

# 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><br>Adam Gray for Congress                                                                                                           |  |                    |                                                             |                                        |                                                  |
| <b>ADDRESS</b> (number and street) 400 Capitol Mall, Suite 2400                                                                                                         |  |                    |                                                             |                                        |                                                  |
| <b>CITY</b><br>Sacramento                                                                                                                                               |  | <b>STATE</b><br>CA |                                                             | <b>ZIP CODE</b><br>95814               |                                                  |
| <b>2. NAME OF CANDIDATE</b><br>Gray, Adam C., , ,                                                                                                                       |  |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House CA 13 |                                        | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00801431 |
| <b>5. IS THIS AN AMENDMENT?</b> <input type="checkbox"/> NO, THIS IS A NEW FILING <input checked="" type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON 10 / 19 / 2024 |  |                    |                                                             |                                        |                                                  |
| <b>A. FULL NAME</b><br>Barragan for Congress                                                                                                                            |  |                    |                                                             | Name of Employer                       |                                                  |
| <b>MAILING ADDRESS</b><br>1840 South Gaffey Street, #421                                                                                                                |  |                    |                                                             | Date (month, day, year)<br>10/18/2024  |                                                  |
| <b>CITY</b><br>San Pedro                                                                                                                                                |  |                    |                                                             | Amount<br>2000.00                      |                                                  |
| <b>STATE</b><br>CA                                                                                                                                                      |  |                    |                                                             | <b>Transaction ID : INC.F65.4435</b>   |                                                  |
| <b>ZIP CODE</b><br>90731                                                                                                                                                |  |                    |                                                             | Occupation                             |                                                  |
| <b>B. FULL NAME</b><br>Hold the Line PAC                                                                                                                                |  |                    |                                                             | Name of Employer                       |                                                  |
| <b>MAILING ADDRESS</b><br>P.O. Box 171                                                                                                                                  |  |                    |                                                             | Date (month, day, year)<br>10/18/2024  |                                                  |
| <b>CITY</b><br>Bremen                                                                                                                                                   |  |                    |                                                             | Amount<br>2500.00                      |                                                  |
| <b>STATE</b><br>GA                                                                                                                                                      |  |                    |                                                             | <b>Transaction ID : INC.F65.4453</b>   |                                                  |
| <b>ZIP CODE</b><br>30110                                                                                                                                                |  |                    |                                                             | Occupation                             |                                                  |
| <b>C. FULL NAME</b><br>Joy, Bob, , ,                                                                                                                                    |  |                    |                                                             | Name of Employer                       |                                                  |
| <b>MAILING ADDRESS</b><br>4620 Virginia Ave.                                                                                                                            |  |                    |                                                             | Date (month, day, year)<br>10/17/2024  |                                                  |
| <b>CITY</b><br>Long Beach                                                                                                                                               |  |                    |                                                             | Amount<br>1000.00                      |                                                  |
| <b>STATE</b><br>CA                                                                                                                                                      |  |                    |                                                             | <b>Transaction ID : INC.F65.4508</b>   |                                                  |
| <b>ZIP CODE</b><br>90805                                                                                                                                                |  |                    |                                                             | Occupation                             |                                                  |
| <b>D. FULL NAME</b><br>koenig, william, , ,                                                                                                                             |  |                    |                                                             | Name of Employer                       |                                                  |
| <b>MAILING ADDRESS</b><br>4027 Garden Hwy                                                                                                                               |  |                    |                                                             | Date (month, day, year)<br>10/18/2024  |                                                  |
| <b>CITY</b><br>Sacramento                                                                                                                                               |  |                    |                                                             | Amount<br>1000.00                      |                                                  |
| <b>STATE</b><br>CA                                                                                                                                                      |  |                    |                                                             | <b>Transaction ID : IDT.F65.129672</b> |                                                  |
| <b>ZIP CODE</b><br>95834                                                                                                                                                |  |                    |                                                             | Occupation                             |                                                  |
| <b>E. FULL NAME</b><br>Liu, Beatrice, , ,                                                                                                                               |  |                    |                                                             | Name of Employer                       |                                                  |
| <b>MAILING ADDRESS</b><br>360 East 88th Street                                                                                                                          |  |                    |                                                             | Date (month, day, year)<br>10/17/2024  |                                                  |
| <b>CITY</b><br>New York                                                                                                                                                 |  |                    |                                                             | Amount<br>2000.00                      |                                                  |
| <b>STATE</b><br>NY                                                                                                                                                      |  |                    |                                                             | <b>Transaction ID : INC.F65.4507</b>   |                                                  |
| <b>ZIP CODE</b><br>10128                                                                                                                                                |  |                    |                                                             | Occupation                             |                                                  |
| <b>SIGNATURE (optional)</b><br>Olson, Meagan, , ,                                                                                                                       |  |                    |                                                             | <b>DATE</b><br>10/21/2024              |                                                  |
| For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov                                                                   |  |                    |                                                             |                                        |                                                  |

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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)

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F65

Transaction ID : IDT.F65.129672

Contribution Received through Conduit ActBlue

Form/Schedule:

Transaction ID:

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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|                                                                                                                                                                  |  |                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------|--|
| 1. NAME OF COMMITTEE IN FULL<br>Adam Gray for Congress                                                                                                           |  |                                                                                                             |  |
| ADDRESS (number and street) 400 Capitol Mall, Suite 2400                                                                                                         |  |                                                                                                             |  |
| CITY, STATE, and ZIP CODE<br>Sacramento CA 95814                                                                                                                 |  |                                                                                                             |  |
| 2. NAME OF CANDIDATE<br>Gray, Adam C., , ,                                                                                                                       |  | 3. OFFICE SOUGHT (State and District)<br>House CA 13                                                        |  |
| 4. FEC IDENTIFICATION NUMBER<br>C00801431                                                                                                                        |  |                                                                                                             |  |
| 5. IS THIS AN AMENDMENT? <input type="checkbox"/> NO, THIS IS A NEW FILING <input checked="" type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON 10 / 19 / 2024 |  |                                                                                                             |  |
| continuation page                                                                                                                                                |  |                                                                                                             |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Meledandri, Christopher, , ,<br>1990 S Bundy Drive, Suite 850<br>Los Angeles CA 90025                              |  | Name of Employer<br>Illumination Entertainment<br>Transaction ID : IDT.F65.129312<br>Occupation<br>Producer |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Scranton, Peter, , ,<br>12173 Greenock Lane<br>Los Angeles CA 90049                                                |  | Name of Employer<br>Not Employed<br>Transaction ID : INC.F65.4509<br>Occupation<br>Not Employed             |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Shapiro, Isaac, , ,<br>4627 Verplanck Place NW<br>Washington DC 20016                                              |  | Name of Employer<br>self-employed<br>Transaction ID : IDT.F65.129735<br>Occupation<br>consultant            |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Sharice for Congress<br>13851 W. 63rd Street, #303<br>Shawnee KS 66216                                             |  | Name of Employer<br>Self Employed<br>Transaction ID : INC.F65.4454<br>Occupation<br>Attorney                |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Weiss, Janet, , ,<br>546 University Avenue<br>Los Altos CA 94022                                                   |  | Name of Employer<br>Self Employed<br>Transaction ID : INC.F65.4506<br>Occupation<br>Attorney                |  |
|                                                                                                                                                                  |  | Date (month, day, year)                                                                                     |  |
|                                                                                                                                                                  |  | Amount                                                                                                      |  |
|                                                                                                                                                                  |  | 3300.00                                                                                                     |  |
|                                                                                                                                                                  |  | 10/17/2024                                                                                                  |  |
|                                                                                                                                                                  |  | 3300.00                                                                                                     |  |
|                                                                                                                                                                  |  | 10/17/2024                                                                                                  |  |
|                                                                                                                                                                  |  | 1000.00                                                                                                     |  |
|                                                                                                                                                                  |  | 10/18/2024                                                                                                  |  |
|                                                                                                                                                                  |  | 2000.00                                                                                                     |  |
|                                                                                                                                                                  |  | 10/18/2024                                                                                                  |  |
|                                                                                                                                                                  |  | 3300.00                                                                                                     |  |
|                                                                                                                                                                  |  | 10/18/2024                                                                                                  |  |

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F65

Transaction ID : IDT.F65.129312

Contribution received through Conduit Democracy Engine

Form/Schedule: F65

Transaction ID: IDT.F65.129735

Contribution Received through Conduit ActBlue

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|                                                                                                                                                                  |  |                                                                                         |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------|--|
| 1. NAME OF COMMITTEE IN FULL<br>Adam Gray for Congress                                                                                                           |  |                                                                                         |  |
| ADDRESS (number and street) 400 Capitol Mall, Suite 2400                                                                                                         |  |                                                                                         |  |
| CITY, STATE, and ZIP CODE<br>Sacramento CA 95814                                                                                                                 |  |                                                                                         |  |
| 2. NAME OF CANDIDATE<br>Gray, Adam C., , ,                                                                                                                       |  | 3. OFFICE SOUGHT (State and District)<br>House CA 13                                    |  |
|                                                                                                                                                                  |  | 4. FEC IDENTIFICATION NUMBER<br>C00801431                                               |  |
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| continuation page                                                                                                                                                |  |                                                                                         |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Williams, Paul, , ,<br>11601 Wilshire Blvd. #1840<br>Los Angeles CA 90025                                          |  | Name of Employer<br>ASCAP<br>Transaction ID : IDT.F65.129797<br>Occupation<br>President |  |
|                                                                                                                                                                  |  | Date (month, day, year)<br>10/18/2024                                                   |  |
|                                                                                                                                                                  |  | Amount<br>1000.00                                                                       |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                       |  | Name of Employer                                                                        |  |
|                                                                                                                                                                  |  | Date (month, day, year)                                                                 |  |
|                                                                                                                                                                  |  | Amount                                                                                  |  |
|                                                                                                                                                                  |  | Occupation                                                                              |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                       |  | Name of Employer                                                                        |  |
|                                                                                                                                                                  |  | Date (month, day, year)                                                                 |  |
|                                                                                                                                                                  |  | Amount                                                                                  |  |
|                                                                                                                                                                  |  | Occupation                                                                              |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                       |  | Name of Employer                                                                        |  |
|                                                                                                                                                                  |  | Date (month, day, year)                                                                 |  |
|                                                                                                                                                                  |  | Amount                                                                                  |  |
|                                                                                                                                                                  |  | Occupation                                                                              |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                       |  | Name of Employer                                                                        |  |
|                                                                                                                                                                  |  | Date (month, day, year)                                                                 |  |
|                                                                                                                                                                  |  | Amount                                                                                  |  |
|                                                                                                                                                                  |  | Occupation                                                                              |  |

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F65

Transaction ID : IDT.F65.129797

Contribution Received through Conduit ActBlue

Form/Schedule:

Transaction ID: