

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.

1. NAME OF COMMITTEE IN FULL Friends of Dave Joyce			
ADDRESS (number and street) 320 Kenarden Drive			
CITY Cleveland	STATE OH	ZIP CODE 44143-3710	
2. NAME OF CANDIDATE Joyce, David, P, ,		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER C00527457
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME Mckesson Corporation Employees Political Fund		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1 Post Street Floor 32		Transaction ID : 6F675C45FAE374932	Amount 4000.00
CITY San Francisco	STATE CA	ZIP CODE 94104-5255	Occupation
B. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS		Occupation	Amount
CITY	STATE	ZIP CODE	Amount
C. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS		Occupation	Amount
CITY	STATE	ZIP CODE	Amount
D. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS		Occupation	Amount
CITY	STATE	ZIP CODE	Amount
E. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS		Occupation	Amount
CITY	STATE	ZIP CODE	Amount
SIGNATURE (optional) Coleman, Scott, ,		DATE 04/25/2018	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F6N
Transaction ID :

According to FEC regulations, the Threshold Amount for Form 6 is \$1,000.00

Form/Schedule:
Transaction ID: