

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 JD VANCE FOR SENATE INC				
ADDRESS (number and street) PO BOX 6564				
CITY Cincinnati		STATE OH		ZIP CODE 45206
2. NAME OF CANDIDATE VANCE, J, D, ,			3. OFFICE SOUGHT (State and District) Senate OH	
4. FEC IDENTIFICATION NUMBER C00783142				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME DORNAU, PETER, , ,				
MAILING ADDRESS 504 WEST ST # 2			Name of Employer STARBRITE	
CITY UNION CITY			Date (month, day, year) 10/26/2022	
STATE NJ			Amount 1000.00	
ZIP CODE 07087-2812			Transaction ID : TX249023	
Occupation CEO				
B. FULL NAME ERICKSON, DAVID, , ,				
MAILING ADDRESS 1573 CALLE CANDELA			Name of Employer RETIRED	
CITY LA JOLLA			Date (month, day, year) 10/26/2022	
STATE CA			Amount 1000.00	
ZIP CODE 92037-7108			Transaction ID : TX247039	
Occupation RETIRED				
C. FULL NAME HUGHES, DANIEL, , ,				
MAILING ADDRESS 2821 SOUTH BAYSHORE DRIVE			Name of Employer METRO COMMERCIAL	
CITY MIAMI			Date (month, day, year) 10/26/2022	
STATE FL			Amount 1000.00	
ZIP CODE 33133-6019			Transaction ID : TX245731	
Occupation COMMERCIAL REAL ESTATE				
D. FULL NAME ORWIG, THEODORE, , ,				
MAILING ADDRESS 10 FLATCREEK PL			Name of Employer RETIRED	
CITY SPRING			Date (month, day, year) 10/26/2022	
STATE TX			Amount 1000.00	
ZIP CODE 77381-6103			Transaction ID : TX246043	
Occupation RETIRED				
E. FULL NAME POMERANC, JASON, , ,				
MAILING ADDRESS 388 WEST BROADWAY			Name of Employer SELF EMPLOYED	
CITY NEW YORK			Date (month, day, year) 10/25/2022	
STATE NY			Amount 1000.00	
ZIP CODE 10012-			Transaction ID : TX249489	
Occupation REAL ESTATE				
SIGNATURE (optional) LISKER, LISA, , ,			DATE 10/27/2022	
[Electronically Filed]			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)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
SACKETT, MARILYN, , , 2431 MAHONING ROAD LAKE MILTON OH 44429-9692	RETIRED Transaction ID : TX249378 Occupation RETIRED	10/26/2022	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE SANGALLI, SCOTT, , , 4408 OVERTON CREST STREET FORT WORTH TX 76109-2521	Name of Employer SELF Transaction ID : TX247614 Occupation HOME BUILDER	Date (month, day, year) 10/26/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE SIG SAUER PAC, SIG SAUER PAC, , , 72 PEASE BLVD PORTSMOUTH NH 03801-6801	Name of Employer SIG SAUER Transaction ID : TX247649 Occupation MANUFACTURING	Date (month, day, year) 10/26/2022	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE SIGERICH, WALT, , , 6373 E SENITA CIRCLE SCOTTSDALE AZ 85266-7329	Name of Employer RETIRED Transaction ID : TX245717 Occupation RETIRED	Date (month, day, year) 10/26/2022	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE WAGNER, CLIFFORD, , , P.O. BOX108 MOUNT HOOD PARKDAL OR 97041-0108	Name of Employer RETIRED Transaction ID : TX248176 Occupation RETIRED	Date (month, day, year) 10/26/2022	Amount 1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE WAID, CHARLIE, , , 2718 SILVERHORN DRIVE KATY TX 77450-7517			
Name of Employer CHARTER BROKERAGE Transaction ID : TX247806 Occupation CEO		Date (month, day, year) 10/26/2022 Amount 1500.00	
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	