

# 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.

<b>1. NAME OF COMMITTEE IN FULL</b> Donald M Payne, Jr. for Congress			
ADDRESS (number and street) PO Box 2406			
CITY Newark		STATE NJ	ZIP CODE 07114
<b>2. NAME OF CANDIDATE</b> Payne, Donald, , Mr., Jr		<b>3. OFFICE SOUGHT</b> (State and District) House NJ 10	
<b>4. FEC IDENTIFICATION NUMBER</b> C00519355			
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Academy of Rail Road Labor Attorney's Political Action Committee		Name of Employer	Date (month, day, year)
MAILING ADDRESS 555 13th St NW Ste 4E-305		Transaction ID : VN8ZJPC0KH9	Amount 1000.00
CITY Washington	STATE DC	ZIP CODE 20004-1109	Occupation
<b>B. FULL NAME</b> Lyondell Chemical Company PAC		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1221 McKinney St Ste 300		Transaction ID : VN8ZJPC0KD7	Amount 1500.00
CITY Houston	STATE TX	ZIP CODE 77010-2036	Occupation
<b>C. FULL NAME</b> JA Union Plumbers & Pipefitters Vote ! (PAC) United Association of Journeymen & App.		Name of Employer	Date (month, day, year)
MAILING ADDRESS 3 Park Pl		Transaction ID : VN8ZJPC0KE5	Amount 2200.00
CITY Annapolis	STATE MD	ZIP CODE 21401-3687	Occupation
<b>D. FULL NAME</b>		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
<b>E. FULL NAME</b>		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
<b>SIGNATURE (optional)</b> Williams, H., O'Neil, Mr.,		DATE 10/24/2020	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
<i>[Electronically Filed]</i>			

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