

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 Katie Porter For Congress				
ADDRESS (number and street) PO Box 5176				
CITY Irvine	STATE CA	ZIP CODE 92617		
2. NAME OF CANDIDATE Porter, Katherine, , ,		3. OFFICE SOUGHT (State and District) House CA 47		4. FEC IDENTIFICATION NUMBER C00636571
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				

A. FULL NAME Dogmetchi, Laya, , ,			Name of Employer Much Shelist, PC	Date (month, day, year) 05/24/2022	Amount 1000.00
MAILING ADDRESS 9 Bridgeport Rd			Transaction ID : VTEFS12AZSW1		
CITY Newport Coast	STATE CA	ZIP CODE 92657-1014	Occupation Attorney		
B. FULL NAME Christlieb, Mary, , ,			Name of Employer Not Employed	Date (month, day, year) 05/24/2022	Amount 900.00
MAILING ADDRESS 2529 Tamarisk Dr			Transaction ID : VTEFS12AZMN6		
CITY Santa Rosa	STATE CA	ZIP CODE 95405-8414	Occupation Retired		
C. FULL NAME Paule, Jeffrey, , ,			Name of Employer Not Employed	Date (month, day, year) 05/24/2022	Amount 1000.00
MAILING ADDRESS 24086 Gourami Bay			Transaction ID : VTEFS12AZSY7		
CITY Dana Point	STATE CA	ZIP CODE 92629-4504	Occupation Not Employed		
D. FULL NAME Christlieb, Mary, , ,			Name of Employer Not Employed	Date (month, day, year) 05/24/2022	Amount 100.00
MAILING ADDRESS 2529 Tamarisk Dr			Transaction ID : VTEFS12AZSX9		
CITY Santa Rosa	STATE CA	ZIP CODE 95405-8414	Occupation Retired		
E. FULL NAME 			Name of Employer	Date (month, day, year)	Amount
MAILING ADDRESS 					
CITY 	STATE 	ZIP CODE 	Occupation		
SIGNATURE (optional) Warren, Alexander, , ,			DATE 05/26/2022		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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FEC FORM 6
(Revised 03/2016)