

From: boeeasupport@zohomail.com
To: [DelRio, Irene \(MDOS\)](#)
Cc: [SOS, Disclosure](#)
Subject: Independent Expenditures Report for State Filers
Date: Monday, July 29, 2024 1:47:07 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

Derrick Jackson

Office Sought

Sheriff

County

Washtenaw County

District/Jurisdiction

Ballot Question Description

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

Name

EMGAGE ACTION, INC.

Address

11555 Heron Bay Blvd
Suite 200
Coral Springs, FL 33076

Same as above

Yes

Contact Name

Contact Address

Email Address

sqahmad@emgageaction.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

Hess Printing

1. Address

201 Elm
Suite A
Wyandotte, MI 48192

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

07-20-2024

1. Dollar Amount of Expenditure (xxxx.xx)

184.44

1. Purpose of Expenditure

Printing Endorsement
Literature

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