

DelRio, Irene (MDOS)

From: electionselearning@michigan.gov
Sent: Tuesday, November 8, 2022 11:17 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:	Oppose a Candidate
Candidate's Name	Gretchen Whitmer
Office Sought	Governor
County	
District/Jurisdiction	
Ballot Question Description	
Ballot Designation (If issued by Michigan Board of State Canvassers)	
Name	Women Speak Out PAC
Address	2776 S. Arlington Mill Dr. # 803, Arlington, VA 22206
Same as above	Yes
Contact Name	
Contact Address	
Email Address	jgross@sbaproflife.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	CampaignHQ
1. Address	PO Box 257 Brooklyn, IA 52211
1. Date of Expenditure / Purchase Date (mm-dd-yyyy)	11-04-2022
1. Dollar Amount of Expenditure (xxxx.xx)	1196.06
1. Purpose of Expenditure	Phone calls
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