



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE  
COVER PAGE**

RECEIVED

AUG 30 2018

INGHAM COUNTY CLERK  
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: 7/22/18 To 8/27/18

1. Committee I.D. Number 46722

4. Committee's Mailing Address 979 Longfellow Dr.  
East Lansing, MI 48823

2. Committee Name Committee to  
Protect East Lansing's Future

Area Code and Phone: (517) 402-2025  
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 Douglas Jester  
2204 MAC Avenue  
East Lansing, MI 48823  
Area Code and Phone (517) 337-7527

6. Treasurer's Business Address  
5 Lakes Energy  
115 Allegan, Suite 710  
Lansing, MI 48933  
Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address  
(If the committee has a Designated Record Keeper)  
Allyse Anderson  
979 Longfellow Dr.  
East Lansing, MI 48823  
Area Code and Phone (517) 402-2025

8. TYPE OF STATEMENT:  
8a.  PRE-ELECTION  
OR  
 POST-ELECTION  
Pre-Election or Post-Election Statement relates to:  
 PRIMARY  
 GENERAL  
 SCHOOL  
 SPECIAL  
 OTHER: Ballot Question  
Date of Election: 08/07/18

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 Allyse Anderson, Allyse Anderson  
Type or Print Name Signature



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 46722  
 2. Committee Name Committee to Protect East Lansing's Future

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>2,925.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>2,925.00</u>	(18.) \$ <u>16,215.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
5. <b>TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3 c + Line 4)	(5.) \$ <u>2,925.00</u>	(20.) \$ <u>16,215.00</u>
<b>IN-KIND CONTRIBUTIONS</b>		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>98.39</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. <b>TOTAL IN-KIND CONTRIBUTIONS</b> (Add Line 6a + Line 6b)	(7.) \$ <u>98.39</u>	(21.) \$ <u>1,227.22</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>6,662.30</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>-</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>-</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>-</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>-</u>	(22.) \$ <u>-</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>-</u>	(23.) \$ <u>-</u>
10. <b>TOTAL EXPENDITURES</b> (Add Line 8e + Line 9)	(10.) \$ <u>6,662.30</u>	(24.) \$ <u>15,807.68</u>
<b>IN-KIND EXPENDITURES</b>		
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ <u>-</u>	(25.) \$ <u>-</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>-</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>4,781.40</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>2,925.00</u>	
15. <b>SUBTOTAL</b> Add lines 13 and 14	(15.) = <u>7,706.40</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>6,662.30</u>	
17. <b>ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>1,044.10</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 46722  
2. Committee Name Committee to Protect East Lansing's Future

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>Plunkett Cooney</u> <u>38505 Woodward Avenue</u> <u>Bloomfield Hills, MI 48304</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>07/24/18</u>	\$ <u>2,500.00</u>	\$ <u>2,500.00</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			
3. Contribution # 2 Name & Address: <u>Sector, James H.</u> <u>605 Butterfield Dr.</u> <u>East Lansing, MI 48823</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>07/24/18</u>	\$ <u>150.00</u>	\$ <u>170.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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 # 3 Name & Address: <u>Anderson, David J.</u> <u>525 Moorland Dr.</u> <u>East Lansing, MI 48823</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>08/01/18</u>	\$ <u>100.00</u>	\$ <u>100.00</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			
3. Contribution # 4 Name & Address: <u>Revitte, John L.</u> <u>919 Wick Ct.</u> <u>East Lansing, MI 48823</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>07/31/18</u>	\$ <u>100.00</u>	\$ <u>100.00</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			

Page Subtotal \$ 2,850.00

Grand Total of All Schedules 4A  
(Complete on last page of Schedule) \$ 2,925.00

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 46722  
2. Committee Name Committee to Protect East Lansing's Future

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>Archer, Edmund K.</u> <u>1381 Red Leaf Lane</u> <u>East Lansing, MI 48823</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>08/01/18</u>	\$ <u>25.00</u>	\$ <u>25.00</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			
3. Contribution # 2 Name & Address: <u>Brighton, Abigail C.</u> <u>5714 Lake Ridge Dr.</u> <u>East Lansing, MI 48823</u> <small>Click Here for Memo Itemization</small>	4. Date of Receipt <u>08/01/18</u>	\$ <u>50.00</u>	\$ <u>50.00</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			
3. Contribution # 3 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			
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			

Page Subtotal \$ 75.00

Grand Total of All Schedules 4A (Complete on last page of Schedule) \$ 2,925.00

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I. D. Number 46722  
2. Committee Name Committee to Protect East Lansing's Future

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: <u>Mark Meadows</u> <u>244 Lexington Ave.</u> <u>East Lansing, MI 48823</u> If over \$100.00 cumulative, please provide:  Occupation:  Employer Name & Address:   <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Facebook Ads</u> 5. DATE OF RECEIPT: <u>8/16/18</u> <a href="#">Click Here for Memo Itemization</a> 6. VENDOR NAME & ADDRESS:	\$ <u>98.39</u>	\$ <u>98.39</u>
Contribution #2 Name & Address:  If over \$100.00 cumulative, please provide:  Occupation:  Employer Name & Address:   <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ <a href="#">Click Here for Memo Itemization</a> 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____
Contribution #3 Name & Address:  If over \$100.00 cumulative, please provide:  Occupation:  Employer Name & Address:   <input type="checkbox"/> Fund Raiser	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ <a href="#">Click Here for Memo Itemization</a> 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____

Page Subtotal

98.39

Grand Total of all Schedules 4-K  
(Complete on last page of Schedule)

98.39

Enter this total on  
line 6a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES  
SCHEDULE 4B  
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 46722  
2. Committee Name Committee to Protect East Lansing's Future

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
<b>Expenditure # 1</b> Name & Address: <u>Scott Hughes</u> <u>223 Leslie St.</u> <u>Lansing, MI 48912</u>	4. Purpose: <u>Political Consulting</u> 5. Ballot Proposal: <u>EL Income Tax</u>	<u>07/24/18</u>	<u>\$ 1,080.00</u>	<u>\$ 1,805.00</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Ingham</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
<b>Expenditure # 2</b> Name & Address: <u>Keystone Millbrook</u> <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, MI 48837</u>	4. Purpose: <u>Printing &amp; Mailing</u> 5. Ballot Proposal: <u>EL Income Tax</u>	<u>07/21/18</u>	<u>\$ 183.89</u>	<u>\$ 7,383.13</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Ingham</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
<b>Expenditure # 3</b> Name & Address: <u>Keystone Millbrook</u> <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, MI 48837</u>	4. Purpose: <u>Postage</u> 5. Ballot Proposal: <u>EL Income Tax</u>	<u>07/27/18</u>	<u>\$ 1,091.71</u>	<u>\$ 8,474.84</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Ingham</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
<b>Expenditure # 4</b> Name & Address: <u>Rivard Creative</u> <u>3631 Bdero Dr.</u> <u>East Lansing, MI 48823</u>	4. Purpose: <u>Design Services</u> 5. Ballot Proposal: <u>EL Income Tax</u>	<u>08/02/18</u>	<u>\$ 400.00</u>	<u>\$ 400.00</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Ingham</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		

Subtotal this page \$ 3,355.60  
 Grand Total of Schedules 4B (Complete on last page of Schedule) \$ 6,662.30

Enter this total on Line 8a of the Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES  
SCHEDULE 4B  
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 46722

2. Committee Name Committee to Protect East Lansing's Future

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
<p>Expenditure # 1 Name &amp; Address: <u>Harper's Restaurant</u> <u>131 Albert</u> <u>East Lansing, MI 48823</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Watch Party Food</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<u>08/07/18</u>	<u>\$ 510.30</u>	<u>\$ 810.95</u>
<p>Expenditure # 2 Name &amp; Address: <u>Sawicki &amp; Sons</u> <u>1521 W. Lafayette</u> <u>Detroit, MI 48216</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Yard Signs</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<u>08/09/18</u>	<u>\$ 590.42</u>	<u>\$ 1,401.87</u>
<p>Expenditure # 3 Name &amp; Address: <u>Shanna Draheim</u> <u>359 University Street</u> <u>East Lansing, MI 48823</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Facebook + Google Ads</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<u>08/08/18</u>	<u>\$ 1,045.53</u>	<u>\$ 1,447.40</u>
<p>Expenditure # 4 Name &amp; Address: <u>Ingham County Clerk</u> <u>341 S. Jefferson</u> <u>Mason, MI 48854</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Late Contribution Report Fee</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<u>08/14/18</u>	<u>\$ 525.00</u>	<u>\$ 2,000.00</u>

Subtotal this page \$ 2,671.25

Grand Total of Schedules 4B  
(Complete on last page of Schedule) \$ 6,662.30

Enter this total  
on Line 8a of  
the Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES  
SCHEDULE 4B  
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 46722  
2. Committee Name Committee to Protect East Lansing's Future

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
<p>Expenditure # 1 Name &amp; Address: <u>STRIPE</u> <u>510 Townsend St.</u> <u>San Francisco, CA 94103</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Online Payment Processing</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<p><u>08/03/18</u></p> <p>Date of Expenditure</p>	<p><u>\$ 135.65</u></p>	<p><u>\$ 135.65</u></p>
<p>Expenditure # 2 Name &amp; Address: <u>Comcast Spotlight</u> <u>12964 Collections Center Dr.</u> <u>Chicago, IL 60693</u></p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose: <u>Video Spot</u></p> <p>5. Ballot Proposal: <u>EL Income Tax</u></p> <p>County: <u>Ingham</u></p> <p><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<p><u>08/22/18</u></p> <p>Date of Expenditure</p>	<p><u>\$ 499.80</u></p>	<p><u>\$ 499.80</u></p>
<p>Expenditure # 3 Name &amp; Address:</p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose:</p> <p>5. Ballot Proposal:</p> <p>County:</p> <p><input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<p>Date of Expenditure</p>	<p>\$</p>	<p>\$</p>
<p>Expenditure # 4 Name &amp; Address:</p> <p><input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>4. Purpose:</p> <p>5. Ballot Proposal:</p> <p>County:</p> <p><input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local</p>	<p>Date of Expenditure</p>	<p>\$</p>	<p>\$</p>

Subtotal this page \$ 635.45  
Grand Total of Schedules 4B  
(Complete on last page of Schedule) \$ 6,662.30

Enter this total on Line 8a of the Summary Page