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**From:** [electionselearning@michigan.gov](mailto:electionselearning@michigan.gov)

**Sent:** Thursday, November 5, 2020 10:02:59 PM (UTC+00:00) Monrovia, Reykjavik

**To:** [compliance@careinactionvotes.org](mailto:compliance@careinactionvotes.org)

**Subject:** Independent Expenditures Report for State Filers

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Hello ,

We have received your 'Independent Expenditures - State Filers' form.

If you have any questions, please contact the State of Michigan at 517-335-0170 or

[disclosure@michigan.gov](mailto:disclosure@michigan.gov)

**User submitted data**

<b>The Independent Expenditure was to:</b>	Support a Candidate
<b>Candidate's Name</b>	Mari Manoogian
<b>Office Sought</b>	State House
<b>County</b>	
<b>District/Jurisdiction</b>	House District 40
<b>Ballot Question Description</b>	
<b>Ballot Designation (If issued by Michigan Board of State Canvassers)</b>	
<b>Name</b>	Care In Action
<b>Address</b>	45 Broadway, Ste. 320 New York, NY 10006
<b>Same as above</b>	Yes
<b>Contact Name</b>	
<b>Contact Address</b>	
<b>Email Address</b>	<a href="mailto:compliance@careinactionvotes.org">compliance@careinactionvotes.org</a>

**1. Name**

**1. Address**

**1. Employer Name and Address**

**1. Occupation**

**2. Add additional contributions**

**2. Name**

**2. Address**

**2. Occupation**

**2. Employer Name and Address**

**3. Add additional contributions**

**3. Name**

**3. Address**

**3. Occupation**

**3. Employer Name and Address**

**4. Add additional contributions**

**4. Name**

**4. Address**

**4. Occupation**

**4. Employer Name and Address**

**5. Add additional contributions**

**5. Name**

**5. Address**

**5. Occupation**

**5. Employer Name and Address**

**Add additional contributions**

**1. Name**

Sasha Cohen

**1. Address**

835 Edgebrook Drive, Apt 214, Dekalb, IL  
60115

**1. Date of Expenditure / Purchase Date (mm-dd-yyyy)**

10-23-2020

**1. Dollar Amount of Expenditure (xxxx.xx)**

5.37

**1. Purpose of Expenditure**

Estimated Cost for Phone Banking

**2. Add additional expenditures**

Yes

**2. Name**

Sharmane Anderson

**2. Address**

109 N Meadow Dr, Manning, SC 29102

**2. Date of Expenditure / Purchase Date**

10-23-2020

**2. Dollar Amount of Expenditure**

23.03

**2. Purpose of Expenditure**

Estimated Cost for Phone Banking

<b>3. Add additional expenditures</b>	Yes
<b>3. Name</b>	Tamara Swain
<b>3. Address</b>	305 North Rodney Street, Wilmington, DE 19805
<b>3. Date of Expenditure / Purchase Date</b>	10-23-2020
<b>3. Dollar Amount of Expenditure</b>	54.09
<b>3. Purpose of Expenditure</b>	Estimated Cost for Phone Banking
<b>4. Add additional expenditures</b>	Yes
<b>4. Name</b>	Tracee Miller
<b>4. Address</b>	20512 Warrington, Detroit, MI 48222
<b>4. Date of Expenditure / Purchase Date</b>	10-23-2020
<b>4. Dollar Amount of Expenditure</b>	46.33
<b>4. Purpose of Expenditure</b>	Estimated Cost for Phone Banking
<b>5. Add additional expenditures</b>	Yes
<b>5. Name</b>	Veronica Alemu
<b>5. Address</b>	5559 South University Avenue, Apt 2, Chicago, IL 60637
<b>5. Date of Expenditure / Purchase Date</b>	10-23-2020
<b>5. Dollar Amount of Expenditure</b>	151.23
<b>5. Purpose of Expenditure</b>	Estimated Cost for Phone Banking
<b>Add additional expenditures</b>	
<b>Please check this box to certify your report:</b>	Certified