



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION 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.

1. Committee I.D. Number B-2018-005		3. This Statement covers From: <u>09/28/18</u> To <u>10/21/18</u>	
2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor		4. Committee's Mailing Address PO Box 3497 Ann Arbor, MI 48106 Area Code and Phone: <u>(734) 474-3935</u> <small>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.</small>	
5. Treasurer's Name and Residential Address Brad O'Furey 105 Fieldcrest #203 Ann Arbor, MI 48103 Area Code and Phone <u>(734) 474-3935</u>			
6. Treasurer's Business Address PO Box 3497 Ann Arbor, MI 48106 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: 8a. <input checked="" type="checkbox"/> PRE-ELECTION OR <input type="checkbox"/> POST-ELECTION Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL <input type="checkbox"/> OTHER: _____ Date of Election: <u>11/06/18</u>		8b. <input type="checkbox"/> FEBRUARY STATEMENT <input type="checkbox"/> APRIL STATEMENT <input type="checkbox"/> JULY STATEMENT <input type="checkbox"/> OCTOBER STATEMENT 8c. <input type="checkbox"/> ANNUAL STATEMENT (_____ Coverage Year)	
		8d. <input type="checkbox"/> 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. <input type="checkbox"/> AMENDMENT TO CAMPAIGN STATEMENT (Complete item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)	
		8f. <input type="checkbox"/> 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 (party and to the best of my knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record Keeper Brad O'Furey Type or Print Name		 Signature	

FILED
 COUNTY, MI
 NOV 26 2018
 LAMAR COUNTY REGISTER
 4:58



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

	Column I This Period	Column II Cumulative for Election Cycle
RECEIPTS		
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>14,520.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>0.00</u>	(18.) \$ <u>0.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>14,520.00</u>	(20.) \$ <u>14,520.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>0.00</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>0.00</u>	(21.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>5,393.45</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>0.00</u>	(22.) \$ <u>0.00</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ _____	(23.) \$ _____
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>5,393.45</u>	(24.) \$ <u>5,393.45</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>0.00</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>14,520.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>14,520.00</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>5,393.45</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>9,126.55</u>	*

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: <u>Brad O'Furey</u> <u>105 Fieldcrest #203</u> <u>Ann Arbor, MI 48103</u>		\$ <u>25</u>	\$ <u>25</u>
4. Date of Receipt <u>09/04/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: <u>Leah Gunn</u> <u>2115 Nature Cove Ct., Apt 207</u> <u>Ann Arbor, MI 48104</u>		\$ <u>300</u>	\$ <u>300</u>
4. Date of Receipt <u>09/10/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>2115 Nature Cove Ct., Apt 207 Ann Arbor, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Joan Lowenstein</u> <u>502 Burson Place</u> <u>Ann Arbor, MI 48104</u>		\$ <u>500</u>	\$ <u>500</u>
4. Date of Receipt <u>09/08/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Jaffe Law</u> Business Address <u>535 W. William, Ste 400A Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Harry Cohen</u> <u>3140 W. Dobson PI</u> <u>Ann Arbor, MI 48105</u>		\$ <u>1,000</u>	\$ <u>1,000</u>
4. Date of Receipt <u>09/24/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Psychologist</u> Employer <u>Self</u> Business Address <u>3140 W. Dobson PI Ann Arbor, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$1,825.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **14,520**

Enter this total
on line 3a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future:Voters for a Responsible Ann Arbor

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: Mark Bernstein 2002 Scottwood Ave Ann Arbor, MI 48104 4. Date of Receipt <u>09/25/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Sam Bernstein Law</u> Business Address <u>31731 Northwestern Hwy., #333 Farmington Hills, MI 48334</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>5000</u>	\$ <u>5000</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Janis Bobrin 3456 Vintage Valley Rd Ann Arbor, MI 48105 4. Date of Receipt <u>09/26/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>3456 Vintage Valley Road Ann Arbor, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Donald Kahaian 33330 S. Manor, Apt 101 Farmington, MI 48336 4. Date of Receipt <u>09/28/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: William Kinley 843 Asa Gray Dr. Ann Arbor, MI 48105 4. Date of Receipt <u>10/01/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>the Phoenix Company</u> Business Address <u>2111 Golfside Dr. Ypsilanti, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1,000</u>	\$ <u>1,000</u> Click Here for Memo Itemization

Page Subtotal **\$6,100.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **14,520**

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: John Hieftje 1046 Baldwin Ann Arbor, MI 48104		\$ 100	\$ 100
4. Date of Receipt <u>10/03/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Lecturer</u> Employer <u>Ford School for Public Policy</u> Business Address <u>735 S. State Street Ann Arbor, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Michael Allemang 3465 Vintage Valley Ann Arbor, MI 48105		\$ 100	\$ 100
4. Date of Receipt <u>10/03/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>3456 Vintage Valley Road Ann Arbor, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Elyce Rotella 500 W. Jefferson Ann Arbor, MI 48103		\$ 250	\$ 250
4. Date of Receipt <u>10/06/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation <u>Lecturer</u> Employer <u>University of Michigan</u> Business Address <u>611 Tappan Ave. Ann Arbor, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Dave Kozlowski 2884 E. Eisenhower Pkwy. Ann Arbor, MI 48108		\$ 25	\$ 25
4. Date of Receipt <u>10/09/18</u>		Click Here for Memo Itemization	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$475.00**

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

11,520

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: Robert Thomas 1112 W. Liberty St. Ann Arbor, MI 48103 4. Date of Receipt <u>10/13/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Linh Song 1290 Bardstown Ann Arbor, MI 48105 4. Date of Receipt <u>10/15/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Board Member</u> Employer <u>Ann Arbor District Library</u> Business Address <u>343 South Fifth Ave Ann Arbor 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>5,000</u>	\$ <u>5,000</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Meredith Kahn 817 Pomona Road Ann Arbor, MI 4. Date of Receipt <u>10/15/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Molly Kleinman 1447 Harpst St. Ann Arbor, MI 48104 4. Date of Receipt <u>10/16/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>5</u>	\$ <u>5</u> Click Here for Memo Itemization

Page Subtotal **\$5,130.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **14,520**

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: Kelly Schwartz 109 Revena Blvd. Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/18/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p>	<p>\$ <u>50</u></p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution # 2 Name & Address: Scott Trudeau 526 N. Main St. Ann Arbor, MI 48104</p> <p>4. Date of Receipt <u>10/16/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>50</u></p>	<p>\$ <u>50</u></p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution # 3 Name & Address: Adam Goodman 400 Virginia Ave. Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/17/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Mid-America Real Estate</u> Business Address <u>38500 Woodward Ave Bloomfield Hills, MI 48304</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>250</u></p>	<p>\$ <u>250</u></p> <p>Click Here for Memo Itemization</p>
<p>3. Contribution # 4 Name & Address: Amanda Becker 1619 Waltham Ann Arbor, MI 48103</p> <p>4. Date of Receipt <u>10/17/18</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	<p>\$ <u>25</u></p>	<p>\$ <u>25</u></p> <p>Click Here for Memo Itemization</p>

Page Subtotal **\$375.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **14,520**

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005
2. Committee Name Protect Our Future:Voters for a Responsible Ann Arbor

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: Sandi Smtih 515 N. Ashley Ann Arbor, MI 48104 4. Date of Receipt <u>10/17/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Broker</u> Employer <u>Trillium Real Estate</u> Business Address <u>323 Braun Court Ann Arbor 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200</u>	\$ <u>200</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Mariah Cherem 625 Brooks St. Ann Arbor, MI 48103 4. Date of Receipt <u>10/17/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Julie Weatherbee 837 S. Main St. Ann Arbor, MI 48104 4. Date of Receipt <u>10/18/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>30</u>	\$ <u>30</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: Andrew Nortensen 319 S. 7th Ann Arbor, MI 48103 4. Date of Receipt <u>10/18/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization

Page Subtotal **\$300.00**

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

14,520

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: Karen Hart 1233 Bending Rd. Ann Arbor, MI 48103	4. Date of Receipt <u>10/18/18</u>	\$ <u>10</u>	\$ <u>10</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Martin Whitaker 1449 Morehead Dr. Ann Arbor, MI 48103	4. Date of Receipt <u>10/17/18</u>	\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Susan Wyman 3251 Bluett Rd. Ann Arbor, MI 48105	4. Date of Receipt <u>10/18/18</u>	\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Sandy Aldrich 1454 Macgregor Ln. Ann Arbor, MI 48105	4. Date of Receipt <u>10/18/18</u>	\$ <u>15</u>	\$ <u>15</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$105.00

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

14,520

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number B-2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: Dhama Akmon 1156 Glen Leven Rd. Ann Arbor, MI 48103 4. Date of Receipt <u>10/19/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 2 Name & Address: Kristopher Steinhoff 615 Madison Place Ann Arbor, MI 48103 4. Date of Receipt <u>10/17/18</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>10</u>	\$ <u>10</u> Click Here for Memo Itemization
3. Contribution # 3 Name & Address: Brad O'Furey 105 Fieldcrest St., #203 Ann Arbor, MI 48103 4. Date of Receipt <u>10/18/18</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Great Lakes Strategy</u> Business Address <u>105 Fieldcrest #203 Ann Arbor, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization
3. Contribution # 4 Name & Address: _____ 4. Date of Receipt _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemization

Page Subtotal **\$210.00**

Grand Total of All Schedules 4A
(Complete on last page of Schedule) **14,520**

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 2018-005

2. Committee Name Protect Our Future: Voters for a Responsible Ann Arbor

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: Messenger Printing 20136 Ecorse Road Taylor, MI 48180 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Direct Mail</u> 5. Ballot Proposal: <u>Ann Arbor City Prop A</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	10/04/18 Date of Expenditure	\$ <u>1562.38</u>	\$ <u>1562.38</u> Click for Memo Itemization Type
Expenditure # 2 Name & Address: Messenger Printing 20136 Ecorse Road Taylor, MI 48180 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Direct Mail</u> 5. Ballot Proposal: <u>Ann Arbor City Prop A</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	10/10/18 Date of Expenditure	\$ <u>2037.09</u>	\$ <u>3599.47</u> Click for Memo Itemization Type
Expenditure # 3 Name & Address: Messenger Printing 20136 Ecorse Road Taylor, MI 48180 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Direct Mail</u> 5. Ballot Proposal: <u>Ann Arbor City Prop A</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	10/17/18 Date of Expenditure	\$ <u>792.28</u>	\$ <u>4391.75</u> Click for Memo Itemization Type
Expenditure # 4 Name & Address: Sawicki & Son, Inc. 1521 West Lafayette Detroit, MI 48216 <input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	4. Purpose: <u>Yard Signs</u> 5. Ballot Proposal: <u>Ann Arbor City Prop A</u> County: <u>Washtenaw</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	10/18/18 Date of Expenditure	\$ <u>1001.70</u>	\$ <u>5393.45</u> Click for Memo Itemization Type

Subtotal this page **\$5,393.45**
 Grand Total of Schedules 4B
 (Complete on last page of Schedule) **\$5,393.45**

Enter this total
on Line 8a of
the Summary
Page

