MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED CO CLERK
18TH JUDICIAL
CIRCUIT COURT

2015 MAR 26 P 3:44

BAY COUNTY CLERK
CYNTHIA A. LUCIER
BY

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.

3. This Statement covers From: Dec 9, 2014 To March 20, 2015

1. Committee I.D. Number
150708

2. Committee Name Friends of Essexville-Hampton Public Schools

4. Committee's Mailing Address
1353 N. Jonas Rd
Essexville, MI 48732
Area Code and Phone: 989-322-0916
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
Rodrigo P. Barassi, 23 Burrell Ct., Midland, MI 48640
Area Code and Phone 989 430-9987

6. Treasurer's Business Address
23 BURRELL CT
MIDLAND, MI 48640
Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)
Rodrigo P. Barassi
23 Burrell Ct. MIDLAND, MI 48640
Area Code and Phone 989-430-9987

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:
FEB 24, 2015

8b.
- ☒ FEBRUARY STATEMENT
- ☐ APRIL STATEMENT
- ☐ JULY STATEMENT
- ☐ OCTOBER STATEMENT

8c. ☒ ANNUAL STATEMENT
(2014 - 2015 Coverage Year)
2014 - 2015
DEC March

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 RODRIGO P. BARASSI
Type or Print Name

Signature

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

SUMMARY PAGE
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) $ 5144.00	
b. Unitemized Contributions (less than $20.01 - no Schedule)	(3b.) $ NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) $ 5144.00	(18.) $ 6649.00
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) $ 0	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) $ 5144.00	(20.) $ 6649.00
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) $ 373.43	
b. Unitemized (less than $20.01 each - no Schedule)	(6b.) $ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) $ 373.43	(21.) $ 373.143
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) $ 5,189.85	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) $ 0	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) $ 0	
d. Unitemized Expenditures ($50.00 or less-no Schedule)	(8d.) $ 0	
e. Subtotal of Expenditures	(8e.) $ 5,189.85	(22.) $
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) $ 0	(23.) $
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) $ 5,189.85	(24.) $
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) $ 0	(25.) $
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.)$ 0	
b. Owed to the Committee (Schedule 4E)	(12b.) $ 0	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $ 2,397.79
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + 5144.00
15. SUBTOTAL Add lines 13 and 14	(15.) = 7541.79
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - 5,189.85
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $ 2,351.94

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Charlie Rochow
1545 Primrose, Essexville, MI 48732

4. Date of Receipt 12-10-2014

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Lori Flippin
1035 E. Nebobish, Essexville, MI 48732

4. Date of Receipt 12-10-2014

$ 200.00 $ 240.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Administrator Employer Essexville-Hampton Schools

Business Address 303 Pine St Essexville, Mich 48732

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Magen Samyn
1267 Jodie Lynn Ln, Essexville, MI 48732

4. Date of Receipt 12-10-2014

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Jill Urban
1252 W. Nebobish, Essexville, MI 48732

4. Date of Receipt 12-10-2014

$ 50.00 $ 70.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 450.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Amber Davis-Johnson
1353 N. Jones Rd. Essexville, MI 48732

4. Date of Receipt 12-10-14

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 2
Name & Address:

4. Date of Receipt _____

$ _____ $ _____

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3
Name & Address:
Jill Urban
1252 Nebonish
Essexville, MI 48732

4. Date of Receipt 12-11-2014

$ 20 $ 70

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4
Name & Address:
Renee Arnold
1152 Orchard Rd. Essexville, MI 48732

4. Date of Receipt 12-15-2014

$ 100.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation N/A Employer N/A

Business Address N/A

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

Page Subtotal 170.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Lions Club
Essexville-Hampton

4. Date of Receipt 12-22-2014

$ 500.— $ 500.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Non Profit Employer Lions Club
Business Address Essexville - MI 48732
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Michael/Barbara Kelly
392 Hotchkiss Rd Freeland MI 48623

4. Date of Receipt 12-22-2014

$ 50.00 $ 50.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Todd Rathke
2272 21st St. Bay City, MI 48708

4. Date of Receipt 1-21-2015

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
U.A. Local #85 P.O. Box 6547
Saginaw, MI 48608

4. Date of Receipt 1-21-2015

$ 1,000.00 $ 1,000.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Non/Profit Employer U.A. Local 85
Business Address P.O. Box 6547 Saginaw MI 48608
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 1,650.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Dale/Jean Asel
1217 Harding Rd Essexville, MI 48732

4. Date of Receipt 1-21-2015

$ 100.00 $ 150.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation N/A Employer N/A

Business Address N/A

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Joan Sabourin
335 Sheridan Court, Bay City MI 48708

4. Date of Receipt 1-21-2015

$ 15.00 $ 15.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Historical Press
4659 Dale St, Bay City MI 48706

4. Date of Receipt 1-21-2015

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Shawna/Brett Walraven
2105 Garside Dr. Essexville, MI 48732

4. Date of Receipt 1-21-2015

$ 50.00 $ 70.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal	265.00
Grand Total of All Schedules 4A (Complete on last page of Schedule)	

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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 — **4. Date of Receipt** 1-21-2015

Name & Address:
Kathy/John Kinkema
3598 N. Sadler Dr., Sanford MI 48657

$ 75.00 $ 175.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Counselor Employer N/A Retired

Business Address 3598 N. Sadler Dr. Sanford MI 48657

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 2 — **4. Date of Receipt** 2-2-2015

Name & Address:
Lois Walraven
1908 Woodside Ave, Essexville MI 48732

$ 20.00 $ 20.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 3 — **4. Date of Receipt** 2-2-2015

Name & Address:
Debra Russell
1574 St. Marg's CT, Essexville MI 48732

$ 50.00 $ 50.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 4 — **4. Date of Receipt** 2/2/2015

Name & Address:
Liz Jonkelson
6973 N. Swede. Rhodes, MI 48652

$ 4.00 $ 4.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

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Page Subtotal 149.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Nathan Cholger
2323 Garfield Ave. Bay City MI 48708

4. Date of Receipt 2-2-2015

$ 20.00 $ 20.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 2
Name & Address:
Nancy Frye
312 Oakland Dr. Essexville, MI 48732

4. Date of Receipt 2-2-2015

$ 25.00 $ 25.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 3
Name & Address:
Judy Thomas
278 Kilarnee Beach, Bay City, MI 48706

4. Date of Receipt 2-2-2015

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

---

3. Contribution # 4
Name & Address:
Stacy Maze
1274 S.E. Boutell Rd. Essexville, MI 48708

4. Date of Receipt 2-2-2015

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

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Page Subtotal 65.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Gretchen Walraven
806 Elm St, Essexville MI 48732

4. Date of Receipt 2-2-2015

$ 100.00 $ 140.00

5. If over $100.00 cumulative, please provide:
Occupation Asst Director Employer Bay Arenac ISD
Business Address 4228 2 mile Rd, Bay City MI 48706
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 2
Name & Address:
Tom/Ruth Foret
988 N. Callahan Rd. Essexville, MI 48732

4. Date of Receipt 2-2-2015

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3
Name & Address:
Rene Arnold
1152 Orchard Dr. Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 50 $ 150 -

5. If over $100.00 cumulative, please provide:
Occupation Stay Home Mother Employer N/A
Business Address N/A
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4
Name & Address:
Russell Tanner
1411 Borton Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

Page Subtotal 275.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville Hampton Public Schools

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:
Tri County Building Construction Trades Council Action Fund
P.O. Box 2067 Bay City MI 48707

4. Date of Receipt 2-10-2015

$ 1,000.00 $ 1,000.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Union Trade Employer Tri County Building Trades Council
Business Address P.O. Box 2067 Bay City MI 48707
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Amy Kotewa
1437 N. Jones Rd Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Mark/Sarah Knapp
1559 St. Mary's Ct, Essexville MI 48732

4. Date of Receipt 2-10-2015

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Jill Mulders
71 Cass Ave Rd Munger MI 48747

4. Date of Receipt 2-10-2015

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 1,095.00

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

← Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville Hampton Public Schools

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:
Allen Clemons / Linda Lavigne
1411 Woodside Ave Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 50.00 $ 50.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Matt Cortez
1557 S. Creek Dr. Milford MI 48380

4. Date of Receipt 2-10-2015

$ 50.00 $ 50.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Kathy Kinnunen
3598 N. Sadler Dr
Sanford MI 48657

4. Date of Receipt 2-10-15

$ 50 $ 125

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Counselor Employer Retired

Business Address 3598 N. Sadler Dr. Sanford MI 48657

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Barry Kenniston
1188 N. Farley Essexville MI 48732

4. Date of Receipt 2-10-2015

$ 40.00 $ 40.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 190.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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 — **4. Date of Receipt** 2-10-2015

Name & Address:
Nancy Humphries
2149 4th St Bay City MI 48708

$ 20.00 | $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 — **4. Date of Receipt** 2-10-2015

Name & Address:
Laura Goetz
806 S.E. Boutell Rd, Essexville MI 48732

$ 20.00 | $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 — **4. Date of Receipt** 2-10-2015

Name & Address:
Amy Kulmacz
105 Pine St Essexville, MI 48732

$ 20.00 | $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 — **4. Date of Receipt** 2-10-2015

Name & Address:
Chris Shannon
2215 Carroll Rd, Bay City MI 48708

$ 20.00 | $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 80.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Nikki Barlett
1540 Wedgewood Place Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Janet Schultz
985 W. Borton Rd Essexville, MI 48732

4. Date of Receipt 2-10-2015

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Tanya Boler
700 W. Ohio Bay City MI 48706

4. Date of Receipt 2-10-2015

$ 10.00 $ 10.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Allison Savage
2004 Brentwood Place
Essexville MI 48732

4. Date of Receipt 2-10-2015

$ 20.00 $ 20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 60.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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 — 4. Date of Receipt 2-10-2015

Name & Address:
Essexville-Hampton Education Association
Essexville, MI 48732

$ 200.- $ 200.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Labor Organization Employer E-HEA

Business Address 213 Pine Street Essexville MI 48732

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 — 4. Date of Receipt 2-10-2015

Name & Address:
Rodrigo Barassi
23 Burrell Ct Midland MI 48640

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 2-10-2015

Name & Address:
Karla Lebrenz
730 Hamilton Dr. Frankenmuth MI 48734

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 2-10-2015

Name & Address:
Tony Brey
1382 SE Boutell Rd Essexville MI 48732

$ 25.00 $ 25.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 245.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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:
Renee Arnold
1152 Orchard Rd
Essexville MI 48732

4. Date of Receipt 12-11-2014

$ 20.00 $ 170.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Stay home mother Employer N/A
Business Address N/A
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2
Name & Address:
Julie MacMillan, 3743 Boy Scout Rd
Bay City, MI 48706

4. Date of Receipt 12-11-2014

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3
Name & Address:
Michael Arnold
926 N. Dewitt St. Bay City, MI 48706

4. Date of Receipt 12-11-2014

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4
Name & Address:
Randy Smith
2905 Darby Court Midland MI 48642

4. Date of Receipt 12-11-2014

$ 10.00 $ 10.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 50.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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 — 4. Date of Receipt 12-11-2014
Name & Address:
Lori Flippin
1035 E. Nebobish, Essexville, MI 48732
$ 40.00 $ 240.00
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Administrator Employer Essexville-Hampton Schools
Business Address 303 Pine St. Essexville MI 48732
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 — 4. Date of Receipt 12-11-2014
Name & Address:
Amber Davis Johnson
1353 N. Jones Rd Essexville, MI 48732
$ 50.00 $ 100.00
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Lawyer Employer Bay County
Business Address Washington St. Bay City MI 48708
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 12-11-2014
Name & Address:
Shawna Walraven
2105 Garside Dr
Essexville MI 48732
$ 20.00 $ 70.00
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 12-11-2014
Name & Address:
Gretchen Walraven
806 Elm St, Essexville, MI 48732
$ 40.00 $ 140.00
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Asst Director Employer I.S.D Bay Arenac
Business Address 4228 3 Mile Rd Bay City MI 48706
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 150.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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 **4. Date of Receipt** 12-11-2014

Name & Address:
Paul Dryzga
806 Thompson St Essexville MI 48732

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 **4. Date of Receipt** 12-11-2014

Name & Address:
DAVE ROGERS
4659 Dale St Bay City MI 48708

$ 100.00 $ 100.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 **4. Date of Receipt** 12-11-2014

Name & Address:
Dale Asel
1217 Harding Rd
Essexville MI 48732

$ 50.00 $ 150.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Retired Employer N/A

Business Address N/A

Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 **4. Date of Receipt** _____

Name & Address:

$ _____ $ _____

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 250.00

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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 — 4. Date of Receipt 2/20/15
Name & Address:
Mark Knapp
1559 St. Mary's Court, Essexville, MI
$ 5 $ 55.00
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 — 4. Date of Receipt 2/20/15
Name & Address:
Michael Rowley
1561 Wedgewood Place, Essexville MI
$ 100.- $ 100.-
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 2/20/15
Name & Address:
David Lovell
1840 N. Seo Boutell Rd Essexville MI
$ 100.- $ 100.-
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 2/20/15
Name & Address:
Joel Bergande
1565 Primrose Ln
$ 100.- $ 100.-
Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Page Subtotal 305.-

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

Enter this total on line 3a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150708
2. Committee Name Friends of Essexville-Hampton Public Schools

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 — 4. Date of Receipt 2/20/15
Name & Address:
John Martin
215 Sharpe St Essexville MI

$ 100.— $ 100.—

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 2 — 4. Date of Receipt 2/20/15
Name & Address:
Brad & Terri Wood
814 S. Green Rd Bay City MI 48708

$ 500. $ 500.—

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Retired Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 3 — 4. Date of Receipt 2/26/15
Name & Address:
Jerry Sonalski
1140 N. Pine Rd, Essexville MI

$ 100.— $ 100.—

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

3. Contribution # 4 — 4. Date of Receipt 2/26/15
Name & Address:
Bay City Labor Management Cooperation
1300 W. Thomas St. Bay City MI

$ 500.— $ 500.—

5. If over $100.00 cumulative, please provide:
Occupation Labor Union Employer B.C. Labor Management Cooperation
Business Address 1300 W. Thomas St. Bay City MI
Type of Contribution: [X] Direct [ ] Loan from a person [ ] Fund Raiser

Click Here for Memo Itemization

Page Subtotal	1200.—
Grand Total of All Schedules 4A (Complete on last page of Schedule)	6,649.—

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 150708
2. Committee Name Friends of Essexville Hampton Piblic Schools

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
		3-10-15		

Expenditure # 1
Name & Address:
United States
Postal Service
Essexville, MI 48732

4. Purpose: Postage
5. Ballot Proposal: Bond Issue
County: Bay County
☒ Support ☐ Oppose
☐ Statewide ☐ Local

12-12-14 Date of Expenditure $ 362.60 ✓ $

Click for Memo Itemization Type

☐ Check box if expenditure is payment of debt or obligation reported on previous statement
☐ Fund Raiser

Expenditure # 2
Name & Address:
Victory Store. Com
Paid via Amber Davis Johnson
1353 N. Jones Rd
Essexville MI 48732

4. Purpose: Signs (lawn) advertisement
5. Ballot Proposal: Bond Issue
County: Bay County
☒ Support ☐ Oppose
☐ Statewide ☐ Local

1.27.15 Date of Expenditure $ 810.43 ✓ $

Click for Memo Itemization Type

☐ Check box if expenditure is payment of debt or obligation reported on previous statement
☐ Fund Raiser

Expenditure # 3
Name & Address:
F. P. Horak
401 Saginaw St.
Bay City, MI 48708

4. Purpose: Mailing
5. Ballot Proposal: Bond Issue
County: Bay County
☒ Support ☐ Oppose
☐ Statewide ☐ Local

2-11-15 Date of Expenditure $ 1,473.18 ✓ $

Click for Memo Itemization Type

☐ Check box if expenditure is payment of debt or obligation reported on previous statement
☐ Fund Raiser

Expenditure # 4
Name & Address:
MLIVE, Bay City Times
Bay City, MI 48708

4. Purpose: Advertizing
5. Ballot Proposal: Bond Issue
County: Bay County
☒ Support ☐ Oppose
☐ Statewide ☐ Local

2/20/15 Date of Expenditure $ 163.46 ✓ $

Click for Memo Itemization Type

☐ Check box if expenditure is payment of debt or obligation reported on previous statement
☐ Fund Raiser

Subtotal this page 2809.67

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

Enter this total on Line 8a of the Summary

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150702
2. Committee Name Friends of Essexville Public Schools

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: Innovative Media Design Bay City MI 48708 ☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	4. Purpose: Design 5. Ballot Proposal: Bond Issue County: Bay County ☒ Support ☐ Oppose ☐ Statewide ☐ Local	2/20/15 Date of Expenditure	$ 1,113.00 ✓ Click for Memo Itemization Type	$
Expenditure # 2 Name & Address: Bell Smith Bay City, MI 48708 ☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	4. Purpose: Layout 5. Ballot Proposal: Bond Issue County: Bay County ☒ Support ☐ Oppose ☐ Statewide ☐ Local	2/20/15 Date of Expenditure	$ 100.- ✓ Click for Memo Itemization Type	$
Expenditure # 3 Name & Address: Mclaren Health Bay City MI 48708 ☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	4. Purpose: Copies 5. Ballot Proposal: Bond Issue County: Bay Co. ☒ Support ☐ Oppose ☐ Statewide ☐ Local	2/20/15 Date of Expenditure	$ 163.91 ✓ Click for Memo Itemization Type	$
Expenditure # 4 Name & Address: United Bay Com. C. U. 1309 N. Lincoln Ave Bay City, MI 48708 ☐ Check box if expenditure is payment of debt or obligation reported on previous statement ☐ Fund Raiser	4. Purpose: Bank Fee 5. Ballot Proposal: Bond Issue County: Bay County ☒ Support ☐ Oppose ☐ Statewide ☐ Local	2/20/15 Date of Expenditure	$ 4.- ✓ Click for Memo Itemization Type	$

Subtotal this page 1380.91

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

Enter this total on Line 8a of the Summary

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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
		3-10		

Expenditure # 1

Name & Address:
MEGAN Samyn
(Reimbursement Facebook Ad)
1267 Jodie Lynn Ln
Essexville MI 48732

4. Purpose: Facebook Ad

5. Ballot Proposal: Bond Issue

2/28/14 $ 54.27 $ ____ Date of Expenditure

Click for Memo Itemization Type

County: Bay

☐ Check box if expenditure is payment of debt or obligation reported on previous statement

☒ Support ☐ Oppose

☐ Fund Raiser ☐ Statewide ☐ Local

Expenditure # 2

Name & Address:
F. P. Horacks
401 Saginaw Rd
Bay City, MI 48708

4. Purpose: Postage / Mailing

5. Ballot Proposal: Bond Issue

2/18/14 $ 945.- $ ____ Date of Expenditure

Click for Memo Itemization Type

County: Bay

☐ Check box if expenditure is payment of debt or obligation reported on previous statement

☒ Support ☐ Oppose

☐ Fund Raiser ☐ Statewide ☐ Local

Expenditure # 3

Name & Address:

4. Purpose:

5. Ballot Proposal:

____ $ ____ $ ____ Date of Expenditure

Click for Memo Itemization Type

County:

☐ Check box if expenditure is payment of debt or obligation reported on previous statement

☐ Support ☐ Oppose

☐ Fund Raiser ☐ Statewide ☐ Local

Expenditure # 4

Name & Address:

4. Purpose:

5. Ballot Proposal:

____ $ ____ $ ____ Date of Expenditure

Click for Memo Itemization Type

County:

☐ Check box if expenditure is payment of debt or obligation reported on previous statement

☐ Support ☐ Oppose

☐ Fund Raiser ☐ Statewide ☐ Local

Subtotal this page	999.27
Grand Total of Schedules 4B (Complete on last page of Schedule)	5189.85

Enter this total on Line 8a of the Summary

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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

1. Committee I. D. Number 150708

2. Committee Name Friends of Essexville-Hampton Public Schools

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 373.43	8. Cumulative for Election Cycle (Through date in Item 5)

Contribution #1

Name & Address:
Amber Johnson
1353 N. Jones Rd
Essexville MI 48732

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**

$ 10.46 $ 10.46

Description ENVELOPES

5. DATE OF RECEIPT: 12-09-14

Click Here for Memo Itemization

6. VENDOR NAME & ADDRESS:
MEIJER
595 N. Pine Rd
BAY CITY, MI 48708

Contribution #2

Name & Address:
John Bellsmith
1001 Center Ave # 207
Bay City, MI 48708

If over $100.00 cumulative, please provide:

Occupation

Employer Name & Address:
BellSmith Designs
1001 Center Ave # 207
Bay City, MI 48708

☐ 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**

$ 302.50 $ 302.50

Description Graphic Design

5. DATE OF RECEIPT: 12-20-2014

Click Here for Memo Itemization

6. VENDOR NAME & ADDRESS:
John Bellsmith
1001 Center Ave #207
Bay City, MI 48708

Contribution #3

Name & Address:
Lori Flippin
1035 E. Nebobish
Essexville, MI 48732

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**

$ 60.47 $ 60.47

Description

5. DATE OF RECEIPT:

Click Here for Memo Itemization

6. VENDOR NAME & ADDRESS:

Page Subtotal	373.43
Grand Total of all Schedules 4-IK (Complete on last page of Schedule)	373.43

Enter this total on line 6a of Summary Page