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 BURLISON FOR CONGRESS

ADDRESS (number and street) 2135 E. INDEPENDENCE AVE.
#1007

CITY	STATE	ZIP CODE
SPRINGFIELD	MO	65804

2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER
BURLISON, ERIC, , ,	House MO 07	C00788414

5. IS THIS AN AMENDMENT? [X] NO, THIS IS A NEW FILING [ ] YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____

A. FULL NAME / MAILING ADDRESS / CITY / STATE / ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
MORELOCK, WAYNE, , , 3900 E BRIDGEND SPRINGFIELD MO 65809	MORELOCK BUILDERS & ASSOC INC OWNER **Transaction ID : F6.20626**	07/15/2022	1000.00
B. FULL NAME SPILLMAN, MORGAN, , , MAILING ADDRESS 5936 SOUTH ROANOKE AVENUE SPRINGFIELD MO 65810	Name of Employer REMAX Occupation REALTOR **Transaction ID : F6.20624**	Date (month, day, year) 07/15/2022	Amount 900.00
C. FULL NAME SPILLMAN, MORGAN, , , MAILING ADDRESS 5936 SOUTH ROANOKE AVENUE SPRINGFIELD MO 65810	Name of Employer REMAX Occupation REALTOR **Transaction ID : F6.20625**	Date (month, day, year) 07/15/2022	Amount 100.00
D. FULL NAME SWANN, MIKE, , , MAILING ADDRESS 3850 S NATIONAL AVE STE 705 SPRINGFIELD MO 65807	Name of Employer SWANN DERMATOLOGY Occupation MD **Transaction ID : F6.20627**	Date (month, day, year) 07/15/2022	Amount 1000.00
E. FULL NAME WHEELER, WADE, , , MAILING ADDRESS 3121 S PICKWICK PLACE SPRINGFIELD MO 65804	Name of Employer WADE WHEELER DDS PC Occupation DENTIST **Transaction ID : F6.20628**	Date (month, day, year) 07/16/2022	Amount 1000.00

SIGNATURE (optional)
Phillips, Robert, , ,
[Electronically Filed]

DATE
07/17/2022

For further information contact:
Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-694-1100

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FEC FORM 6
(Revised 03/2016)