

DelRio, Irene (MDOS)

From: electionselearning@michigan.gov
Sent: Monday, November 7, 2022 10:54 AM
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	Tudor Dixon
Office Sought	Governor
County	Virginia
District/Jurisdiction	
Ballot Question Description	
Ballot Designation (If issued by Michigan Board of State Canvassers)	
Name	American Majority Action, Inc.
Address	P.O. Box 309 Purcellville, VA 20134
Same as above	Yes
Contact Name	
Contact Address	
Email Address	kelly@am-action.org
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

RumbleUp LLC

1. Address

2101 L Street NW
Washington DC 20037

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

11-05-2022

1. Dollar Amount of Expenditure (xxxx.xx)

15565.17

1. Purpose of Expenditure

Text Messaging Service

2. Add additional expenditures

Yes

2. Name

RumbleUp LLC

2. Address

2101 L Street NW
Washington DC 20037

2. Date of Expenditure / Purchase Date

11-06-2022

2. Dollar Amount of Expenditure

1874.60

2. Purpose of Expenditure

Text Messaging Service

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