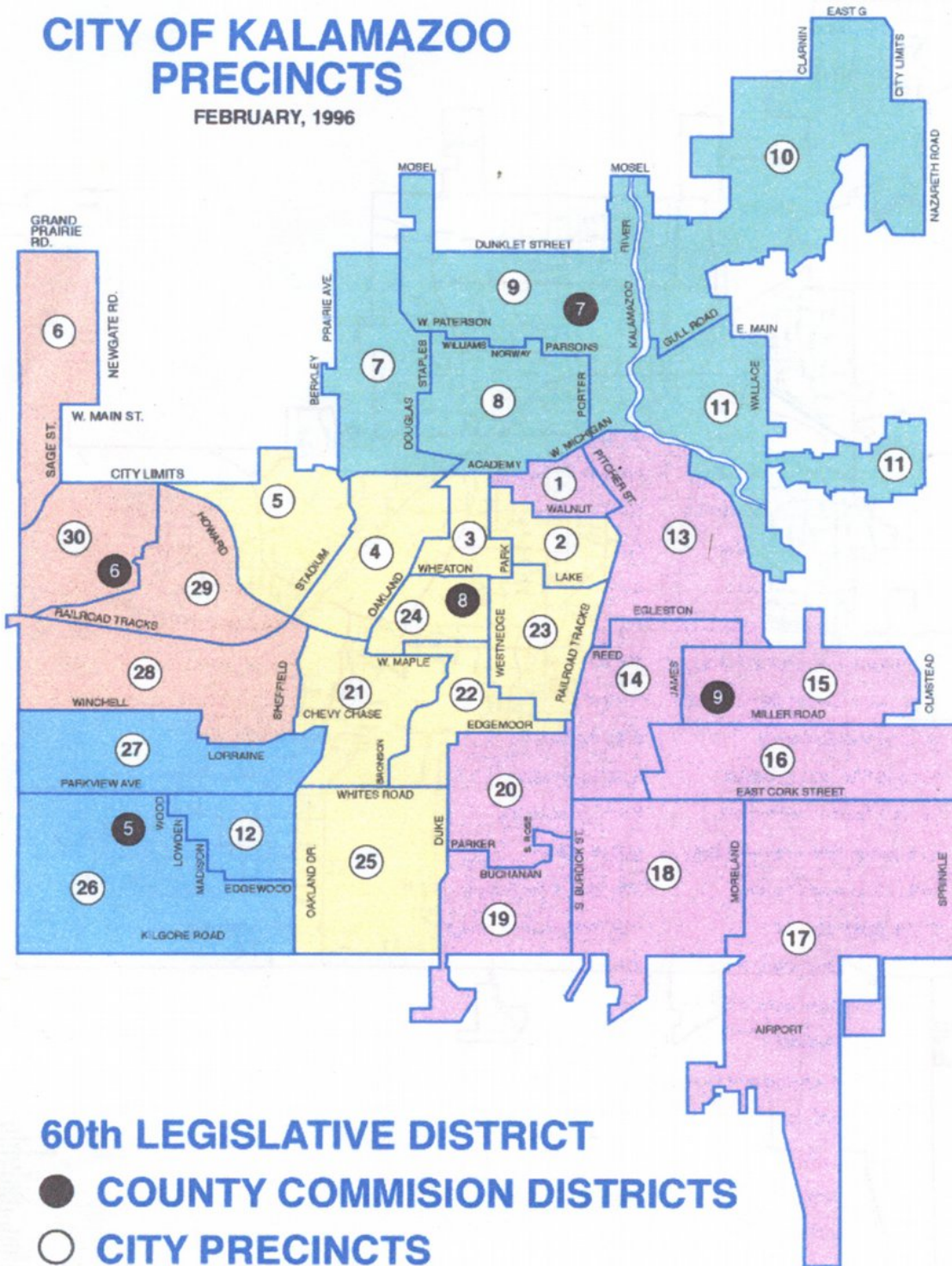


CITY OF KALAMAZOO PRECINCTS

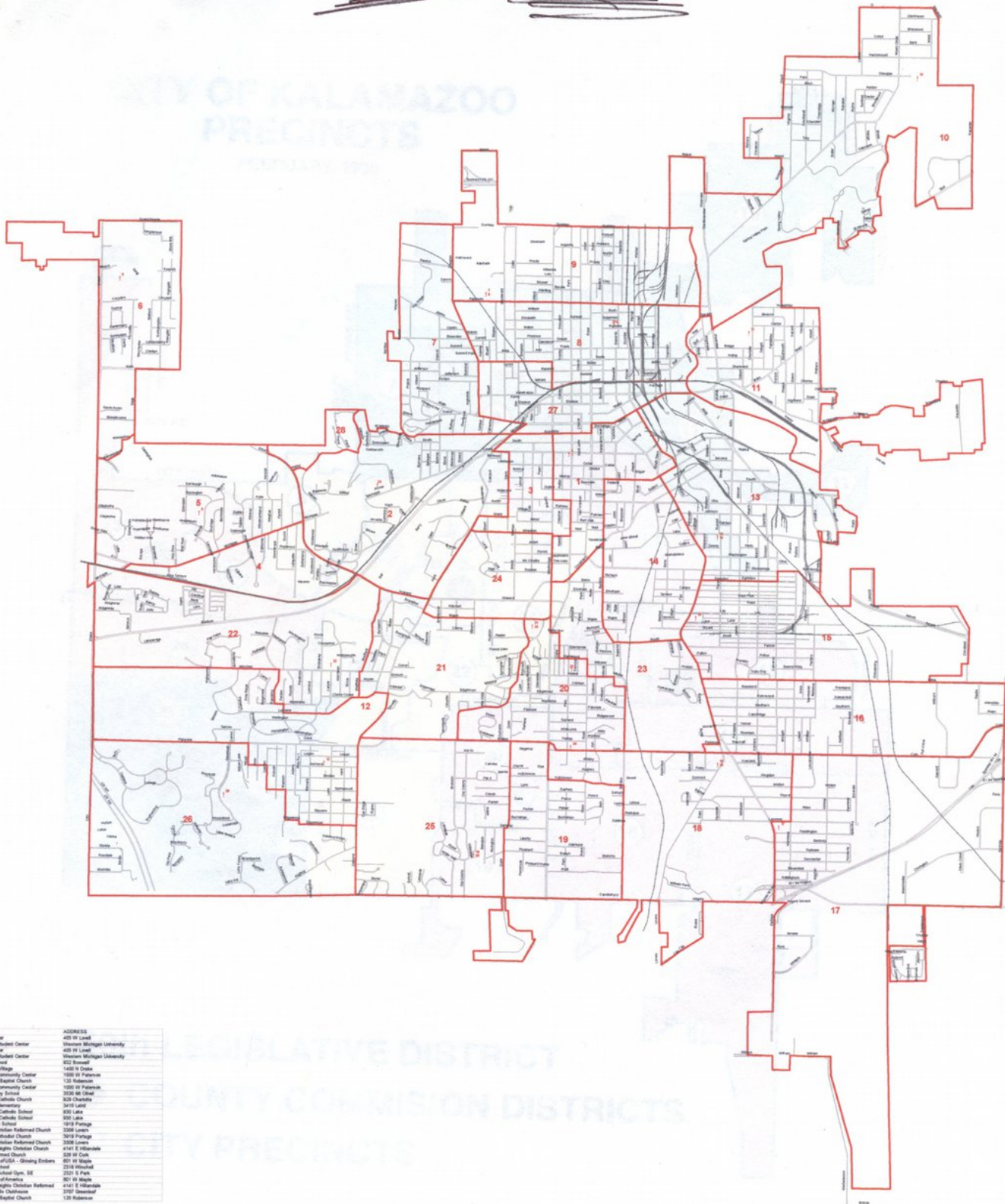
FEBRUARY, 1996



60th LEGISLATIVE DISTRICT

- COUNTY COMMISSION DISTRICTS
- CITY PRECINCTS

City of Kalamazoo, Michigan Polling Locations



PRECINCT	LOCATION	ADDRESS
1	Care Center	405 W Leard
2	University Student Center	Western Michigan University
3	Care Center	405 W Leard
4	University Student Center	Western Michigan University
5	Armeda School	833 Rowell
6	Friendship Village	1435 N Cedar
7	Odegens Community Center	1050 W Paterson
8	Mount Zion Baptist Church	120 Ridgeway
9	Odegens Community Center	1050 W Paterson
10	Sammy Valley School	2828 Mt Cleo
11	St. Mary's Catholic Church	828 Charlotte
12	Stamand Elementary	3415 Leard
13	St. Joseph Catholic School	892 Lake
14	St. Joseph Catholic School	892 Lake
15	Washington School	1913 Portage
16	Methodist Christian Reformed Church	3308 Leard
17	Methodist Church	3413 Portage
18	Methodist Christian Reformed Church	3308 Leard
19	Southern Heights Christian Church	4141 E Milanale
20	Unity Reformed Church	248 W Cook
21	Old Grove of U.S. - Dining Embers	801 W Maple
22	Woodland School	2316 Woodland
23	Woodland School Gym, SE	2323 W Park
24	St. Brigid of America	801 W Maple
25	Southern Heights Christian Reformed	4141 E Milanale
26	Parkview Hills Childcare	3707 Greenwood
27	Mount Zion Baptist Church	120 Ridgeway



This map is from the City of Kalamazoo's GIS and not all surveyor accuracy. The City of Kalamazoo assumes no legal liability for the information contained on this map.

Legend

- Polling Location
- ▬ Street
- ▬ Parkways
- ▬ City Voting Precinct
- ▬ Road

0 1,250 2,500 5,000 7,500 10,000 Feet

Date: February 2010



**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: 1/1/2011 To 10/23/2011

4. Committee's Mailing Address
Same

Area Code and Phone 269 599 4578
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.

1. Committee I.D. Number
54627

2. Committee Name
The Kalamazoo Coalition for Pragmatic Cannabis Laws

5. Treasurer's Name and Residential Address
Louis Stocking
1002 E. Vine St
Kalamazoo, Mich 49001

Area Code and Phone

6. Treasurer's Business Address
Same

Area Code and Phone

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

Area Code and Phone

8. TYPE OF STATEMENT:

8a. PRE-ELECTION
OR
8b. POST-ELECTION

Pre-Election or Post-Election Statement relates to:

PRIMARY GENERAL
 SCHOOL SPECIAL

Date of Election:
Nov 8, 2011

8c. ANNUAL STATEMENT
(___ Coverage Year)

8d. QUALIFICATION
OR
 NON-QUALIFICATION STATEMENT (Required of State-wide Ballot Question Committees Only)

Date of Qualification or Non-Qualification:

8e. AMENDMENT TO CAMPAIGN STATEMENT
(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)

8f. DISSOLUTION OF COMMITTEE
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 Louis Stocking Type or Print Name

[Signature] Signature

Date 10/17/11



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 54627

2. Committee Name Kalamazoo Coalition for Pragmatic Cannabis Laws

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
3. Contributions		
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$ <u>4031</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$ <u>4031</u>	(18.) \$ <u>9131</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$ <u>-</u>	(19.) \$ <u>-</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ <u>4031.00</u>	(20.) \$ <u>9131</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ <u>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>0</u>	(21.) \$ <u>377.41</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ <u>4031</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>4031</u>	(22.) \$ <u>9131</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>4031</u>	(24.) \$ <u>9131</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>4031</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>4031</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) - <u>4031</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>0</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 54627
2. Committee Name Kalamazoo Coalition for Pragmatic Cannabis Laws

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>Ream, Charles</u> <u>1818 Packard St</u> <u>Ann Arbor, MI 48104</u>			
4. Date of Receipt <u>4/11/2011</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Public School teacher</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>1200</u>	\$ <u>1700</u>
		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Ream, Charles</u> <u>1818 Packard St</u> <u>Ann Arbor, MI 48104</u>			
4. Date of Receipt <u>4/23/2011</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>School teacher</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>1400.00</u>	\$ <u>3100</u>
		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Ream, Charles</u> <u>1818 Packard St</u> <u>Ann Arbor, MI 48104</u>			
4. Date of Receipt <u>10/21/2011</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Public School Teacher</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>731</u>	\$ <u>4031</u>
		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: _____			
4. Date of Receipt _____			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ _____	\$ _____
		Click Here for Memo Itemization	

Page Subtotal 4031
Grand Total of All Schedules 4A (Complete on last page of Schedule) 4031

Enter this total on line 3a of Summary Page



**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number 54627
2. Committee Name Kalamazoo Coalition for Pragmatic Cannabis Laws

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: <u>Sawicki and Son</u> <u>1521 W. Lafayette</u> <u>Detroit, Mich</u> <u>48216</u>	4. Purpose: <u>signs</u> 5. Ballot Proposal: <u>Lowest Law Enforcement Priority</u>	<u>10/21/2011</u>	<u>\$ 731.00</u>	<u>\$731.00</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>Kalamazoo</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: <u>City of Kalamazoo</u> <u>241 W. South St</u> <u>Kalamazoo, Mi</u> <u>49007</u>	4. Purpose: <u>Freedom of Information Act Request</u> 5. Ballot Proposal: <u>K-200 L.L.E.P.</u>	<u>4/12/11</u>	<u>\$ 57.38</u>	<u>\$57.38</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>Kalamazoo</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: <u>Louis Stacking</u> <u>1002 E. Vine St</u> <u>Kalamazoo, Mich</u>	4. Purpose: <u>Subcontract to pay for all supplies and petitioners during 2011.</u> 5. Ballot Proposal: <u>Kalamazoo L.L.E.P.</u>	<u>2011</u>	<u>\$3242.62</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>Kalamazoo</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address:	4. Purpose: _____ 5. Ballot Proposal: _____ \$ _____ \$ _____ Date of Expenditure _____ County: _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input type="checkbox"/> Local	Click for Memo Itemization Type		
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser				

Subtotal this page # 4031
Grand Total of Schedules 4B (Complete on last page of Schedule) # 4031

Enter this total on Line 8a of the Summary Page