01/25/2019 12:42

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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 Pete Aguilar for (Congress]		
ADDRESS (number and street) Po	O Box 10954							-		
CITY		S	STATE		ZIP COI			-		
San Bernardino			CA		9242					
2. NAME OF CANDIDATE Aguilar, Pete, , ,				3. OFFICE SOI House	,	ate and Distr	31	4. FEC IDENTIFICATION NUMBER C00510461		
5. IS THIS AN AMENDMENT?	NO, THIS IS A NEV	W FILING	×	YES, IT AMEI	NDS THE	NOTICE FIL	LED ON	10/25		
A. FULL NAME American Medical Associa	ition Political Ac	tion Com	mittee	Name of Empl	loyer			Date (month, day, year)	Amount	
MAILING ADDRESS 25 Massachusetts Ave NW Ste 600				Transaction ID : VN8JBEXTM10				10/23/2018	2000.00	
CITY	STATE	ZIP COL	DE	Occupation				_		
Washington	DC	20001	7400	·						
-	DC	20001	-7400					Date (month,	Amount	
B. FULL NAME Anthem PAC (Anthem PAC)				Name of Employer				day, year)	Amount	
MAILING ADDRESS 120 Monument Cir			Transaction ID : VN8JBEXWYC6			/YC6	10/23/2018	1500.00		
CITY	STATE	ZIP COL	DE	Occupation				_		
Indianapolis	IN	46204	4-4906							
C. FULL NAME				Name of Empl	lover			Date (month,	Amount	
Bearie, Brian, , , M	D			Self-Employ				day, year)		
MAILING ADDRESS 36125 Cherrywood Dr			Transaction ID : VN8JBEXTM28			Moo	10/23/2018	1000.00		
CITY	STATE	ZIP COL	DE	Occupation	ID . VIV	IOJDEXI	IVIZO	_		
Yucaipa	CA	92399	9-5721	Doctor						
D. FULL NAME	071				lovor			Date (month,	Amount	
Burgess, Larry, E., ,				Name of Employer N/A				day, year)		
	<u>, </u>							10/23/2018	1000.00	
MAILING ADDRESS 923 W Fern Ave				Turneration	ID - V/N	o IDEVT	M00	. 0, 20, 20 . 0	.000.00	
CITY	STATE	ZIP COL	DE	Transaction Occupation	ID : VN	SJBEXII	WIU2	_		
Redlands	CA 92373-587			Occupation						
			0 0011	Retired						
E. FULL NAME Cubic Corporation Employees' Political Action Committee			Name of Employer				Date (month, day, year)	Amount		
MAILING ADDRESS 9333 Balboa Ave								10/23/2018	1500.00	
Ms 10-2				Transaction ID : VN8JBEXWYR1			/YR1			
CITY	STATE	ZIP COL	DE	Occupation						
San Diego	CA	92123	3-1515							
SIGNATURE (optional) May, Jennifer, , ,		ſ		[Electronically	Filed]	DATE 01/25/2	019	Federal E 999 E Street, N	information contact: lection Commission W, Washington, DC 20463 I-9530, Local 202-694-1100	



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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1. NAME OF COMMITTEE IN FULL		7	
Pete Aguilar for Congress		_	
ADDRESS (number and street) PO Box 10954			
CITY, STATE, and ZIP CODE		┨	
San Bernardino	CA 92423	continuatio	n page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	NUMBER
Aguilar, Pete, , ,	House CA 31	C00510461	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		2018
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Kayali, Zeid, , ,	Inland Empire Liver Foundation	day, year)	
·		10/23/2018	2000.00
2006 N Riverside Ave	_ , , , , , , , , , , , , , , , , , , ,		
	Transaction ID : VN8JBEY09N2 Occupation		
Rialto CA 92377-4696	Doctor, Gastroenterology		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
PG&E Corporation Employees Energy PAC		day, year)	
Toda dorporation Employeed Energy 1710		10/23/2018	1000.00
77 Beale St		10/20/2010	.000.00
Mail Code B29H	Transaction ID: VN8JBEXWYJ3		
San Francisco CA 94105-1814	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Prudential Financial Inc. Federal Political Action Committe		day, year)	
		10/23/2018	2500.00
751 Broad St			
FI 14	Transaction ID : VN8JBEXTM36		
Newark NJ 07102-3714	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		