

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 MARC FOR US INC.				
ADDRESS (number and street) PO BOX 219				
CITY LEEDS		STATE NY		ZIP CODE 12451-0219
2. NAME OF CANDIDATE MOLINARO, MARCUS, J., ,			3. OFFICE SOUGHT (State and District) House NY 19	
4. FEC IDENTIFICATION NUMBER C00789586				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME MACK, EARLE, , ,				Name of Employer RETIRED Transaction ID : 60C04DD4351BB4E9 Occupation RETIRED
MAILING ADDRESS 1 BRIDGE PLZ N STE 660				
CITY FORT LEE		STATE NJ	ZIP CODE 07024-7102	
Date (month, day, year) 06/18/2024				
Amount 2000.00				
B. FULL NAME SWEENEY, JOHN, , ,				Name of Employer SELF EMPLOYED Transaction ID : 66364D1E5ED764246 Occupation ATTORNEY
MAILING ADDRESS 1 STRATFORD DR				
CITY CLIFTON PARK		STATE NY	ZIP CODE 12065-1737	
Date (month, day, year) 06/18/2024				
Amount 1000.00				
C. FULL NAME VEEDER, DAVID, , ,				Name of Employer RYAN LLC Transaction ID : 61F17B7342FF843A3 Occupation CPA
MAILING ADDRESS 5705 RIDGETOWN CIR				
CITY DALLAS		STATE TX	ZIP CODE 75230-2657	
Date (month, day, year) 06/18/2024				
Amount 2000.00				
D. FULL NAME PINKUS, LILLIAN, , ,				Name of Employer RETIRED Transaction ID : 61AD9016F5E7C4D4 Occupation RETIRED
MAILING ADDRESS 7115 AZALEA LN				
CITY DALLAS		STATE TX	ZIP CODE 75230-3633	
Date (month, day, year) 06/18/2024				
Amount 2000.00				
E. FULL NAME HUDSON VALLEY MAJORITY MAKERS				Name of Employer Transaction ID : 63F1B6C4237A44670 Occupation
MAILING ADDRESS PO BOX 87				
CITY SOUTH SALEM		STATE NY	ZIP CODE 10590	
Date (month, day, year) 06/18/2024				
Amount 1500.00				
SIGNATURE (optional) LISKER, LISA, , ,			DATE 06/20/2024	
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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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
SIEMENS CORPORATION PAC		Name of Employer	
200 MASSACHUSETTS AVE NW		Date (month, day, year)	
STE 600		06/19/2024	
WASHINGTON DC 20001-1429		Amount 1000.00	
		Transaction ID : 64C8376D6C6CC4DE6921	
		Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING PAC INC		Name of Employer	
1900 K ST NW		Date (month, day, year)	
STE 700		06/19/2024	
WASHINGTON DC 20006-1135		Amount 1000.00	
		Transaction ID : 627F087F1C0D04429A65	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT		Name of Employer	
700 13TH ST NW		Date (month, day, year)	
STE 350		06/19/2024	
WASHINGTON DC 20005-6621		Amount 2000.00	
		Transaction ID : 68011848F4B7043CFA74	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
AMERICA'S CREDIT UNIONS PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC.		Name of Employer	
99 M ST SE		Date (month, day, year)	
STE 300		06/19/2024	
WASHINGTON DC 20003-3957		Amount 2500.00	
		Transaction ID : 6F564833B5C784572B7D	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A - FEDERAL ONLY		Name of Employer	
200 PARK AVE		Date (month, day, year)	
NEW YORK NY 10166-0005		06/19/2024	
		Amount 1000.00	
		Transaction ID : 6D39725A029E8472A86E	
		Occupation	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
BOVA, DAVID, , , 3225 KAREN DR DELRAY BEACH FL 33483-6205		Name of Employer MILLBROOK WINERY Transaction ID : 6F225430095BD4146B6B Occupation EXECUTIVE	
		Date (month, day, year) 06/19/2024	Amount 3300.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	Date (month, day, year)
		Occupation	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	Date (month, day, year)
		Occupation	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	Date (month, day, year)
		Occupation	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	Date (month, day, year)
		Occupation	Amount

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