

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 Nicole For New York																						
ADDRESS (number and street) PO Box 68																						
CITY South Salem		STATE NY		ZIP CODE 10590																		
2. NAME OF CANDIDATE Malliotakis, Nicole, , ,			3. OFFICE SOUGHT (State and District) House NY 11																			
4. FEC IDENTIFICATION NUMBER C00694778																						
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> A. FULL NAME Sexton, Toni, , , </td> <td> Name of Employer Concierge Home Care </td> <td> Date (month, day, year) 10/30/2022 </td> <td> Amount 2000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 4615 Meadowview Cir </td> <td colspan="2"> Transaction ID : F65-3883783 </td> <td></td> </tr> <tr> <td> CITY Sarasota </td> <td> STATE FL </td> <td> ZIP CODE 34233 </td> <td colspan="3"> Occupation VP Strategic Business Dev </td> </tr> </table>					A. FULL NAME Sexton, Toni, , ,			Name of Employer Concierge Home Care	Date (month, day, year) 10/30/2022	Amount 2000.00	MAILING ADDRESS 4615 Meadowview Cir			Transaction ID : F65-3883783			CITY Sarasota	STATE FL	ZIP CODE 34233	Occupation VP Strategic Business Dev		
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SIGNATURE (optional) Schwartz, Laura, A, , [Electronically Filed]				DATE 11/01/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																	

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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)