

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 Pete Stauber for Congress					
ADDRESS (number and street) 23 W Central Entrance PMB #333					
CITY Duluth		STATE MN		ZIP CODE 55811	
2. NAME OF CANDIDATE Stauber, Peter, Allen, ,			3. OFFICE SOUGHT (State and District) House MN 08		4. FEC IDENTIFICATION NUMBER C00650697
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____					
A. FULL NAME BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)				Name of Employer Transaction ID : TX65541	
MAILING ADDRESS 1201 15TH STREET NW				Date (month, day, year) 10/23/2024	
CITY WASHINGTON		STATE DC		Amount 3500.00	
ZIP CODE 20005-2842		Occupation 			
B. FULL NAME XCEL ENERGY EMPLOYEE PAC				Name of Employer Transaction ID : TX65542	
MAILING ADDRESS 701 PENNSYLVANIA AVENUE NORTHWEST				Date (month, day, year) 10/23/2024	
CITY WASHINGTON		STATE DC		Amount 1000.00	
ZIP CODE 20004-2608		Occupation 			
C. FULL NAME HALLIBURTON COMPANY PAC				Name of Employer Transaction ID : TX65543	
MAILING ADDRESS 3000 NORTH SAM HOUSTON PARKWAY EAS				Date (month, day, year) 10/23/2024	
CITY HOUSTON		STATE TX		Amount 2500.00	
ZIP CODE 77032-3219		Occupation 			
D. FULL NAME ALBRECHT, ARLIN, , ,				Name of Employer RETIRED	
MAILING ADDRESS 30567 LAKEVIEW AVE				Date (month, day, year) 10/23/2024	
CITY RED WING		STATE MN		Amount 3000.00	
ZIP CODE 55066-5655		Occupation RETIRED			
E. FULL NAME ALBRECHT, MARILYN, , ,				Name of Employer RETIRED	
MAILING ADDRESS 30567 LAKEVIEW AVE				Date (month, day, year) 10/23/2024	
CITY RED WING		STATE MN		Amount 3000.00	
ZIP CODE 55066-5655		Occupation RETIRED			
SIGNATURE (optional) Datwyler, Thomas, , ,				DATE 10/26/2024	
For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov					

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			
BEIER, WALTER, , , 102 WINONA ST E DULUTH MN 55803-1808		Name of Employer DIOCESE OF DULUTH Transaction ID : TX65537 Occupation DEACON	
		Date (month, day, year) 10/23/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
COTE, JAMES, , , 7440 SHANNON DR. MINNEAPOLIS MN 55439-2637		Name of Employer RETIRED Transaction ID : TX65840 Occupation RETIRED	
		Date (month, day, year) 10/23/2024	
		Amount 1000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
DALLY, DEAN, , , 20476 FURUBY RD TAYLORS FALLS MN 55084-1894		Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX65839 Occupation INFORMATION REQUESTED PER BI	
		Date (month, day, year) 10/23/2024	
		Amount 1000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
FAULCONBRIDGE, JAMES, , , 2400 KELLER PKWY MAPLEWOOD MN 55109-1917		Name of Employer KARGES-FAULCONBRIDGE, INC Transaction ID : TX65842 Occupation ENGINEERING	
		Date (month, day, year) 10/23/2024	
		Amount 1000.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
HELGESON, RANDI, , , 16485 ELLERDALE LN EDEN PRAIRIE MN 55346-1431		Name of Employer RETIRED Transaction ID : TX65614 Occupation RETIRED	
		Date (month, day, year) 10/23/2024	
		Amount 3300.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE HOLDEN, GEORGE, , , 6633 BISCAYNE BLVD EDINA MN 55436-1703		Name of Employer HOLDEN BUSINESS FORMS Transaction ID : TX65613 Occupation CHAIRMAN & CEO Date (month, day, year) 10/23/2024 Amount 2000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MOREY, LOREN, A., , 38503 30TH AVE MOTLEY MN 56466-2006		Name of Employer RETIRED Transaction ID : TX65841 Occupation RETIRED Date (month, day, year) 10/23/2024 Amount 1000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE WYLIE, CRAIG, , , 3481 MAJESTIC PINE DR. STURGEON LAKE MN 55783-		Name of Employer RETIRED Transaction ID : TX65612 Occupation RETIRED Date (month, day, year) 10/23/2024 Amount 1000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation	