



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

WASHTENAW COUNTY, MI
FILED 2026 OCT 27 PM3:06

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: <u>09/16/2026</u> To <u>10/18/2026</u>	
1. Committee I.D. Number <u>B-2026-007</u>		4. Committee's Mailing Address <u>3465 Vintage Valley Rd</u> <u>Ann Arbor, MI 48105</u>	
2. Committee Name <u>Voters for a Sustainable A2</u>		Area Code and Phone: <u>3134081500</u> 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 <u>Janis Bobrin</u> <u>3465 Vintage Valley Rd, Ann Arbor, MI 48105</u> Area Code and Phone <u>3134081500</u>			
6. Treasurer's Business Address <u>N/A</u> Area Code and Phone		7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) <u>N/A</u> Area Code and Phone	
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: <u>11/3/2026</u>		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		<u>Janis Bobrin</u> Type or Print Name Signature	

LAWRENCE KESTENBAUM
COUNTY CLERK / REGISTER



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2026-007

2. Committee Name Voters for a Sustainable A2

RECEIPTS		Column I This Period	Column II Cumulative for Election Cycle
3. Contributions			
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$	<u>8800</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$		(18.) \$
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$	<u>8800</u>	(20.) \$ <u>8800</u>
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions			
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$		
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.) \$		(21.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$	<u>3944.40</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$		
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$		
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$		
e. Subtotal of Expenditures	(8e.) \$		(22.) \$
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$		(23.) \$
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	<u>3944.40</u>	(24.) \$ <u>3944.40</u>
IN-KIND EXPENDITURES			
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$		(25.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 4E)	(12a.) \$		
b. Owed to the Committee (Schedule 4E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	<u>8800</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) =	<u>8800</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	<u>3944.40</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>4855.60</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 B-2026-007

2. Committee Name Voters for a Sustainable A2

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: Erica Briggs 204 Mark Hannah Pl Ann Arbor, MI 48103		4. Date of Receipt <u>9/23/2026</u> \$ <u>500</u>	\$ <u>500</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Nonprofit Manager</u> Employer <u>Rails to Trails Conservancy</u> Business Address <u>204 Mark Hannah Pl, Ann Arbor, MI 48103</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 2 Name & Address: Janis Bobrin 3465 Vintage Valley Rd Ann Arbor, MI 48105		4. Date of Receipt <u>9/24/2026</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 _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 3 Name & Address: Linh Song 1290 Bardstown Trail Ann Arbor, MI 48105		4. Date of Receipt <u>9/27/2026</u> \$ <u>1500</u>	\$ <u>1500</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			
3. Contribution # 4 Name & Address: John Ivancich 2529 Towner Blvd Ann Arbor, MI 48104		4. Date of Receipt <u>9/27/2026</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			

Page Subtotal

2350

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

Enter this total
on line 3a of
Summary
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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 B-2026-007

2. Committee Name Voters for a Sustainable A2

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)
<p>3. Contribution # 1 Name & Address: Adam Goodman 400 Virginia Ave Ann Arbor, MI 48103</p>		<p>4. Date of Receipt <u>9/27/2026</u></p> <p>\$ <u>1000</u></p>	<p>\$ <u>1000</u></p> <p>Click Here for Memo Itemization</p>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>			
<p>3. Contribution # 2 Name & Address: Michael Staebler 322 East Liberty St Unit 13 Ann Arbor, MI 48104</p>		<p>4. Date of Receipt _____</p> <p>\$ <u>250</u></p>	<p>\$ <u>250</u></p> <p>Click Here for Memo Itemization</p>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>			
<p>3. Contribution # 3 Name & Address: Jeff Hauptman 611 Stratford Dr Ann Arbor, MI 48104</p>		<p>4. Date of Receipt <u>10/1/2026</u></p> <p>\$ <u>2500</u></p>	<p>\$ <u>2500</u></p> <p>Click Here for Memo Itemization</p>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Property Manager</u> Employer <u>Oxford</u> <u>777 E Eisenhower Suite 850, Ann Arbor, MI 48108</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>			
<p>3. Contribution # 4 Name & Address: Jonathan Oberheide 1908 Scottwood Ave Ann Arbor, MI 48104</p>		<p>4. Date of Receipt <u>10/2/2026</u></p> <p>\$ <u>1000</u></p>	<p>\$ <u>1000</u></p> <p>Click Here for Memo Itemization</p>
<p>5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Self</u> <u>1908 Scottwood Ave, Ann Arbor, MI 48104</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>			

Page Subtotal

4750

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

Enter this total
on line 3a of
Summary
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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 B-2026-007

2. Committee Name Voters for a Sustainable A2

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)
<p>3. Contribution # 1</p> <p>4. Date of Receipt <u>10/2/2026</u></p> <p>Name & Address:</p> <p>Michael Staebler 322 E Liberty St Unit 13 Ann Arbor, MI 48103</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Not Employed</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>500</u>	\$ <u>750</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 2</p> <p>4. Date of Receipt <u>10/2/2026</u></p> <p>Name & Address:</p> <p>Carey Jernigan 215 W Liberty St 100 Ann Arbor, MI 48104</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Not Employed</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3</p> <p>4. Date of Receipt <u>10/5/2026</u></p> <p>Name & Address:</p> <p>Peter Honeyman 113 S Fourth Ave Apt 4 Ann Arbor, MI 48104</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Retired</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4</p> <p>4. Date of Receipt <u>10/8/2026</u></p> <p>Name & Address:</p> <p>Ryan McGavock 831 Russett Road Ann Arbor, MI 48103</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	

Page Subtotal

750

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
BUREAU OF ELECTIONS

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ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2026-007

2. Committee Name Voters for a Sustainable A2

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)
<p>3. Contribution # 1 Name & Address: Lisa Disch 441 Hilldale Dr Ann Arbor, MI 48105</p> <p>4. Date of Receipt <u>10/10/2026</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Professor</u> Employer <u>University of Michigan</u> Business Address <u>505 S State St, Ann Arbor, MI 48109</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 2 Name & Address: Daniel Maier 720 W Jefferson St Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/11/2026</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3 Name & Address: Mike Allemang 3465 Vintage Valley Rd Ann Arbor, MI 48105</p> <p>4. Date of Receipt <u>10/14/2026</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Not Employed</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4 Name & Address: Andrew Mortensen 319 S 7th St Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/18/2026</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		Click Here for Memo Itemization	

Page Subtotal

950

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

8800

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

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ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

1. Committee I. D. Number B2026007

BALLOT QUESTION COMMITTEE

2. Committee Name Voters for a Sustainable A2

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: ActBlue 366 Summer St Somerville, MA 02144	4. Purpose: <u>Credit Card Fees</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	10/18 Date of Expenditure	\$ 130.50	\$ 130.50
☐ 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: Stripe 354 Oyster Point Blvd San Francisco, CA 94080	4. Purpose: <u>Credit Card Fees</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	10/18 Date of Expenditure	\$ 194.85	\$ 194.85
☐ 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: Practical Political Data 1197 Prescott Dr East Lansing, MI 48823	4. Purpose: <u>Data</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	10/13 Date of Expenditure	\$ 2500	\$ 2500
☐ 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: Sawicki and Sons	4. Purpose: <u>Yard Signs</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	10/6 Date of Expenditure	\$ 999.05	\$ 999.05
☐ 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

3824.40

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

Enter this total
on Line 8a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B

BALLOT QUESTION COMMITTEE

1. Committee I. D. Number B2026007

2. Committee Name Voters for a Sustainable A2

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: Squarespace 225 Varick St New York, NY 10014	4. Purpose: <u>Website & Domain</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	9/30/2026 Date of Expenditure	\$ 25	\$ 25
☐ 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: Campaign Verify 1215 31st Street NW, # 3554, Washington, DC 20007-9998	4. Purpose: <u>Texting Verification</u> 5. Ballot Proposal: <u>Ann Arbor Proposal E</u>	10/8 Date of Expenditure	\$ 95	\$ 95
☐ 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:	4. Purpose: _____ 5. Ballot Proposal: _____	_____ Date of Expenditure	\$ _____	\$ _____
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: _____ ☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address:	4. Purpose: _____ 5. Ballot Proposal: _____	_____ Date of Expenditure	\$ _____	\$ _____
☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	County: _____ ☐ Support ☐ Oppose ☐ Statewide ☐ Local	Click for Memo Itemization Type		

Subtotal this page

120

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

3944.40

Enter this total
on Line 8a of
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