

# 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> Jimmy Gomez for Congress			
<b>ADDRESS</b> (number and street) 600 Pennsylvania Ave SE Unit 15180			
<b>CITY</b> Washington	<b>STATE</b> DC	<b>ZIP CODE</b> 20003	
<b>2. NAME OF CANDIDATE</b> Gomez, Jimmy, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House CA 34	
		<b>4. FEC IDENTIFICATION NUMBER</b> C00629659	
<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> American Academy of Dermatology Association PAC (SkinPAC)			
<b>MAILING ADDRESS</b> 1445 New York Ave NW Ste 800 CITY Washington		<b>STATE</b> DC	<b>ZIP CODE</b> 20005-2125
		<b>Name of Employer</b> Transaction ID : 22879580	<b>Date</b> (month, day, year) 02/26/2024
		<b>Occupation</b>	<b>Amount</b> 3000.00
<b>B. FULL NAME</b> Jobs and Innovation Matter PAC (JIM PAC)			
<b>MAILING ADDRESS</b> PO Box 15320 CITY Washington		<b>STATE</b> DC	<b>ZIP CODE</b> 20003-0320
		<b>Name of Employer</b> Transaction ID : 22882995	<b>Date</b> (month, day, year) 02/26/2024
		<b>Occupation</b>	<b>Amount</b> 1000.00
<b>C. FULL NAME</b> Office of the Commissioner of Major League Baseball PAC			
<b>MAILING ADDRESS</b> 1201 15th St NW Ste 320 CITY Washington		<b>STATE</b> DC	<b>ZIP CODE</b> 20005-2899
		<b>Name of Employer</b> Transaction ID : 22879581	<b>Date</b> (month, day, year) 02/26/2024
		<b>Occupation</b>	<b>Amount</b> 1500.00
<b>D. FULL NAME</b> Rollins, Vicki, P., ,			
<b>MAILING ADDRESS</b> 1120 Via Zumaya CITY Palos Verdes Estates		<b>STATE</b> CA	<b>ZIP CODE</b> 90274-2818
		<b>Name of Employer</b> LA Downtown Medical Center Transaction ID : 22879582	<b>Date</b> (month, day, year) 02/26/2024
		<b>Occupation</b> President	<b>Amount</b> 2500.00
<b>E. FULL NAME</b>			
<b>MAILING ADDRESS</b>			
<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>	<b>Occupation</b>
<b>SIGNATURE (optional)</b> Nissen, Melissa, , ,		<b>DATE</b> 02/28/2024	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

--	--	--

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)