

---

**From:** [electionselearning@michigan.gov](mailto:electionselearning@michigan.gov)

**Sent:** Sunday, October 25, 2020 10:01:05 PM (UTC+00:00) Monrovia, Reykjavik

**To:** [compliance@careinactionvotes.org](mailto:compliance@careinactionvotes.org)

**Subject:** Independent Expenditures Report for State Filers

**CAUTION: This is an External email. Please send suspicious emails to [abuse@michigan.gov](mailto: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](mailto:disclosure@michigan.gov)

**User submitted data**

**The Independent Expenditure was to:** Support a Candidate

**Candidate's Name** Cynthia Neeley

**Office Sought** State House

**County**

**District/Jurisdiction** 34

**Ballot Question Description**

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

**Name** Care In Action, Inc.

**Address** 45 Broadway, Ste. 320  
New York, NY 10006

**Same as above** Yes

**Contact Name**

**Contact Address**

**Email Address** [compliance@careinactionvotes.org](mailto:compliance@careinactionvotes.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**

Sharmane Anderson

**1. Address**

109 N Meadow Dr, Manning, SC 29102

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

10-15-2020

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

115.00

**1. Purpose of Expenditure**

Phonebanking 10/15-10/22

**2. Add additional expenditures**

Yes

**2. Name**

Precision Strategies

**2. Address**

901 New York Ave NW, Suite 530, Washington, DC  
20001

**2. Date of Expenditure / Purchase Date**

10-20-2020

**2. Dollar Amount of Expenditure**

187.50

<b>2. Purpose of Expenditure</b>	Social Media/Email
<b>3. Add additional expenditures</b>	Yes
<b>3. Name</b>	Deliver Strategies, LLC
<b>3. Address</b>	P.O. Box 100970 Arlington, VA 22210
<b>3. Date of Expenditure / Purchase Date</b>	10-26-2020
<b>3. Dollar Amount of Expenditure</b>	5390.54
<b>3. Purpose of Expenditure</b>	Mail
<b>4. Add additional expenditures</b>	Yes
<b>4. Name</b>	The Movement Cooperative
<b>4. Address</b>	East 27th Street, Greeley Square Station, PO Box 20063, New York, NY 10001-9998
<b>4. Date of Expenditure / Purchase Date</b>	10-21-2020
<b>4. Dollar Amount of Expenditure</b>	423.06
<b>4. Purpose of Expenditure</b>	Text message sends
<b>5. Add additional expenditures</b>	Yes
<b>5. Name</b>	Justworks, Inc.
<b>5. Address</b>	130 7th Ave #249, New York, NY 10011
<b>5. Date of Expenditure / Purchase Date</b>	10-15-2020
<b>5. Dollar Amount of Expenditure</b>	374.00
<b>5. Purpose of Expenditure</b>	Employer taxes and fees
<b>Add additional expenditures</b>	No
<b>Please check this box to certify your report:</b>	Certified