

## SOS, Disclosure

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**From:** electionselearning@michigan.gov  
**Sent:** Wednesday, October 26, 2022 4:45 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](mailto:disclosure@michigan.gov)

### User submitted data

#### Section

<b>The Independent Expenditure was to:</b>	Support a Candidate
<b>Candidate's Name</b>	MICHELLE SMITH
<b>Office Sought</b>	HOUSE
<b>County</b>	
<b>District/Jurisdiction</b>	58
<b>Ballot Question Description</b>	
<b>Ballot Designation (If issued by Michigan Board of State Canvassers)</b>	
<b>Name</b>	AMERICANS FOR PROSPERITY
<b>Address</b>	1310 N COURTHOUSE RD STE 700 ARLINGTON, VA 22201
<b>Same as above</b>	Yes
<b>Contact Name</b>	
<b>Contact Address</b>	
<b>Email Address</b>	RJENTGENS@STANDTOGETHER.ORG
<b>1. Name</b>	
<b>1. Address</b>	
<b>1. Employer Name and Address</b>	
<b>1. Occupation</b>	

<b>2. Add additional contributions</b>	No
<b>2. Name</b>	
<b>2. Address</b>	
<b>2. Occupation</b>	
<b>2. Employer Name and Address</b>	
<b>3. Add additional contributions</b>	
<b>3. Name</b>	
<b>3. Address</b>	
<b>3. Occupation</b>	
<b>3. Employer Name and Address</b>	
<b>4. Add additional contributions</b>	
<b>4. Name</b>	
<b>4. Address</b>	
<b>4. Occupation</b>	
<b>4. Employer Name and Address</b>	
<b>5. Add additional contributions</b>	
<b>5. Name</b>	
<b>5. Address</b>	
<b>5. Occupation</b>	
<b>5. Employer Name and Address</b>	
<b>Add additional contributions</b>	
<b>1. Name</b>	POINT1
<b>1. Address</b>	1015 Atlantic Boulevard, #157, Atlantic Beach, FL 32233
<b>1. Date of Expenditure / Purchase Date (mm-dd-yyyy)</b>	10-26-2022
<b>1. Dollar Amount of Expenditure (xxxx.xx)</b>	2851.07
<b>1. Purpose of Expenditure</b>	MAILER PRINTING AND PRODUCTION
<b>2. Add additional expenditures</b>	Yes
<b>2. Name</b>	UNITED STATES POSTAL SERVICE
<b>2. Address</b>	470 L'Enfant Plaza SW STE 604, Washington, DC 20024
<b>2. Date of Expenditure / Purchase Date</b>	10-26-2022
<b>2. Dollar Amount of Expenditure</b>	1695.48
<b>2. Purpose of Expenditure</b>	MAILER POSTAGE
<b>3. Add additional expenditures</b>	No
<b>3. Name</b>	

**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