

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 Daniel Webster for Congress																															
ADDRESS (number and street) PO Box 1007																															
CITY Webster		STATE FL		ZIP CODE 33597-1007																											
2. NAME OF CANDIDATE Webster, Daniel, , ,			3. OFFICE SOUGHT (State and District) House FL 11																												
4. FEC IDENTIFICATION NUMBER C00481911																															
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> A. FULL NAME Jones, Edward, , Mr., </td> <td colspan="2"> Name of Employer Ed Jones Insurance Agency </td> <td colspan="2"> Date (month, day, year) 08/13/2022 </td> <td colspan="2"> Amount 2000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS P. O. Box 320 </td> <td colspan="2"> Transaction ID : 6DECE5A7A2EA2475 </td> <td colspan="2" rowspan="2"></td> <td colspan="2" rowspan="2"></td> </tr> <tr> <td> CITY Mount Dora </td> <td> STATE FL </td> <td> ZIP CODE 32756 </td> <td colspan="2"> Occupation agent </td> </tr> </table>					A. FULL NAME Jones, Edward, , Mr.,			Name of Employer Ed Jones Insurance Agency		Date (month, day, year) 08/13/2022		Amount 2000.00		MAILING ADDRESS P. O. Box 320			Transaction ID : 6DECE5A7A2EA2475						CITY Mount Dora	STATE FL	ZIP CODE 32756	Occupation agent					
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FEC FORM 6
(Revised 03/2016)