

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 Dr. Raul Ruiz for Congress			
ADDRESS (number and street) PO Box 3433			
CITY, STATE, and ZIP CODE Palm Desert CA 92261			
2. NAME OF CANDIDATE Dr. Raul Ruiz	3. OFFICE SOUGHT (State and District) House CA 36		4. FEC IDENTIFICATION NUMBER C00502575
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 Charity Abreu 1619 Heritage Lane Mission TX 78572	Name of Employer Transaction ID : C10290420 Occupation	Date (month, day, year) 10/27/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Alan Lowenthal For Congress 6380 Wilshire Blvd Ste 1612 Los Angeles CA 90048-5018	Name of Employer Transaction ID : C10290430 Occupation	Date (month, day, year) 10/27/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Elida Cantu 225 Yucca McAllen TX 78504	Name of Employer Transaction ID : C10290422 Occupation	Date (month, day, year) 10/27/2014	Amount 2600.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Carlos J Cardenas 100 N Taylor Dr McAllen TX 78501	Name of Employer South Texas Gastroenterology Transaction ID : C10290411 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Ernst & Young Political Action Committee 1101 New York Ave NW Washington DC 20005-4269	Name of Employer Transaction ID : C10290428 Occupation	Date (month, day, year) 10/27/2014	Amount 5000.00
SIGNATURE (optional) John Pinkney <i>[Electronically Filed]</i>		DATE 10/28/2014	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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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.

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Jaime R. Garza 404 Quail Ave. McAllen TX 78504	Name of Employer Self-Employed Transaction ID : C10290424 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Jose Rene Garza 5404 N 1st St McAllen TX 78504-2211	Name of Employer Merrill Lynch, Pierce, Fenner & Smith Transaction ID : C10290413 Occupation Investment Advisory Representative	Date (month, day, year) 10/27/2014	Amount 2600.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Daniel J Guerra 606 S Broadway St McAllen TX 78501-4906	Name of Employer Doctors Hospital at Renaissance Transaction ID : C10290414 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Ambrosio Hernandez 2000 Dana Dr. Pharr TX 78677	Name of Employer Doctors Hospital at Renaissance Transaction ID : C10290417 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Jim Costa for Congress 2037 W Bullard Ave # 355 Fresno CA 93711-1200	Name of Employer Transaction ID : C10290404 Occupation	Date (month, day, year) 10/27/2014	Amount 2000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Carlos Manrique 116 Cardinal Ave McAllen TX 78504-2217	Name of Employer Manrique Custom Vision Transaction ID : C10290418 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Jose F. Pena 3508 Monserat Dr Edinburg TX 78539-4369	Name of Employer Donnz Medical Clinic Transaction ID : C10290416 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Elvia A Saenz RPH 801 E Nolana Ave Ste 22 McAllen TX 78504-6106	Name of Employer Transaction ID : C10290415 Occupation	Date (month, day, year) 10/27/2014	Amount 2000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Norma Salas 2301 N Bryan Rd Mission TX 78574-2428	Name of Employer Self-Employed Transaction ID : C10290419 Occupation Physician	Date (month, day, year) 10/27/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Snoquaimie Tribe PO Box 969 8130 Railroad Ave. Snoquaimie WA 98065	Name of Employer Transaction ID : C10290402 Occupation	Date (month, day, year) 10/27/2014	Amount 1500.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Union Pacific Corporation Fund for Effective Government 700 13th St NW Ste 350 Washington DC 20005-3960	Name of Employer Transaction ID : C10290429 Occupation	Date (month, day, year) 10/27/2014	Amount 2500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE UAW - V - CAP (UAW Voluntary Community Action Program) 8000 E Jefferson Ave Detroit MI 48214-3963	Name of Employer Transaction ID : C10290403 Occupation	Date (month, day, year) 10/27/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount