

# 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> George Conway for Congress			
<b>ADDRESS</b> (number and street) 234 10TH AVE PO BOX 20066			
<b>CITY</b> NEW YORK	<b>STATE</b> NY	<b>ZIP CODE</b> 10011	
<b>2. NAME OF CANDIDATE</b> CONWAY, GEORGE, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House NY 12	
		<b>4. FEC IDENTIFICATION NUMBER</b> C00931527	
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME</b> Brandeis, Clifford, , ,			
<b>MAILING ADDRESS</b> 262 Central Park W Apt 10F CITY New York		<b>Name of Employer</b> Zukerman Gore Brandeis & Crossman, LLP  <b>Transaction ID : 9577840</b>	<b>Date (month, day, year)</b> 06/09/2026  <b>Amount</b> 1000.00
<b>STATE</b> NY	<b>ZIP CODE</b> 10024-3512	<b>Occupation</b> Attorney	
<b>B. FULL NAME</b> Otto, Eileen, , ,			
<b>MAILING ADDRESS</b> 471 N Broadway CITY Jericho		<b>Name of Employer</b> Not Employed  <b>Transaction ID : 9577857</b>	<b>Date (month, day, year)</b> 06/09/2026  <b>Amount</b> 3500.00
<b>STATE</b> NY	<b>ZIP CODE</b> 11753-2106	<b>Occupation</b> Not Employed	
<b>C. FULL NAME</b> Otto, Eileen, , ,			
<b>MAILING ADDRESS</b> 471 N Broadway CITY Jericho		<b>Name of Employer</b> Not Employed  <b>Transaction ID : 9577858</b>	<b>Date (month, day, year)</b> 06/09/2026  <b>Amount</b> 3500.00
<b>STATE</b> NY	<b>ZIP CODE</b> 11753-2106	<b>Occupation</b> Not Employed	
<b>D. FULL NAME</b> Slominski, Paul, , ,			
<b>MAILING ADDRESS</b> 1024 Hillside Ave CITY Deerfield		<b>Name of Employer</b> Cook County Department Of Revenue  <b>Transaction ID : 9494801</b>	<b>Date (month, day, year)</b> 06/09/2026  <b>Amount</b> 2000.00
<b>STATE</b> IL	<b>ZIP CODE</b> 60015-2813	<b>Occupation</b> Business Analyst	
<b>E. FULL NAME</b>			
<b>MAILING ADDRESS</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>
<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>	<b>Amount</b>
<b>SIGNATURE (optional)</b> KYRIACOPOULOS, JANICA, , ,		<b>DATE</b> 06/11/2026	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)