

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Dr. Raul Ruiz for Congress			
ADDRESS (number and street) PO Box 3433			
CITY, STATE, and ZIP CODE Palm Desert CA 92261			
2. NAME OF CANDIDATE Dr. Raul Ruiz	3. OFFICE SOUGHT (State and District) House CA 36		4. FEC IDENTIFICATION NUMBER C00502575
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Javier R. Rios MD 9939 Magnolia Ave Riverside CA 92503-3528		Name of Employer California & Arizona Medical Corp Transaction ID : C10624124 Occupation Physician	Date (month, day, year) 06/04/2016 Amount 700.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Javier R. Rios MD 9939 Magnolia Ave Riverside CA 92503-3528		Name of Employer California & Arizona Medical Corp Transaction ID : C10624125 Occupation Physician	Date (month, day, year) 06/04/2016 Amount 300.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
SIGNATURE (optional) John Pinkney <div style="text-align: right;">[Electronically Filed]</div>		DATE 06/06/2016	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 07/2011)