
From: electionselearning@michigan.gov
Sent: Thursday, November 5, 2020 9:47:35 PM (UTC+00:00) Monrovia, Reykjavik
To: compliance@careinactionvotes.org
Subject: Independent Expenditures Report for State Filers

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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

The Independent Expenditure was to:	Support a Candidate
Candidate's Name	Kyra Harris Bolden
Office Sought	State House
County	
District/Jurisdiction	House District 35
Ballot Question Description	
Ballot Designation (If issued by Michigan Board of State Canvassers)	
Name	Care In Action
Address	45 Broadway, Ste. 320 New York, NY 10006
Same as above	Yes
Contact Name	
Contact Address	
Email Address	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

Evelyn Bauman

1. Address

2306 E. Ashwood Ct., Bloomington, IN
47401

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

10-23-2020

1. Dollar Amount of Expenditure (xxxx.xx)

168.14

1. Purpose of Expenditure

Estimated Cost for Phone Banking

2. Add additional expenditures

Yes

2. Name

Hassaan Chaudhary

2. Address

2775 Shore Parkway, Apt 1H, Brooklyn, NY
11223

2. Date of Expenditure / Purchase Date

10-23-2020

2. Dollar Amount of Expenditure

18.67

2. Purpose of Expenditure	Estimated Cost for Phone Banking
3. Add additional expenditures	Yes
3. Name	Kyra Assibey-Bonsu
3. Address	4120 Camino Dr, #2F, Plano, TX 75074
3. Date of Expenditure / Purchase Date	10-23-2020
3. Dollar Amount of Expenditure	307.08
3. Purpose of Expenditure	Estimated Cost for Phone Banking
4. Add additional expenditures	Yes
4. Name	Lisa Kouassi
4. Address	1710 Rutland Pass Dr., Lawrenceville, GA 30045
4. Date of Expenditure / Purchase Date	10-23-2020
4. Dollar Amount of Expenditure	133.74
4. Purpose of Expenditure	Estimated Cost for Phone Banking
5. Add additional expenditures	Yes
5. Name	MJ Harvey
5. Address	5123 S Ingleside Ave, Unit 3, Chicago, IL 60615
5. Date of Expenditure / Purchase Date	10-23-2020
5. Dollar Amount of Expenditure	22.07
5. Purpose of Expenditure	Estimated Cost for Phone Banking
Add additional expenditures	
Please check this box to certify your report:	Certified