

DelRio, Irene (MDOS)

From: electionselearning@michigan.gov
Sent: Tuesday, October 18, 2022 3:48 PM
To: DelRio, Irene (MDOS)
Cc: SOS, Disclosure
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

User submitted data

Section

The Independent Expenditure was to: Support a Candidate

Candidate's Name MIKE WEBBER

Office Sought SENATE

County

District/Jurisdiction 9

Ballot Question Description

**Ballot Designation (If issued by Michigan Board of State
Canvassers)**

Name AMERICANS FOR PROSPERITY

Address 1310 N COURTHOUSE RD
STE 700
ARLINGTON, VA 22201

Same as above Yes

Contact Name

Contact Address

Email Address RJENTGENS@STANDTOGETHER.ORG

1. Name

1. Address

1. Employer Name and Address

1. Occupation

2. Add additional contributions

No

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

POINT1

1. Address

1015 Atlantic Boulevard, #157, Atlantic Beach, FL
32233

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

10-17-2022

1. Dollar Amount of Expenditure (xxxx.xx)

4983.80

1. Purpose of Expenditure

MAILER PRINTING AND PRODUCTION

2. Add additional expenditures

Yes

2. Name

UNITED STATES POSTAL SERVICE

2. Address

470 L'Enfant Plaza SW STE 604, Washington, DC 20024

2. Date of Expenditure / Purchase Date

10-17-2022

2. Dollar Amount of Expenditure	3334.42
2. Purpose of Expenditure	MAILER POSTAGE
3. Add additional expenditures	No
3. Name	
3. Address	
3. Date of Expenditure / Purchase Date	
3. Dollar Amount of Expenditure	
3. Purpose of Expenditure	
4. Add additional expenditures	
4. Name	
4. Address	
4. Date of Expenditure / Purchase Date	
4. Dollar Amount of Expenditure	
4. Purpose of Expenditure	
5. Add additional expenditures	
5. Name	
5. Address	
5. Date of Expenditure / Purchase Date	
5. Dollar Amount of Expenditure	
5. Purpose of Expenditure	
Add additional expenditures	
Please check this box to certify your report:	Certified