WASHTENAW COUNTY, MI
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LAWRENCE KESTENBAUM
COUNTY CLERK / REGISTER

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 08/25/26 To 10/18/26

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

2. Committee Name
Ann Arbor for Everyone PAC

4. Committee's Mailing Address
502 Burson Pl
Ann Arbor, MI 48104

Area Code and Phone (734) 649-1975

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.

5. Treasurer's Name and Residential Address
Joan Lowenstein
502 Burson Pl
Ann Arbor, MI 48104

Area Code and Phone (734) 649-1975

6. Treasurer's Business Address

Area Code and Phone

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

Area Code and Phone

8. TYPE OF STATEMENT:

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON **STATE LEVEL**

8a. QUARTERLY STATEMENTS

- ☐ January 31
- ☐ April 25
- ☐ July 25
- ☐ October 25

8b. ☐ SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON **COUNTY LEVEL**

8c. ☐ ANNUAL STATEMENT (_____ Coverage Year) Local Candidates Exempted

8d. ☑ PRE-ELECTION OR

8e. ☐ POST-ELECTION

Pre-Election or Post-Election Statement relates to:

- ☐ PRIMARY
- ☑ GENERAL
- ☐ CONVENTION
- ☐ SCHOOL
- ☐ SPECIAL
- ☐ CAUCUS

Date of Election, Convention or Caucus: 11/03/26

- ☐ July 25 Quarterly
- ☐ October 25 Quarterly

APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON **STATE AND COUNTY LEVEL**

8f. ☐ AMENDMENT TO CAMPAIGN STATEMENT
(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h to indicate which Statement is being amended)

8g. ☐ **DISSOLUTION OF COMMITTEE**

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no asset or outstanding debts, including late filing fees. Further, I request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 2B and the Summary Page.

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: Joan Lowenstein (Type or Print Name) — Joan Lowenstein (Signature) — Date 10/23/26

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

2. Committee Name Ann Arbor for Everyone PAC

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative for Calendar Year
3. Contributions			
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a.) $	0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0.00	(18.) $ 30,850.00
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) $	0.00	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) $	0.00	(20.) $ 30,850.00
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions a. Itemized (Schedule 2-IK, Column 7)	(6a.) $	0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(6b.) $	NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) $	0.00	(21.) $ 0.00
EXPENDITURES			
8. Expenditures a. Itemized Direct (Schedule 2B, Column 7)	(8a.) $	350.43	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) $	0.00	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) $	0.00	
d. Unitemized (less than $50.01 each - no Schedule)	(8d.) $	0.00	
e. Subtotal of Expenditures	(8e.) $	350.43	(22.) $ 28,388.46
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) $	0.00	(23.) $ 0.00
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) $	350.43	(24.) $ 28,388.46
IN-KIND EXPENDITURES			
11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) $	0.00	(25.) $ 0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations a. Owed by the Committee (Schedule 2E)	(12a.) $	0.00	
b. Owed to the Committee (Schedule 2E)	(12b.) $	0.00	

BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	3,456.97
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) +	0.00
15. SUBTOTAL Add lines 13 and 14	(15.) =	3,456.97
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) -	350.43
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	3,106.54 *

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

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

2. Committee Name Ann Arbor for Everyone PAC

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 Name & Address: Wix.com 100 Gansevoort St New York, NY 10014 4. Purpose: Website services ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	08/31/26 Date Click Here for Memo Itemization Type	$348	$717.35
Expenditure #2 Name & Address: ActBlue PO Box 962017 Boston, MA 02196 4. Purpose: Online fees ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	08/31/26 Date Click Here for Memo Itemization Type	$2.43	$499.36
Expenditure #3 Name & Address: 4. Purpose: _____ ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date Click Here for Memo Itemization Type	$_____	$_____
Expenditure #4 Name & Address: 4. Purpose: _____ ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date Click Here for Memo Itemization Type	$_____	$_____

Subtotal this page	$350.43
Grand Total of all Schedules 2B (Complete on last page of Schedule)	$350.43

Enter this total on line 8a of the Summary Page