

From: boeeasupport@zohomail.com
To: [DelRio, Irene \(MDOS\)](#)
Cc: [SOS, Disclosure](#)
Subject: Independent Expenditures Report for State Filers
Date: Monday, October 21, 2024 2:08:36 PM

CAUTION: This is an External email. Please send suspicious emails to abuse@michigan.gov

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 | RYLEE LINTING |
| Office Sought | STATE HOUSE |
| County | |
| District/Jurisdiction | 27 |
| 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

PEOPLE WHO THINK

1. Address

4522 LA-22
STE. 7
MANDEVILLE, LA 70471

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

10-19-2024

1. Dollar Amount of Expenditure (xxxx.xx)

4016.84

1. Purpose of Expenditure

MAILER PRINTING AND
PRODUCTION

2. Add additional expenditures

Yes

2. Name

UNITED STATES POSTAL SERVICE

| | |
|--|--|
| 2. Address | 470 L'ENFANT PLAZA SW STE 604 WASHINGTON, DC 20024 |
| 2. Date of Expenditure / Purchase Date | 10-19-2024 |
| 2. Dollar Amount of Expenditure | 1638.72 |
| 2. Purpose of Expenditure | MAILER POSTAGE |
| 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 |