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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  Dr. Raul Ruiz	for Congress						
ADDRESS (number and str							
CITY		STATE		ZIP COI	DE	_	
Palm Desert CA				9226	61		
2. NAME OF CANDIDATE			3. OFFICE SC	UGHT (St	ate and District)	4. FEC IDENTIFICATION NUMBER	
Ruiz, Raul, , Dr.,			House		CA 36	C00502575	
5. ISTHIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	YES, IT AME	ENDS THE	NOTICE FILED ON	/////	
A. FULL NAME			Name of Emp	oloyer		Date (month, day, year)	Amount
Cole, John, P., ,							4000.00
MAILING ADDRESS 8 Oakmont Dr					4070004	05/31/2018	1000.00
CITY	STATE	ZIP CODE		Transaction ID : C11278684		_	
			·	Occupation			
Rancho Mirage	CA	92270-1486	Retired			Date (month,	Amount
B. FULL NAME Flores, Christopher, , ,			Name of Emp Dr. Christop		Flores	day, year)	Amount
MAILING ADDRESS P.O. Box 752						05/31/2018	1000.00
1 .O. BOX 732			Transaction	ID : C1	1278688		
CITY	STATE	ZIP CODE	Occupation	Occupation			
Rancho Mirage	CA	92270-0752	Physician				
c.full NAME Hensler, Margaret, , ,			Name of Emp	oloyer		Date (month, day, year)	Amount
MAILING ADDRESS						05/31/2018	2700.00
4447 Hawthorne St NV	V		Transaction	1D : C1	1278288		_, 00,00
CITY	STATE	ZIP CODE	Occupation	Occupation			
Washington	DC	20016-3541	Homemake	Homemaker			
D. FULL NAME	MD		Name of Emp		annintan	Date (month, Amount day, year)	
Mani, Hamid, ,	, IVID		California R	Kelina A	ssociales	day, your)	
MAILING ADDRESS 835 3rd Ave						05/31/2018	1000.00
			Transaction	ID : C1	1278685		
сіту Chula Vista	STATE	STATE ZIP CODE  CA 91911-1352		Occupation			
Ondia viola	CA	91911-1352	Physician				
e. FULL NAME Patel, Rakesh, , ,			Name of Emp Neighborho	oloyer od Heal	thcare	Date (month, day, year)	Amount
MAILING ADDRESS						05/31/2018	1000.00
		Transaction	ID : C1	1278686			
CITY	STATE	ZIP CODE	Occupation				
			CEO				
SIGNATURE (optional)  May, Jennifer, , ,					DATE	For further info	ormation contact:
			[Electronically	[Electronically Filed] 06/01/2018		Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, 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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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			
ADDRESS (number and street) PO Box 3433			
CITY, STATE, and ZIP CODE		٠	
Palm Desert	CA 92261	continuation	on page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER C00502575	
Ruiz, Raul, , Dr.,	House CA 36		
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
Vogel, David, , ,	N/A	day, year)	
1775 E Palm Canyon Dr		05/31/2018	2000.00
	Transaction ID : C11278689		
Ste 110	Occupation		
Palm Springs CA 92264-1623	Retired		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, Amount day, year)	
	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
	Codpanon		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		