



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.

3. This Statement covers From: 09/08/24 To: 10/20/24

1. Committee I.D. Number 98675

4. Committee's Mailing Address PO BOX 393
Clarkston, MI 48347

2. Committee Name
Committee to Keep Clarkston Charming

Area Code and Phone: 248-330-4488
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
Joe Luginiski
81 N. Main Street, Clarkston, MI 48346

Area Code and Phone 248-330-4488

OAKLAND CO. CLERK/ELECTIONS
REC'D 2024 OCT 28 AM 1:08

6. Treasurer's Business Address
81 N. Main Street
Clarkston, MI 483465

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

Area Code and Phone 248-330-4488

Area Code and Phone

8. TYPE OF STATEMENT:

8a. PRE- ELECTION
OR
 POST- ELECTION

Pre-Election or Post-Election Statement relates to:

PRIMARY
 GENERAL
 SCHOOL
 SPECIAL
 OTHER: _____

Date of Election:

11/5/24

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

JOE LUGINSKI
Type or Print Name

Signature



**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 98675
2. Committee Name COMMITTEE TO KEEP CLAWSON CHAMMING

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>2550.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>2550.00</u>	(18.) \$ <u>2550.00</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>2550.00</u>	(20.) \$ <u>2550.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>1554.91</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>1554.91</u>	(21.) \$ <u>1554.91</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>2244.23</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ <u>0</u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ <u>0</u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ <u>0</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>2244.23</u>	(22.) \$ <u>2244.23</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ <u>0</u>	(23.) \$ <u>0</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>2244.23</u>	(24.) \$ <u>2244.23</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</u>	(25.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + <u>2550.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>2550.00</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>2244.23</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>305.77</u>	*

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



ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 98675

2. Committee Name COMMITTEE TO KEEP CLARKSTON CHAMMERS

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>Haven, ERIC</u> <u>62 ROBERTSON CT.</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>10/7/24</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>MLOUSKI, Melissa</u> <u>81 N. MAIN STREET</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>10/7/24</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>SCHOEDEL, Frank</u> <u>22 N. HOLCOMB RD</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>10/7/24</u>	\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>HARGIS, Steve</u> <u>55 N MAIN STREET</u> <u>CLARKSTON, MI 48346</u>	4. Date of Receipt <u>10/7/24</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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

350.00

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

Clear Form

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 98675
2. Committee Name Committee to Keep Clarkston Charming

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>Meyland, Scott</u> <u>100 N. Main Street</u> <u>Clarkston MI 48346</u>	4. Date of Receipt <u>10/1/24</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>Sowles, Robert</u> <u>38 N. Holcomb</u> <u>Clarkston MI 48346</u>	4. Date of Receipt <u>9/13/24</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>Schoebel, Frank H</u> <u>22 N. Holcomb Road</u> <u>Clarkston MI 48346</u>	4. Date of Receipt <u>9/16/24</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>Radcliff, Jennifer</u> <u>33 N. Main Street</u> <u>Clarkston MI 48346</u>	4. Date of Receipt <u>10/20/24</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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

500.00

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

Enter this total
on line 3a of
Summary
Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 98675
2. Committee Name Committee to Keep Clarkston Charming

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: Wayne, Diane 49. N. main Street Clarkston MI 48346	4. Date of Receipt <u>9/8/24</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: Maon, Nancy 80 N. main Street Clarkston, MI 48346	4. Date of Receipt <u>9/8/24</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: LUGINSKI, JOE 81 N. main Street Clarkston MI 48346	4. Date of Receipt <u>9/8/24</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>CLOUDFLARE</u> Business Address <u>101 TOWNSEND ST, SAN FRANCISCO, CA, 94107</u> 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: Markwalder, James C. 91 N. main Street Clarkston, MI 48346	4. Date of Receipt <u>9/17/24</u>	\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>PROSTEP</u> Business Address <u>100 W Big Beaver Ste 200 Troy MI 48064</u> 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

800.00

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

Enter this total
on line 3a of
Summary
Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 98675
2. Committee Name Committee To Keep Clarkston *CHAMML*

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>KNAPP, KEVIN L.</u> <u>62 N. MAIN STREET</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>9/18/24</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Writer</u> Employer <u>OUTPOST COMMUNICATIONS</u> Business Address <u>62 N. MAIN, CLARKSTON MI 48346</u> 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: <u>PATERCSAK, LISA</u> <u>68 BUFFALO ST.</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>9/26/24</u>	\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DIV SALE & MKTG</u> Employer <u>EYREX CORP</u> Business Address <u>2500 CENTERPOINT HWY, PONTIAC MI 48341</u> 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: <u>WINT, Nancy Lee</u> <u>6101 OVERLOOK</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>9/13/24</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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: <u>HIMBURG, MARY</u> <u>68 N. HOLCOMB</u> <u>CLARKSTON MI 48346</u>	4. Date of Receipt <u>9/13</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> 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

700.00

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

Enter this total
on line 3a of
Summary
Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 98675
2. Committee Name Committee to Keep Clarkston Charming

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>Quisenberry, Theodore</u> <u>29 S. HOLCOMB RD</u> <u>CLARKSTON, MI 48340</u> 4. Date of Receipt <u>9/8/24</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>n/a</u> Business Address <u>na</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u> 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: <input 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: _____ 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
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

200.00

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

2550.00

Enter this total
on line 3a of
Summary
Page



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

1. Committee I. D. Number 98075
2. Committee Name COMMITTEE TO KEEP CLARKSTON CHARMING

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>SCHOEBEL, Frank H</u> <u>22 N. HOLCOMB RD</u> <u>CLARKSTON MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer Name & Address: <u>n/a</u> <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>PRINTING</u> 5. DATE OF RECEIPT: <u>10/4/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>OFFICE DEPOT</u> <u>7151 DIXIE HWY</u> <u>CLARKSTON MI 48346</u>	\$ <u>91.71</u>	\$ <u>91.71</u>
Contribution #2 Name & Address: <u>Wlanski, Melissa</u> <u>81 N. Main</u> <u>CLARKSTON MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer Name & Address: <u>n/a</u> <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>PRINTING</u> 5. DATE OF RECEIPT: <u>10/17/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>The Print Shop</u> <u>5911 Dixie Hwy</u> <u>CLARKSTON MI 48346</u>	\$ <u>84.80</u>	\$ <u>84.80</u>
Contribution #3 Name & Address: <u>Werner, Derek</u> <u>3 N. HOLCOMB</u> <u>CLARKSTON MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer Name & Address: <u>n/a</u> <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>PO BOX</u> 5. DATE OF RECEIPT: <u>9/8/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>US Post Office</u> <u>6799 S Main Street</u> <u>CLARKSTON MI 48347</u>	\$ <u>32.00</u>	\$ <u>32.00</u>

Page Subtotal

208.51

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

Enter this total on
line 6a of
Summary Page



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

1. Committee I. D. Number 98675
2. Committee Name Committee to keep Clarkston Chamber

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)
<p>Contribution #1 Name & Address: <u>Sans, Margaret</u> <u>76 N. Main Street</u> <u>Clarkston MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>Cold Affairs</u> Employer Name & Address: <u>Walmart</u> <u>702 SW 8th Street</u> <u>Bentonville AR 72712</u> <input type="checkbox"/> Fund Raiser</p>	<p>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>News paper ad</u> 5. DATE OF RECEIPT: <u>9/19/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>VIEW NEWSPAPER GROUP (Clarkston News)</u> <u>1521 Inlay City Rd</u> <u>Lapeer MI 48446</u></p>	<p>\$ <u>1127.00</u> \$ <u>1127.00</u></p>	
<p>Contribution #2 Name & Address: <u>Catallo, Cara</u> <u>10 BUFFALO</u> <u>CLARKSTON MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer Name & Address: <u>n/a</u> <input type="checkbox"/> Fund Raiser</p>	<p>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>WEBSITE</u> 5. DATE OF RECEIPT: <u>9/10/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>SQUARE SPACE</u> <u>225 VARICK ST. 12TH FL</u> <u>NEW YORK, NY 10014</u></p>	<p>\$ <u>59.00</u> \$ <u>59.00</u></p>	
<p>Contribution #3 Name & Address: <u>PATERCSAK, Lisa</u> <u>08 BUFFALO</u> <u>CLARKSTON MI 48346</u> If over \$100.00 cumulative, please provide: Occupation <u>DV SALES & MKTE</u> Employer Name & Address: <u>EXPRESS CORP</u> <u>2500 CENTER POINT PKWY</u> <u>PONTIAC MI 48341</u> <input type="checkbox"/> Fund Raiser</p>	<p>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>LABELS</u> 5. DATE OF RECEIPT: <u>9/15/24</u> Click Here for Memo Itemization 6. VENDOR NAME & ADDRESS: <u>OFFICE DEPOT</u> <u>7151 DIXIE HWY</u> <u>CLARKSTON MI 48346</u></p>	<p>\$ <u>17.49</u> \$ <u>17.49</u></p>	

Page Subtotal

1203.49

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

Enter this total on
line 6a of
Summary Page



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

1. Committee I. D. Number 98675
2. Committee Name COMMITTEE TO KEEP CLARKSTON CHARMING

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)
<p>Contribution #1 Name & Address: <u>Werner, Derek</u> <u>3 N. HOLCOMB</u> <u>CLARKSTON MI 48346</u></p> <p>If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer Name & Address: <u>n/a</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>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</p> <p>Description <u>office supply</u></p> <p>5. DATE OF RECEIPT: <u>9/13/24</u></p> <p>6. VENDOR NAME & ADDRESS: <u>OFFICE DEPOT</u> <u>7151 DIXIE HWY</u> <u>CLARKSTON MI 48346</u></p>	<p>\$ <u>7.91</u></p>	<p>\$ <u>39.91</u></p>
<p>Contribution #2 Name & Address: <u>MANWALDER, JAMES C.</u> <u>91 N. MAIN STREET</u> <u>CLARKSTON MI 48346</u></p> <p>If over \$100.00 cumulative, please provide: Occupation <u>sales</u> Employer Name & Address: <u>PROSTEP</u> <u>100 W. BIG BEAVER STE 200</u> <u>TROY MI 48064</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>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</p> <p>Description <u>printing</u></p> <p>5. DATE OF RECEIPT: <u>9/23/24</u></p> <p>6. VENDOR NAME & ADDRESS: <u>AMERICAN SPEEDY PRINTING</u> <u>917 N. MAIN STREET</u> <u>ROCHESTER MI 48307</u></p>	<p>\$ <u>135.00</u></p>	<p>\$ <u>135.00</u></p>
<p>Contribution #3 Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>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</p> <p>Description _____</p> <p>5. DATE OF RECEIPT: _____</p> <p>6. VENDOR NAME & ADDRESS:</p>	<p>\$ _____</p>	<p>\$ _____</p>

Page Subtotal

142.91

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

1554.91

Enter this total on
line 6a of
Summary Page



ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 93675
2. Committee Name Committee to keep Clarkston Charming

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 & Address: The Print Shop 5911 Dixie Hwy Clarkston MI 48346</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>printing</u></p> <p>5. Ballot Proposal: <u>Clarkston Charter Amendment</u></p> <p>County: <u>Oakland</u></p> <p><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local</p> <p>Click for Memo Itemization Type <u>The Print Shop</u></p>	<u>9/13/24</u>	<u>\$ 158.42</u>	<u>\$ 158.42</u>
<p>Expenditure # 2 Name & Address: The Print Shop 5911 Dixie Hwy Clarkston MI 48346</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>printing</u></p> <p>5. Ballot Proposal: <u>Clarkston Charter Amendment</u></p> <p>County: <u>Oakland</u></p> <p><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local</p> <p>Click for Memo Itemization Type <u>The Print Shop</u></p>	<u>9/18/24</u>	<u>\$ 286.20</u>	<u>\$ 444.62</u>
<p>Expenditure # 3 Name & Address: The Print Shop 5911 Dixie Hwy Clarkston MI 48346</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>printing</u></p> <p>5. Ballot Proposal: <u>Clarkston Charter Amend.</u></p> <p>County: <u>Oakland</u></p> <p><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local</p> <p>Click for Memo Itemization Type <u>The Print Shop</u></p>	<u>10/11/24</u>	<u>\$ 178.08</u>	<u>\$ 622.70</u>
<p>Expenditure # 4 Name & Address: US Postal Service 5799 S Main Street Clarkston MI 48347</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>stamps</u></p> <p>5. Ballot Proposal: <u>Clarkston Charter Amend.</u></p> <p>County: <u>Oakland</u></p> <p><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local</p> <p>Click for Memo Itemization Type <u>USPS</u></p>	<u>9/13/24</u>	<u>\$ 292.00</u>	<u>\$ 292.00</u>

Subtotal this page

914.70

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

Enter this total on Line 8a of the Summary Page



ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 98675
2. Committee Name Committee to Keep Clarkston Charming

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 & Address: <u>GOOD GUYS SIGNS</u> <u>5002 N. HOWARD AVE</u> <u>TAMPA FL 33603</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>Amend Clarkston Charter</u></p> <p>County: <u>Oakland</u></p> <p><input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local</p>	<p><u>9/13/24</u> Date of Expenditure</p>	<p><u>\$ 1329.53</u> <u>\$ 1329.53</u></p> <p>Click for Memo Itemization Type <u>GOOD GUY SIGNS</u></p>	
<p>Expenditure # 2 Name & 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>Click for Memo Itemization Type</p>	
<p>Expenditure # 3 Name & 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>Click for Memo Itemization Type</p>	
<p>Expenditure # 4 Name & 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>Click for Memo Itemization Type</p>	

Subtotal this page

1329.53

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

2244.23

Enter this total
on Line 8a of
the Summary
Page