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
LAUREL LEE FOR CONGRESS, INC.

ADDRESS (number and street) P.O. BOX 2743

CITY	STATE	ZIP CODE
BRANDON	FL	33509

2. NAME OF CANDIDATE
LEE, LAUREL MRS., , ,

3. OFFICE SOUGHT (State and District)
House FL 15

4. FEC IDENTIFICATION NUMBER
C00815373

5. IS THIS AN AMENDMENT? [X] NO, THIS IS A NEW FILING [ ] YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____

A. FULL NAME / MAILING ADDRESS / CITY / STATE / ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
BLACKROCK DEVELOPMENT HOLDINGS LLC 4343 ANCHOR PLAZA PKWY SUITE 1 TAMPA / FL / 33634	**Transaction ID : F6.5165**	08/08/2022	1000.00
B. FULL NAME GEMUNDER, DAVID, , , 929 GUISANDO DE AVILA TAMPA / FL / 33613	Name of Employer: SHUTTS BOWEN LLP **Transaction ID : F6.5170** Occupation: ATTORNEY	08/08/2022	2900.00
C. FULL NAME GENTILE, JAMES, D, , 9818 - 9 AVE NW BRADENTON / FL / 34209	Name of Employer: CABLISH & GENTILE CPAS, LLC **Transaction ID : F6.5168** Occupation: CPA	08/08/2022	1000.00
D. FULL NAME MCGILLICUDDY, GRACIELA, S, , 3827 FLAMINGO AVE SARASOTA / FL / 34242	Name of Employer: INFORMATION REQUESTED **Transaction ID : F6.5159** Occupation: INFORMATION REQUESTED	08/08/2022	1000.00
E. FULL NAME OBER, MARK, , , 4911 W SAN RAFAEL ST. TAMPA / FL / 33629	Name of Employer: RETIRED **Transaction ID : F6.5172** Occupation: RETIRED	08/08/2022	1000.00

SIGNATURE (optional)
CRATE, BRADLEY, , ,
[Electronically Filed]

DATE
08/10/2022

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 03/2016)

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BRANDON FL 33509

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
SANCHEZ, EULOGIO, J, , INFORMATION REQUESTED REQUESTED ZZ 99999	INFORMATION REQUESTED **Transaction ID : F6.5157** Occupation: INFORMATION REQUESTED	08/08/2022	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
SUMNER, JAMES, JOSEPH, , III INFORMATION REQUESTED REQUESTED ZZ 99999	INFORMATION REQUESTED **Transaction ID : F6.5166** Occupation: INFORMATION REQUESTED	08/08/2022	1700.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
WALSH, MARK, , , 1709 N OCEAN BLVD DELRAY BEACH FL 33483	INFORMATION REQUESTED **Transaction ID : F6.5161** Occupation: INFORMATION REQUESTED	08/08/2022	2900.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
WALSH, REBECCA, L, , 1709 N OCEAN BLVD DELRAY BEACH FL 33483	INFORMATION REQUESTED **Transaction ID : F6.5163** Occupation: INFORMATION REQUESTED	08/08/2022	2900.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**