

DelRio, Irene (MDOS)

From: electionselearning@michigan.gov
Sent: Saturday, November 5, 2022 9:18 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	Rachel Hood
Office Sought	State Rep District 76
County	State Rep District 76
District/Jurisdiction	State Rep District 76

Ballot Question Description

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

Name	Red, Wine and Blue
Address	3675 Warrensville Center Road #202359, Cleveland, OH, 44120
Same as above	Yes
Contact Name	
Contact Address	
Email Address	rwb@leftledger.co

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 META
- 1. Address 15830 S Park Blvd, Shaker Heights, OH, 44120
- 1. Date of Expenditure / Purchase Date (mm-dd-yyyy) 10-26-2022
- 1. Dollar Amount of Expenditure (xxxx.xx) 413.82
- 1. Purpose of Expenditure Digital Advertising
- 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