10/29/2020 10 : 16

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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.

NAME OF COMMITTEE IN KATKO FOR							
ADDRESS (number and stre		ON ST					
	STE 115						
CITY		STATE	2	ZIP COE	ÞΕ		
ALEXANDRIA		VA		2231	4-5404		
2. NAME OF CANDIDATE		1	3. OFFICE SOUGHT (State and District)			4. FEC IDENTIFICATION NUMBER	
KATKO, JOHN, M,	,		House		NY 24	C00556365	
5. IS THIS AN AMENDMENT?	NO, THIS IS A N	NEW FILING	YES, IT AMEND	OS THE	NOTICE FILED ON	/	/
A. FULL NAME KOLEGO, TRE	VOR, , ,		Name of Employ		GROUP	Date (month, day, year)	Amount
MAILING ADDRESS 217 VIRGINIA AVE					10/27/2020	1000.00	
				D : 639	992420C33934B8E		
CITY	STATE	ZIP CODE	Occupation				
ALEXANDRIA	VA	22302-2906	GOVERNEME	ENT A	FFAIRS		
B. FULL NAME CECCHI, GIUS	SEPPE, , ,		Name of Employer THE IDI GROUP		Date (month, day, year)	Amount	
MAILING ADDRESS						10/27/2020	2000.00
1209 ALDEBARAN DR			Transaction II	D . 6B	E220EB400EB4D0		
CITY	STATE	ZIP CODE	Occupation II	ם0: ע	E22CFB400EB4D8		
			PRESIDENT				
MC LEAN	VA	22101-2304				D 1 / 11	
C. FULL NAME BILL FLORES F	OR CONGRI	ESS	Name of Employ	yer		Date (month, day, year)	Amount
MAILING ADDRESS PO BOX 6207						10/27/2020	1500.00
FO BOX 0201			Transaction II	D : 6D	F275E12670C4EC		
CITY	STATE	ZIP CODE	Occupation				
BRYAN	TX	77805-6207					
D. FULL NAME OSI SYSTEMS	INC DAC		Name of Employ	yer		Date (month, day, year)	Amount
MAILING ADDRESS 12525 CHADRON AVE					10/28/2020	2500.00	
			Transaction ID) : 67I	D2BE734E8C84784		
CITY	STATE	ZIP CODE	Occupation				
HAWTHORNE	CA	90250-4807					
E. FULL NAME			Name of Employ	ver		Date (month,	Amount
NATIONAL MULTIFAMIL' COMMITTEE	Y HOUSING COUNCI	L POLITICAL ACTION	riamo er Empre	,		day, year)	
MAILING ADDRESS 1850 M ST NW			Transaction ID : 6B91280A835BC4ED		10/28/2020	2500.00	
CITY	STATE	ZIP CODE	Occupation Occupation				
WASHINGTON	DC	20036-5816	Coopanon				
	DC	20030-3010			DATE		
SIGNATURE (optional) LISKER, LISA, , ,			[Electronically F	Filed]	DATE 10/29/2020	Federal El 999 E Street, NV	nformation contact: ection Commission V, Washington, DC 20463 -9530, Local 202-694-1100
						.555 555 424	1113, 2000. 202 00 1 1100



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.



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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.

NAME OF COMMITTEE IN FULL KATKO FOR CONGRESS			
ADDRESS (number and street) 228 S WASHINGTON ST			
STE 115			
CITY, STATE, and ZIP CODE		oontinustia	n nogo
ALEXANDRIA	VA 22314-5404	continuatio	n page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
KATKO, JOHN, M, ,	House NY 24	C00556365	
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
SOUTHWEST AIRLINES PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE (SWAPA PAC)		day, year)	1500.00
1450 EMPIRE CENTRAL DR		10/20/2020	1000.00
	Transaction ID: 6CE64534D94854C39	BF1	
DALLAS TX 75247-4027	Occupation		
.,,			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
HAL PAC		,,,,,,,	
704 OTH CT NIM		10/28/2020	1000.00
701 8TH ST NW	Transaction ID : 66EC1D3EC30564072	083E	
STE 500	Occupation	OSL	
WASHINGTON DC 20001-3965			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
NATIONAL ACTIVE AND RETIRED FEDERAL		day, year)	
EMPLOYEES ASSOC. NARFE PAC		10/28/2020	1500.00
606 N WASHINGTON ST			
	Transaction ID: 69085CB9420FF493B	98F	
ALEXANDRIA VA 22314-1914	Occupation		
	N (5)	Date (month,	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	day, year)	Amount
REYNOLDS AMERICAN INC. PAC; RAI PAC		40/00/0000	4000.00
PO BOX 718		10/28/2020	1000.00
1 C BOX 1 IO	Transaction ID : 69B168BD95F054928	83C	
	Occupation		
WINSTON SALEM NC 27102-0718			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
NATIONAL SHOOTING SPORTS FOUNDATION PAC		day, year)	
		10/28/2020	1000.00
400 N CAPITOL ST NW			
STE 490	Transaction ID : 6C449927A47E6402B	974	
WASHINGTON DC 20001-6509	Occupation		

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1. NAME OF COMMITTEE IN FULL KATKO FOR CONGRESS			
ADDRESS (number and street) 228 S WASHINGTON ST			
STE 115			
CITY, STATE, and ZIP CODE		oontinustio	n naga
ALEXANDRIA	VA 22314-5404	continuatio	n page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	NUMBER
KATKO, JOHN, M, ,	House NY 24	C00556365	
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE		day, year)	2500.00
1101 KING STREET			
SUITE 600	Transaction ID : 69A00264961BB462A	A41	
ALEXANDRIA VA 22314-2965	Occupation		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
STIVERS FOR CONGRESS	Name of Employer	day, year)	
STIVERS FOR CONGRESS		10/28/2020	2000.00
4679 WINTERSET DR		10/20/2020	2000.00
	Transaction ID: 608276A0CD5874CC	BC3	
COLLIMBUIC 011 42220 0442	Occupation		
COLUMBUS OH 43220-8113			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
AECOM PAC		day, you.	
2450 CRYSTAL DR		10/28/2020	1000.00
	Transaction ID: 607C99C4AB07F48A	D017	
STE 500	Occupation	Dall	
ARLINGTON VA 22202-3892			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
DBM PAC		day, year)	
		10/28/2020	1000.00
824 S MILLEDGE AVE			
STE 101	Transaction ID : 6009F4EEBAE504ED Occupation	AAF0	
ATHENS GA 30605-1332	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
VALOR PAC		day, year)	
824 S MILLEDGE AVE		10/28/2020	1800.00
STE 101	Transaction ID: 640F01ACF9DE540B	F8B0	
ATHENS GA 30605-1332	Occupation		
ATTILING GA 30003-1332			



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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.

ADDRESS (number and street) 228 S WASHINGTON ST STE 115 CITY, STATE, and ZIP GODE ALEXANDRIA 2. NAME OF CARDIDIATE KATKO, JOHN, M., B. JOFFICE SOUGHT (State and Districe) A. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL ASSOCIATION OF HOME BUILDERS POLITICAL, ACTION COMMITTEE 1201 15TH ST NW WASHINGTON DC 20005-2899 D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Name of Employer Date (month, day, year) Amount Amount Cocupation Date (month, day, year) Amount Date (month, day, year) Amount Date (month, day, year) Amount Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Cocupation D. PULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Amount Cocupation Date (month, day, year) Amount Date (month, day, year) Amount Amount D. Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Amount Amount Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Amount Amount Amount Amount Amount Amount Cocupation	NAME OF COMMITTEE IN FULL KATKO FOR CONGRESS]	
STE 115 CITY, STATE, and ZIP CODE ALEXANDRIA 2. NAME OF CANDIDATE KATKO, JOHN, M., 5. ISTHIS AN AMENDMENTT X NO, THIS IS A NEW FILING VES. IT AMENDS THE NOTICE FILED ON AFFEL DENTIFICATION NUMBER CO0556365 S. ISTHIS AN AMENDMENTT X NO, THIS IS A NEW FILING VES. IT AMENDS THE NOTICE FILED ON AFFEL DATE AFFEL DENTIFICATION NUMBER CO0556365 Name of Employer Date (month, day, year) Date (month, day, year) Amount Cocupation D. Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Date (month, day, year) Amount Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Amount Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Date (month, day, year) Amount D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Date (month, day, year) Amount D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Date (month, day, year)			-	
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KATKO, JOHN, M., House NY 24 C00556365 5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING YES, IT AMENDS THE NOTICE FILED ON , , , A. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL ASSOCIATION OF HOME BUILDERS POLITICAL ACTION COMMITTEE 1201 15TH ST NW WASHINGTON DC 20005-2899 B. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Name of Employer Name of Employer Date (month, day, year) Occupation Date (month, day, year) Amount Amount Amount Occupation Description Description Description Description Description Amount Amount Amount Description Amount day, year) Amount Description Amount day, year) Amount day, year)	ALEXANDRIA	VA 22314-5404	continuation	on page
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A. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL ASSOCIATION OF HOME BUILDERS POLITICAL ACTION COMMITTEE 1201 15TH ST NW WASHINGTON DC 20005-2899 B. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Name of Employer Date (month, day, year) Cocupation C. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Cocupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Amount day, year)	KATKO, JOHN, M, ,	House NY 24	C00556365	
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POLITICAL ACTION COMMITTEE 10/28/2020 5000.00 1201 15TH ST NW WASHINGTON DC 20005-2899 B. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Occupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Amount Occupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Amount D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Amount Description	A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Amount
Transaction ID : 639EA764F32354A7AA40 Occupation B. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Occupation C. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Occupation Date (month, day, year) Amount Amount Occupation D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, day, year) Date (month, day, year) Amount Amount Occupation Date (month, day, year) Amount Amount Occupation Date (month, day, year) Amount Amount Date (month, day, year) Amount Amount Date (month, day, year)				5000.00
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day, year)		Occupation		
Occupation	E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Amount
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