

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 Chris Deluzio for Congress					
ADDRESS (number and street) PO BOX 16210					
CITY PITTSBURGH		STATE PA		ZIP CODE 15242	
2. NAME OF CANDIDATE Deluzio, Christopher, , ,			3. OFFICE SOUGHT (State and District) House PA 17		4. FEC IDENTIFICATION NUMBER C00787648
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____					
A. FULL NAME ANGIE CRAIG FOR CONGRESS			Name of Employer		Date (month, day, year)
MAILING ADDRESS PO Box 22116			Transaction ID : 18362356		10/30/2024
CITY Eagan	STATE MN	ZIP CODE 55122-0116	Occupation		Amount 1000.00
B. FULL NAME Basile, Robert, , ,			Name of Employer Basile Senior Housing		Date (month, day, year)
MAILING ADDRESS 200 Black Matt Rd			Transaction ID : 18362468		10/30/2024
CITY Douglassville	STATE PA	ZIP CODE 19518-9723	Occupation Owner		Amount 1000.00
C. FULL NAME COURAGEOUS LEADERS			Name of Employer		Date (month, day, year)
MAILING ADDRESS 611 Pennsylvania Ave SE Ste 143			Transaction ID : 18362388		10/31/2024
CITY Washington	STATE DC	ZIP CODE 20003-4303	Occupation		Amount 2000.00
D. FULL NAME DCCC			Name of Employer		Date (month, day, year)
MAILING ADDRESS 430 S Capitol St SE Fl 2			Transaction ID : 18362397		10/31/2024
CITY Washington	STATE DC	ZIP CODE 20003-4024	Occupation		Amount 4140.37
E. FULL NAME DR KIM SCHRIER FOR CONGRESS			Name of Employer		Date (month, day, year)
MAILING ADDRESS PO Box 2728			Transaction ID : 18362344		10/30/2024
CITY Issaquah	STATE WA	ZIP CODE 98027-0125	Occupation		Amount 1000.00
SIGNATURE (optional) Pettersen, Jay, , ,				DATE 11/01/2024	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)

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Elder, Joshua, , , 814 Saint James St Pittsburgh PA 15232-2113		Name of Employer SCP Health Transaction ID : 18319414 Occupation Physician	
		Date (month, day, year) 10/30/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Mcconnell, Alfred, , , 2677 Orrington Ave Evanston IL 60201-1760		Name of Employer Self-Employed Transaction ID : 18362321 Occupation Real Estate Developer	
		Date (month, day, year) 10/31/2024	
		Amount 3300.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION AMERICA'S ELECTRIC COOPERATIVES PAC 4301 Wilson Blvd Arlington VA 22203-4419		Name of Employer Transaction ID : 18362251 Occupation	
		Date (month, day, year) 10/31/2024	
		Amount 1500.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
SHORE PAC PO Box 3157 Long Branch NJ 07740-3157		Name of Employer Transaction ID : 18362227 Occupation	
		Date (month, day, year) 10/31/2024	
		Amount 1000.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Smith, Gerrie, , , 1880 Century Park E Ste 950 Los Angeles CA 90067-1612		Name of Employer Not Employed Transaction ID : 18362343 Occupation Retired	
		Date (month, day, year) 10/31/2024	
		Amount 1000.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
TIMBER PAC 401 2Nd Ave S Ste 303 Seattle WA 98104-2862		Name of Employer Transaction ID : 18362406 Occupation	
		Date (month, day, year) 10/31/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Vaughan, Brad, , , 924 Washington Rd Pittsburgh PA 15228-2009		Name of Employer Apple Inc Transaction ID : 18324527 Occupation Software Engineer	
		Date (month, day, year) 10/30/2024	
		Amount 2000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Occupation	
		Date (month, day, year)	
		Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Occupation	
		Date (month, day, year)	
		Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Occupation	
		Date (month, day, year)	
		Amount	

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