

# 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> Citizens for John Rutherford			
ADDRESS (number and street) 3030 Hartley Rd Ste 120			
CITY Jacksonville	STATE FL	ZIP CODE 32257-8210	
<b>2. NAME OF CANDIDATE</b> Rutherford, John, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House FL 04	
<b>4. FEC IDENTIFICATION NUMBER</b> C00615294			
<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> Gay, W, W, ,			
MAILING ADDRESS 524 Stockton Street		Name of Employer WW Gay Mechanical Contractors	
CITY Jacksonville	STATE FL	ZIP CODE 32204-2535	Date (month, day, year) 10/31/2016
		Transaction ID : 6CBE8504E826E444E	
		Occupation Chief Executive Officer	
Amount 2700.00			
<b>B. FULL NAME</b> Gay, Eloise, D, ,			
MAILING ADDRESS 524 Stockton Street		Name of Employer Homemaker	
CITY Jacksonville	STATE FL	ZIP CODE 32204-2535	Date (month, day, year) 10/31/2016
		Transaction ID : 69D88917E7D9B4B5E	
		Occupation Homemaker	
Amount 2700.00			
<b>C. FULL NAME</b> Volpe, Timothy, W, ,			
MAILING ADDRESS 501 Riverside Avenue 7th Floor		Name of Employer Adams & Reese, LLP	
CITY Jacksonville	STATE FL	ZIP CODE 32202-4934	Date (month, day, year) 10/31/2016
		Transaction ID : 6576F63C5AC2F4E9E	
		Occupation Attorney	
Amount 1000.00			
<b>D. FULL NAME</b> Shah, Atul, M, ,			
MAILING ADDRESS 6652 Epping Forest Way N		Name of Employer Monrose Clinic	
CITY Jacksonville	STATE FL	ZIP CODE 32217-2648	Date (month, day, year) 10/31/2016
		Transaction ID : 6FFC7F819AF8D488E	
		Occupation Doctor	
Amount 2700.00			
<b>E. FULL NAME</b> National Restaurant Association PAC			
MAILING ADDRESS 2055 L St NW		Name of Employer	
CITY Washington	STATE DC	ZIP CODE 20036-4983	Date (month, day, year) 10/31/2016
		Transaction ID : 640E762A5C60B456E	
		Occupation	
Amount 1000.00			
<b>SIGNATURE (optional)</b> Wilson, J, , ,		DATE 10/31/2016	<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
[Electronically Filed]			

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 03/2016)

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<b>ADDRESS</b> (number and street) 3030 Hartley Rd Ste 120			
<b>CITY, STATE, and ZIP CODE</b> Jacksonville FL 32257-8210			
<b>2. NAME OF CANDIDATE</b> Rutherford, John, , ,	<b>3. OFFICE SOUGHT</b> (State and District) House FL 04	<b>4. FEC IDENTIFICATION NUMBER</b> C00615294	

**5. IS THIS AN AMENDMENT?**
 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, day, year)	Amount
AT&T Federal PAC  208 S Akard St Ste 1812 Dallas TX 75202-4206	Transaction ID : 6D8FEB6155AC3424194C Occupation	10/31/2016	1000.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer  Occupation	Date (month, day, year)	Amount