

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 KUMAR FOR CONGRESS																						
ADDRESS (number and street) 2200 LAURELWOOD RD.																						
CITY SANTA CLARA		STATE CA		ZIP CODE 95054																		
2. NAME OF CANDIDATE Kumar, Rishi, , ,			3. OFFICE SOUGHT (State and District) House CA 16																			
4. FEC IDENTIFICATION NUMBER C00695866																						
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 Lalia, Manprit, , , </td> <td> Name of Employer Digital Cues </td> <td> Date (month, day, year) 10/21/2022 </td> <td> Amount 2900.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 2101 Valparaiso Avenue </td> <td colspan="2"> Transaction ID : WFT2022921118-1 </td> </tr> <tr> <td> CITY Menlo Park </td> <td> STATE CA </td> <td> ZIP CODE 94025 </td> <td colspan="3"> Occupation CEO </td> </tr> </table>					A. FULL NAME Lalia, Manprit, , ,			Name of Employer Digital Cues	Date (month, day, year) 10/21/2022	Amount 2900.00	MAILING ADDRESS 2101 Valparaiso Avenue			Transaction ID : WFT2022921118-1		CITY Menlo Park	STATE CA	ZIP CODE 94025	Occupation CEO			
A. FULL NAME Lalia, Manprit, , ,			Name of Employer Digital Cues	Date (month, day, year) 10/21/2022	Amount 2900.00																	
MAILING ADDRESS 2101 Valparaiso Avenue			Transaction ID : WFT2022921118-1																			
CITY Menlo Park	STATE CA	ZIP CODE 94025	Occupation CEO																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> B. FULL NAME Lalia, Param, , , </td> <td> Name of Employer Digital Cues </td> <td> Date (month, day, year) 10/21/2022 </td> <td> Amount 2900.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 2101 Valparaiso Avenue </td> <td colspan="2"> Transaction ID : WFT20229211111-1 </td> </tr> <tr> <td> CITY Menlo Park </td> <td> STATE CA </td> <td> ZIP CODE 94025 </td> <td colspan="3"> Occupation Founder </td> </tr> </table>					B. FULL NAME Lalia, Param, , ,			Name of Employer Digital Cues	Date (month, day, year) 10/21/2022	Amount 2900.00	MAILING ADDRESS 2101 Valparaiso Avenue			Transaction ID : WFT20229211111-1		CITY Menlo Park	STATE CA	ZIP CODE 94025	Occupation Founder			
B. FULL NAME Lalia, Param, , ,			Name of Employer Digital Cues	Date (month, day, year) 10/21/2022	Amount 2900.00																	
MAILING ADDRESS 2101 Valparaiso Avenue			Transaction ID : WFT20229211111-1																			
CITY Menlo Park	STATE CA	ZIP CODE 94025	Occupation Founder																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> C. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="3"> Occupation </td> </tr> </table>					C. FULL NAME 			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 						CITY	STATE	ZIP CODE	Occupation		
C. FULL NAME 			Name of Employer	Date (month, day, year)	Amount																	
MAILING ADDRESS 																						
CITY	STATE	ZIP CODE	Occupation																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> D. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="3"> Occupation </td> </tr> </table>					D. FULL NAME 			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 						CITY	STATE	ZIP CODE	Occupation		
D. FULL NAME 			Name of Employer	Date (month, day, year)	Amount																	
MAILING ADDRESS 																						
CITY	STATE	ZIP CODE	Occupation																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> E. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="3"> Occupation </td> </tr> </table>					E. FULL NAME 			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 						CITY	STATE	ZIP CODE	Occupation		
E. FULL NAME 			Name of Employer	Date (month, day, year)	Amount																	
MAILING ADDRESS 																						
CITY	STATE	ZIP CODE	Occupation																			
SIGNATURE (optional) Kumar, Rishi, , ,				DATE 10/21/2022	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)