ <u>40</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: Victoria Neff 409 Arbana Dr Ann Arbor, MI 48103		4. Date of Receipt <u>7/20/2026</u> \$ <u>20</u>	\$ <u>60</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 # 3 Name & Address: Yulesh Patel 330 Maple St Ypsilanti, MI 48198		4. Date of Receipt <u>7/20/2026</u> \$ <u>30</u>	\$ <u>90</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 # 4 Name & Address:		4. 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			

Page Subtotal 60

Grand Total of All Schedules 4A
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6297.02

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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>NationBuilder fee (prorated)</u>	\$ <u>153.27</u>	\$ <u>698.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>7/20/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		
Contribution #2 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Dropbox</u>	\$ <u>27</u>	\$ <u>725.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>4/25/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		
Contribution #3 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Descript.com video editing</u>	\$ <u>17</u>	\$ <u>742.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>4/30/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		

Page Subtotal

197.27

Grand Total of all Schedules 4-IK
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Enter this total on
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Tabling at Juneteenth</u> 5. DATE OF RECEIPT: <u>5/19/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ <u>30</u>	\$ <u>772.32</u>
Contribution #2 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Tabling at A2 African American Festival</u> 5. DATE OF RECEIPT: <u>5/20/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ <u>54</u>	\$ <u>826.32</u>
Contribution #3 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address: ☐ Fund Raiser	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Dropbox</u> 5. DATE OF RECEIPT: <u>5/25/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:	\$ <u>27</u>	\$ <u>853.32</u>

Page Subtotal

111.00

Grand Total of all Schedules 4-IK
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Descript.com video editing</u>	\$ <u>17</u>	\$ <u>870.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>5/30/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		
Contribution #2 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Dropbox</u>	\$ <u>27</u>	\$ <u>897.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>6/25/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		
Contribution #3 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Descript.com video editing</u>	\$ <u>17</u>	\$ <u>914.32</u>
☐ Fund Raiser	5. DATE OF RECEIPT: <u>6/30/26</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS:		

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61.00

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(Complete on last page of Schedule)

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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Mike Nowak 1394 Coler Rd. Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation Retired Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Candy for parade</u> 5. DATE OF RECEIPT: <u>6/30/26</u> 6. VENDOR NAME & ADDRESS:	\$ <u>22.98</u>	\$ <u>130.67</u>
☐ Fund Raiser			
Contribution #2 Name & Address: Mike Nowak 1394 Coler Rd. Ann Arbor, MI 48104 If over \$100.00 cumulative, please provide: Occupation Retired Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Texting</u> 5. DATE OF RECEIPT: <u>7/14/26</u> 6. VENDOR NAME & ADDRESS:	\$ <u>200</u>	\$ <u>330.67</u>
☐ Fund Raiser			
Contribution #3 Name & Address: Ann Arbor for Public Power 2370 E. Stadium Blvd. #725 Ann Arbor, MI, 48104 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Park reservation</u> 5. DATE OF RECEIPT: <u>5/30/26</u> 6. VENDOR NAME & ADDRESS:	\$ <u>75</u>	\$ <u>989.32</u>
☐ Fund Raiser			

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ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Steve Geiringer 3017 Andora Dr. Superior Twp. MI 48198 If over \$100.00 cumulative, please provide: Occupation Retired Employer Name & Address:	4. ☐ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description <u>Food for picnic</u> 5. DATE OF RECEIPT: <u>5/30/26</u> 6. VENDOR NAME & ADDRESS:	\$ <u>165</u>	\$ <u>165</u>
☒ Fund Raiser			
Contribution #2 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☒ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____
☐ Fund Raiser			
Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. ☒ Loan endorsement or guarantee ☐ Goods Donated or loaned ☐ Services Donated ☒ Goods or Services Purchased by Others ☐ Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____
☐ Fund Raiser			

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165

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ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

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:	4. Purpose:			
	5. Ballot Proposal:	Date of Expenditure	\$	\$
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	County: <u>Washtenaw</u>	Click for Memo Itemization Type		
☐ Fund Raiser	☐ Support ☐ Oppose ☐ Statewide ☐ Local			
Expenditure # 2 Name & Address: <u>ActBlue</u> <u>PO Box 962017</u> <u>Boston, MA 02196-2017</u>	4. Purpose: <u>Service Fee</u>			
	5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>5/1/26</u> Date of Expenditure	\$ <u>6.17</u>	\$ <u>82.64</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	County: <u>Washtenaw</u>	Click for Memo Itemization Type		
☐ Fund Raiser	☒ Support ☐ Oppose ☐ Statewide ☒ Local			
Expenditure # 3 Name & Address: <u>ActBlue</u> <u>PO Box 962017</u> <u>Boston, MA 02196-2017</u>	4. Purpose: <u>Service Fee</u>			
	5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>6/1/26</u> Date of Expenditure	\$ <u>31.36</u>	\$ <u>114.00</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	County: <u>Washtenaw</u>	Click for Memo Itemization Type		
☐ Fund Raiser	☒ Support ☐ Oppose ☐ Statewide ☒ Local			
Expenditure # 4 Name & Address: <u>ActBlue</u> <u>PO Box 962017</u> <u>Boston, MA 02196-2017</u>	4. Purpose: <u>Service Fee</u>			
	5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>7/1/26</u> Date of Expenditure	\$ <u>38.92</u>	\$ <u>152.92</u>
☐ Check box if expenditure is payment of debt or obligation reported on previous statement	County: <u>Washtenaw</u>	Click for Memo Itemization Type		
☐ Fund Raiser	☒ Support ☐ Oppose ☐ Statewide ☒ Local			

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76.45

Grand Total of Schedules 4B
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BUREAU OF ELECTIONS

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ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

1. Committee I. D. Number B2025003

BALLOT QUESTION COMMITTEE

2. Committee Name Ann Arbor for Public Power BQC

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: UPS Store	4. Purpose: Printing 5. Ballot Proposal: Ann Arbor for Public Power BQC	5/15/26 Date of Expenditure	\$ 148.40	\$ 1670.43
☐ 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: Fiona Dunlop	4. Purpose: Field Coord Salary 5. Ballot Proposal: Ann Arbor for Public Power BQC	5/17/26 Date of Expenditure	\$ 1800	\$ 1800
☐ 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: UPS Store	4. Purpose: Printing 5. Ballot Proposal: Ann Arbor for Public Power BQC	6/3/26 Date of Expenditure	\$ 553.59	\$ 2224.02
☐ 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: UPS Store	4. Purpose: Printing 5. Ballot Proposal: Ann Arbor for Public Power BQC	6/16/26 Date of Expenditure	\$ 148.40	\$ 2372.42
☐ 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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2650.39

Grand Total of Schedules 4B
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BUREAU OF ELECTIONS

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ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2025003

2. Committee Name Ann Arbor for Public Power BQC

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: Fiona Dunlop	4. Purpose: <u>Field Coord Salary</u> 5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>6/22/26</u> Date of Expenditure	\$ <u>1200.00</u>	\$ <u>3000.00</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: Fiona Dunlop	4. Purpose: <u>Field Coord Salary</u> 5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>6/22/26</u> Date of Expenditure	\$ <u>1200.00</u>	\$ <u>4200.00</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: UPS Store	4. Purpose: <u>Printing</u> 5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>7/18/26</u> Date of Expenditure	\$ <u>79.50</u>	\$ <u>2451.92</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: Fiona Dunlop	4. Purpose: <u>Field Coord Salary</u> 5. Ballot Proposal: <u>Ann Arbor for Public Power BQC</u>	<u>7/20/26</u> Date of Expenditure	\$ <u>2400.00</u>	\$ <u>6600.00</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

4,879.50

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

7,606.34

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