

From: boeeasupport@zohomail.com
To: [DelRio, Irene \(MDOS\)](#)
Cc: [SOS, Disclosure](#)
Subject: Independent Expenditures Report for State Filers
Date: Saturday, October 5, 2024 10:15:36 PM

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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	STEVE FRISBIE
Office Sought	STATE HOUSE
County	
District/Jurisdiction	44
Ballot Question Description	
Ballot Designation (If issued by Michigan Board of State Canvassers)	
Name	AMERICANS FOR PROSPERITY
Address	4201 WILSON BLVD STE 1000 ARLINGTON, VA 22203
Same as above	Yes
Contact Name	
Contact Address	
Email Address	MCLANCY@STANDTOGETHER.ORG
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

AMERICANS FOR PROSPERITY

1. Address

4201 WILSON BLVD
STE 1000
ARLINGTON, VA 22203

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

10-03-2024

1. Dollar Amount of Expenditure (xxxx.xx)

100.00

1. Purpose of Expenditure

CANVASSING

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