

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 Eric Sorensen for Illinois			
ADDRESS (number and street) PO Box 1172			
CITY Moline	STATE IL	ZIP CODE 61265	
2. NAME OF CANDIDATE Sorensen, Eric, , ,		3. OFFICE SOUGHT (State and District) House IL 00	
		4. FEC IDENTIFICATION NUMBER C00793935	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE		Name of Employer	Date (month, day, year)
MAILING ADDRESS 80 F St NW		Transaction ID : 4958595	03/15/2024
CITY Washington	STATE DC	ZIP CODE 20001-1528	Amount 2500.00
B. FULL NAME American Postal Workers Union Committee on Political Action (APWU COPA)		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1300 L St NW		Transaction ID : 4958596	03/15/2024
CITY Washington	STATE DC	ZIP CODE 20005-4107	Amount 1500.00
C. FULL NAME Brown, John, , ,		Name of Employer Not Employed	Date (month, day, year)
MAILING ADDRESS 736 17th St		Transaction ID : 4958590	03/15/2024
CITY Rock Island	STATE IL	ZIP CODE 61201-2560	Amount 1000.00
D. FULL NAME Casey, Daniel, , ,		Name of Employer STERLING ENGINEERING INC.	Date (month, day, year)
MAILING ADDRESS 2659 N Orchard St		Transaction ID : 4956900	03/15/2024
CITY Chicago	STATE IL	ZIP CODE 60614-1548	Amount 1000.00
E. FULL NAME End Citizens United		Name of Employer	Date (month, day, year)
MAILING ADDRESS 100 M St SE Ste 1050		Transaction ID : 4958597	03/15/2024
CITY Washington	STATE DC	ZIP CODE 20003-5167	Amount 1500.00
SIGNATURE (optional) Kraft, Laura, , ,		DATE 03/17/2024	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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ADDRESS (number and street) PO Box 1172				
CITY, STATE, and ZIP CODE Moline IL 61265				
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A. FULL NAME, MAILING ADDRESS AND ZIP CODE				
Fancher, James, R., , 1042 N Eagle St Naperville IL 60563-2504		Name of Employer Retired Transaction ID : 4958593 Occupation Retired	Date (month, day, year) 03/15/2024	Amount 3300.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE				
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND 12200 N Ambassador Dr Ste 301 Kansas City MO 64163-1244		Name of Employer Transaction ID : 4958565 Occupation	Date (month, day, year) 03/15/2024	Amount 5000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE				
Moline, Janet, , , 3836 28th Ave Rock Island IL 61201-5801		Name of Employer Not Employed Transaction ID : 4958592 Occupation Retired	Date (month, day, year) 03/15/2024	Amount 2700.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE				
Moline, Norman, , , 3836 28th Ave Rock Island IL 61201-5801		Name of Employer Not Employed Transaction ID : 4958591 Occupation Not Employed	Date (month, day, year) 03/15/2024	Amount 2300.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE				
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE 277 S Washington St Ste 500 Alexandria VA 22314-3672		Name of Employer Transaction ID : 4958567 Occupation	Date (month, day, year) 03/15/2024	Amount 1000.00

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE RENEWABLE FUELS ASSOCIATION PAC (RENEWABLE FUELS PAC) 601 Pennsylvania Ave NW Ste 200 Washington DC 20004-2601		Name of Employer Date (month, day, year) 03/15/2024 Amount 1000.00 Transaction ID : 4958420 Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	