

OCT. 24. 2012 7:27PM

ARENT FOX, WASH. DC

NO. 7145 P. 1

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

12 OCT 25 AM 9:17

To: Secretary of the Senate  
Fax: 202-224-1851

From: Friends of Connie Mack  
Fax: 202-857-6395

Re: 48 Hour Notice of Contributions - FEC Form 6

Number of pages (including cover): 2

Please send a confirmation fax to the attention of David Satterfield at 202-857-6395.

Should you have any questions or not receive our full transmission, please call David Satterfield at 202-857-6467.

12020974370

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

PAGE 111  
RECEIVED  
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PUBLIC RECORDS

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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 <b>Friends of Connie Mack, Inc.</b>			
ADDRESS (number and street) <b>P.O. Box 519</b>			
CITY, STATE, and ZIP CODE <b>Naples FL 34108</b>			
2. NAME OF CANDIDATE <b>Rep. Connie Mack</b>	3. OFFICE SOUGHT (State and District) <b>Senate FL</b>	4. FEC IDENTIFICATION NUMBER <b>C00391243</b>	
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, MAILING ADDRESS AND ZIP CODE <b>Mr. Joseph L. Seidel</b>  <b>8058 Glendale Rd</b>  <b>Chevy Chase MD 20815-5901</b>		Name of Employer <b>Credit Suisse First Boston</b>  Transaction ID : <b>6B5784B3EC2044D5</b> Occupation <b>Managing Director</b>	Date (month, day, year) <b>10/22/2012</b>  Amount <b>2500.00</b>
B. FULL NAME, MAILING ADDRESS AND ZIP CODE <b>William New</b>  <b>414 Jacobs Street</b>  <b>Berwick LA 70342-2052</b>		Name of Employer <b>New Industries, Inc</b>  Transaction ID : <b>6E5BED026F744445C</b> Occupation <b>Engineer</b>	Date (month, day, year) <b>10/22/2012</b>  Amount <b>2500.00</b>
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)
		Occupation	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)
		Occupation	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)
		Occupation	Amount
SIGNATURE (optional) <b>Craig Engle</b>		DATE <b>10/24/2012</b>	For further information contact: 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

**FEC FORM 6**  
(Revised 07/2011)

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# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

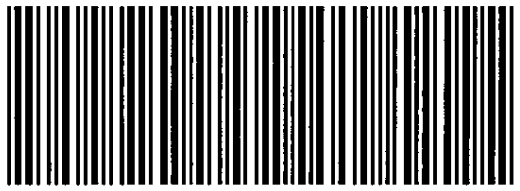
POSTMARK ILLEGIBLE  NO POSTMARK

FAX 10-25-12  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 10-25-12

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