SOS, Disclosure

From: electionselearning@michigan.gov
Sent: Saturday, October 29, 2022 6:20 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: Oppose a Ballot Question

Candidate's Name

Office Sought

County

District/Jurisdiction

Ballot Question Description Proposal 3

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

Name Monica Cai

Address 7950 Hallie Dr

Same as above Yes

Contact Name

Contact Address

Email Address monicade3@gmail.com

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 Buildasign.com 1. Address 7950 Hallie Dr 1. Date of Expenditure / Purchase Date (mm-dd-yyyy) 10-05-2022 1. Dollar Amount of Expenditure (xxxx.xx) 416.58 1. Purpose of Expenditure Car magnets 2. Add additional expenditures No 2. Name 2. Address 2. Date of Expenditure / Purchase Date 2. Dollar Amount of Expenditure 2. Purpose of Expenditure 3. Add additional expenditures 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 |
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