

From: notifications@mailier.zohocreatormail.com
To: [DelRio, Irene \(MDOS\)](#)
Cc: [SOS, Disclosure](#)
Subject: Independent Expenditures Report for State Filers
Date: Friday, October 25, 2024 7:18:56 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	Robert Wojtowicz
Office Sought	STATE HOUSE
County	
District/Jurisdiction	61
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 4250 HIGHWAY 22, STE 7, MANDEVILLE,
LOUISIANA 70471

**1. Date of Expenditure / Purchase Date (mm-dd-
yyyy)** 10-23-2024

1. Dollar Amount of Expenditure (xxxx.xx) 3867.36

1. Purpose of Expenditure MAILER PRODUCTION & PRINTING

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 10-23-2024
2. Dollar Amount of Expenditure 1548.14
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