

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 LARSON FOR CONGRESS				
ADDRESS (number and street) PO Box 261172				
CITY Hartford		STATE CT		ZIP CODE 06126-1172
2. NAME OF CANDIDATE LARSON, JOHN B, , ,			3. OFFICE SOUGHT (State and District) House CT 01	
4. FEC IDENTIFICATION NUMBER C00330142				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME Cohen, Andrea, , ,			Name of Employer None	
MAILING ADDRESS 57 Woodridge Circle			Date (month, day, year) 04/29/2024	
CITY West Hartford			Amount 2000.00	
STATE CT			Transaction ID : F6.94598	
ZIP CODE 06107			Occupation None	
B. FULL NAME Gianquinto, Lou, , ,			Name of Employer Elevance	
MAILING ADDRESS 364 Mount Sanford Road			Date (month, day, year) 04/27/2024	
CITY Cheshire			Amount 1000.00	
STATE CT			Transaction ID : F6.94597	
ZIP CODE 06410			Occupation Health Insurance Exec.	
C. FULL NAME Mack, David, , ,			Name of Employer Hartford HealthCare	
MAILING ADDRESS 321 N. Main Street			Date (month, day, year) 04/29/2024	
CITY Suffield			Amount 1000.00	
STATE CT			Transaction ID : F6.94599	
ZIP CODE 06078			Occupation Attorney	
D. FULL NAME			Name of Employer	
MAILING ADDRESS			Date (month, day, year)	
CITY			Amount	
STATE			Transaction ID	
ZIP CODE			Occupation	
E. FULL NAME			Name of Employer	
MAILING ADDRESS			Date (month, day, year)	
CITY			Amount	
STATE			Transaction ID	
ZIP CODE			Occupation	
SIGNATURE (optional) Feldman, Barry, , ,				DATE 04/29/2024
For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov				

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FEC FORM 6
(Revised 03/2016)