

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 Janelle Bynum for Congress				
ADDRESS (number and street) 10121 SE SUNNYSIDE RD #300				
CITY CLACKAMAS		STATE OR	ZIP CODE 97015	
2. NAME OF CANDIDATE Bynum, Janelle, , ,		3. OFFICE SOUGHT (State and District) House OR 05		4. FEC IDENTIFICATION NUMBER C00843425
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME DEMOCRACY SUMMER LEADERSHIP PAC				Name of Employer Date (month, day, year) 05/17/2024 Amount 1000.00
MAILING ADDRESS 600 Pennsylvania Ave SE Unit 15180				
CITY Washington		STATE DC	ZIP CODE 20003-7508	
Transaction ID : 6035822 Occupation				
B. FULL NAME EVERGREEN PAC				Name of Employer Date (month, day, year) 05/17/2024 Amount 5000.00
MAILING ADDRESS 499 S Capitol St SW Ste 420				
CITY Washington		STATE DC	ZIP CODE 20003-4027	
Transaction ID : 6035831 Occupation				
C. FULL NAME Frost, Jennifer, , ,				Name of Employer The Frost Group Date (month, day, year) 05/17/2024 Amount 1000.00
MAILING ADDRESS 3701 Porter St NW				
CITY Washington		STATE DC	ZIP CODE 20016-3103	
Transaction ID : 6035813 Occupation Fundraising Consultant				
D. FULL NAME Gurley, John, , ,				Name of Employer Not Employed Date (month, day, year) 05/17/2024 Amount 1000.00
MAILING ADDRESS 1407 Dover Rd				
CITY Santa Barbara		STATE CA	ZIP CODE 93103-1865	
Transaction ID : 6035805 Occupation Retired				
E. FULL NAME HIGHER HEIGHTS FOR AMERICA PAC				Name of Employer Date (month, day, year) 05/17/2024 Amount 2000.00
MAILING ADDRESS 147 Prince St Ste 30				
CITY Brooklyn		STATE NY	ZIP CODE 11201-3022	
Transaction ID : 6035829 Occupation				
SIGNATURE (optional) Jackson, Sue, , ,			DATE 05/19/2024	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.

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	Amount
Hodson, John, , , 2 Shorehaven Rd Norwalk CT 06855-2807		AmWINS 05/17/2024	1000.00
Transaction ID : 6035811			
Occupation			
Insurance			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	Amount
Kardon, Joshua, , , 38643 SE 70Th St Washougal WA 98671-4210		Three Arch Strategies 05/18/2024	1500.00
Transaction ID : 6035803			
Occupation			
Government Relations			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	Amount
Shackelford, Lee, , , 116 Preston Rd Columbus OH 43209-1653		Yoga On High 05/17/2024	1500.00
Transaction ID : 6035809			
Occupation			
Yoga Instructor			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	Amount
Stryker, Pat, , , 262 E Mountain Ave Fort Collins CO 80524-2835		Self Employed 05/17/2024	3300.00
Transaction ID : 6035806			
Occupation			
Philanthropist			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	Amount
Stryker, Pat, , , 262 E Mountain Ave Fort Collins CO 80524-2835		Self Employed 05/17/2024	3300.00
Transaction ID : 6035807			
Occupation			
Philanthropist			

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
WELCOMEPAC 1032 15Th St NW Ste 247 Washington DC 20005-1502		Name of Employer Transaction ID : 6035824 Occupation	Date (month, day, year) 05/17/2024 Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
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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