

# 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<br>Maggie for Congress                                                                                                                     |  |             |                                                      |                                       |                                           |
| ADDRESS (number and street) 131 Daniel Webster Hwy<br>#949                                                                                                              |  |             |                                                      |                                       |                                           |
| CITY<br>Nashua                                                                                                                                                          |  | STATE<br>NH |                                                      | ZIP CODE<br>03060                     |                                           |
| 2. NAME OF CANDIDATE<br>Goodlander, Maggie, , ,                                                                                                                         |  |             | 3. OFFICE SOUGHT (State and District)<br>House NH 02 |                                       | 4. FEC IDENTIFICATION NUMBER<br>C00878454 |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |             |                                                      |                                       |                                           |
| A. FULL NAME<br>ANGIE CRAIG FOR CONGRESS                                                                                                                                |  |             |                                                      | Name of Employer                      |                                           |
| MAILING ADDRESS<br>PO Box 22116                                                                                                                                         |  |             |                                                      | Date (month, day, year)<br>10/30/2024 |                                           |
| CITY<br>Eagan                                                                                                                                                           |  | STATE<br>MN |                                                      | ZIP CODE<br>55122-0116                |                                           |
|                                                                                                                                                                         |  |             |                                                      | Amount<br>1000.00                     |                                           |
| Transaction ID : 5753805                                                                                                                                                |  |             |                                                      |                                       |                                           |
| B. FULL NAME<br>HOPE PAC                                                                                                                                                |  |             |                                                      | Name of Employer                      |                                           |
| MAILING ADDRESS<br>PO Box 7176                                                                                                                                          |  |             |                                                      | Date (month, day, year)<br>10/30/2024 |                                           |
| CITY<br>Boulder                                                                                                                                                         |  | STATE<br>CO |                                                      | ZIP CODE<br>80306-7176                |                                           |
|                                                                                                                                                                         |  |             |                                                      | Amount<br>1000.00                     |                                           |
| Transaction ID : 5753923                                                                                                                                                |  |             |                                                      |                                       |                                           |
| C. FULL NAME<br>Kravis, Henry, , ,                                                                                                                                      |  |             |                                                      | Name of Employer<br>KKR               |                                           |
| MAILING ADDRESS<br>1345 Avenue Of The Americas<br>Fl 15                                                                                                                 |  |             |                                                      | Date (month, day, year)<br>10/30/2024 |                                           |
| CITY<br>New York                                                                                                                                                        |  | STATE<br>NY |                                                      | ZIP CODE<br>10105-0021                |                                           |
|                                                                                                                                                                         |  |             |                                                      | Amount<br>3300.00                     |                                           |
| Transaction ID : 5754028                                                                                                                                                |  |             |                                                      |                                       |                                           |
| D. FULL NAME<br>Kravis, Henry, , ,                                                                                                                                      |  |             |                                                      | Name of Employer<br>KKR               |                                           |
| MAILING ADDRESS<br>1345 Avenue Of The Americas<br>Fl 15                                                                                                                 |  |             |                                                      | Date (month, day, year)<br>10/30/2024 |                                           |
| CITY<br>New York                                                                                                                                                        |  | STATE<br>NY |                                                      | ZIP CODE<br>10105-0021                |                                           |
|                                                                                                                                                                         |  |             |                                                      | Amount<br>3300.00                     |                                           |
| Transaction ID : 5754029                                                                                                                                                |  |             |                                                      |                                       |                                           |
| E. FULL NAME<br>Krupp, George, D, ,                                                                                                                                     |  |             |                                                      | Name of Employer<br>Not Employed      |                                           |
| MAILING ADDRESS<br>7 Woodchester Dr                                                                                                                                     |  |             |                                                      | Date (month, day, year)<br>10/30/2024 |                                           |
| CITY<br>Chestnut Hill                                                                                                                                                   |  | STATE<br>MA |                                                      | ZIP CODE<br>02467-1030                |                                           |
|                                                                                                                                                                         |  |             |                                                      | Amount<br>3300.00                     |                                           |
| Transaction ID : 5754017                                                                                                                                                |  |             |                                                      |                                       |                                           |
| SIGNATURE (optional)<br>Callahan, Jim, , ,                                                                                                                              |  |             |                                                      | DATE<br>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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| 1. NAME OF COMMITTEE IN FULL<br>Maggie for Congress                                                                                                                     |  |                                                                                                              |  |
| ADDRESS (number and street) 131 Daniel Webster Hwy<br>#949                                                                                                              |  |                                                                                                              |  |
| CITY, STATE, and ZIP CODE<br>Nashua NH 03060                                                                                                                            |  |                                                                                                              |  |
| 2. NAME OF CANDIDATE<br>Goodlander, Maggie, , ,                                                                                                                         |  | 3. OFFICE SOUGHT (State and District)<br>House NH 02                                                         |  |
| 4. FEC IDENTIFICATION NUMBER<br>C00878454                                                                                                                               |  |                                                                                                              |  |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                                                                              |  |
| continuation page                                                                                                                                                       |  |                                                                                                              |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Leifer, Alan, , ,<br><br>86 Clements Rd<br><br>Newton MA 02458-2618                                                   |  | Name of Employer<br>Leifer Capital Advisers<br><br>Transaction ID : 5753828<br>Occupation<br>President       |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Pava, Ann, , ,<br><br>30 Mohawk Dr<br><br>West Hartford CT 06117-2227                                                 |  | Date (month, day, year)<br>10/30/2024<br><br>Amount<br>1000.00                                               |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Popkin, Charles, , ,<br><br>9450 SW Gemini Dr<br># 65782<br>Beaverton OR 97008-7105                                   |  | Name of Employer<br>Longwood Associates<br><br>Transaction ID : 5753839<br>Occupation<br>Business Consultant |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Roberts, Jill, , ,<br><br>400 Stuart St<br><br>Boston MA 02116-5011                                                   |  | Date (month, day, year)<br>10/30/2024<br><br>Amount<br>1000.00                                               |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>STRICKLAND FOR WASHINGTON<br><br>4250 Martin Way E<br>Ste Pm 105<br>Olympia WA 98516-5317                             |  | Name of Employer<br>Not Employed<br><br>Transaction ID : 5753834<br>Occupation<br>Not Employed               |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>10/30/2024<br><br>Amount<br>1000.00                                               |  |
|                                                                                                                                                                         |  | Transaction ID : 5753798<br>Occupation                                                                       |  |

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| CITY, STATE, and ZIP CODE<br>Nashua NH 03060                                                                                                                            |  |                                                      |                         |
| 2. NAME OF CANDIDATE<br>Goodlander, Maggie, , ,                                                                                                                         |  | 3. OFFICE SOUGHT (State and District)<br>House NH 02 |                         |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00878454            |                         |
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| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
| THE REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
| 801 Pennsylvania Ave NW                                                                                                                                                 |  | Transaction ID : 5753747                             | 10/30/2024              |
| Ste 720                                                                                                                                                                 |  |                                                      |                         |
| Washington DC 20004-2686                                                                                                                                                |  | Occupation                                           | Amount                  |
|                                                                                                                                                                         |  |                                                      | 5000.00                 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  |                                                      |                         |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
|                                                                                                                                                                         |  |                                                      |                         |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  |                                                      |                         |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
|                                                                                                                                                                         |  |                                                      |                         |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  |                                                      |                         |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
|                                                                                                                                                                         |  |                                                      |                         |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  |                                                      |                         |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
|                                                                                                                                                                         |  |                                                      |                         |

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