

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 Callie Barr for Congress				
ADDRESS (number and street) P.O. BOX 6921				
CITY TRAVERSE CITY		STATE MI	ZIP CODE 49696	
2. NAME OF CANDIDATE Barr, Callie, , ,			3. OFFICE SOUGHT (State and District) House MI 01	
4. FEC IDENTIFICATION NUMBER C00837054				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME Bowman, Robert, , ,		Name of Employer Self-Employed		Date (month, day, year) 07/21/2026
MAILING ADDRESS 175 11Th Ave S		Transaction ID : 14665860		Amount 1000.00
CITY Naples	STATE FL	ZIP CODE 34102-7020	Occupation Self-Employed	
B. FULL NAME Macinnes, Christina, , ,		Name of Employer CRYSTAL MOUNTAIN		Date (month, day, year) 07/22/2026
MAILING ADDRESS 4751 Arbutus Ln		Transaction ID : 14666928		Amount 1000.00
CITY Beulah	STATE MI	ZIP CODE 49617-9716	Occupation VICE PRESIDENT	
C. FULL NAME Wanek, Thomas, , ,		Name of Employer Sincera Consulting		Date (month, day, year) 07/22/2026
MAILING ADDRESS 3735 Dohm Dr		Transaction ID : 14667405		Amount 1000.00
CITY Charlevoix	STATE MI	ZIP CODE 49720-8201	Occupation President	
D. FULL NAME		Name of Employer		Date (month, day, year)
MAILING ADDRESS				Amount
CITY	STATE	ZIP CODE	Occupation	
E. FULL NAME		Name of Employer		Date (month, day, year)
MAILING ADDRESS				Amount
CITY	STATE	ZIP CODE	Occupation	
SIGNATURE (optional) Barr, Matt, , ,			DATE 07/23/2026	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.

FEC FORM 6
(Revised 03/2016)