

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 Richard E. Neal for Congress Committee																					
ADDRESS (number and street) 76 Magnolia Terrace																					
CITY Springfield	STATE MA	ZIP CODE 01108																			
2. NAME OF CANDIDATE Neal, Richard, E, ,		3. OFFICE SOUGHT (State and District) House MA 01																			
		4. FEC IDENTIFICATION NUMBER C00226522																			
5. IS THIS AN AMENDMENT? ☐ NO, THIS IS A NEW FILING ☒ YES, IT AMENDS THE NOTICE FILED ON 10 / 26 / 2022																					
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SIGNATURE (optional) Hall, Michael, F, ,			DATE 11/08/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																	
[Electronically Filed]																					

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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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Peterson, Michael, A, Mr., 399 Park Ave Fl 14 New York NY 10022-4614	Name of Employer Peterson Management LLC Transaction ID : VVC0PT6MTG2 Occupation CEO	Date (month, day, year) 10/25/2022	Amount 2900.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAO 317 Massachusetts Ave NE Fl 1 Washington DC 20002-5769	Name of Employer Transaction ID : VVC0PT6MTE6 Occupation	Date (month, day, year) 10/25/2022	Amount 5000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE PREMIER INC. EMPLOYEES' CIVIC ACTION FUND 444 N Capitol St NW S625 Washington DC 20001-1512	Name of Employer Transaction ID : VVC0PT6MRH6 Occupation	Date (month, day, year) 10/25/2022	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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