

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 LANGWORTHY FOR CONGRESS																					
ADDRESS (number and street) PO BOX 120																					
CITY CLARENCE	STATE NY	ZIP CODE 14031-0120																			
2. NAME OF CANDIDATE LANGWORTHY, NICK, , ,		3. OFFICE SOUGHT (State and District) House NY 23																			
4. FEC IDENTIFICATION NUMBER C00817932																					
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> A. FULL NAME MURRAY, NORMAN, , , </td> <td style="padding: 5px;"> Name of Employer RETIRED </td> <td style="padding: 5px;"> Date (month, day, year) 08/09/2022 </td> <td style="padding: 5px;"> Amount 2900.00 </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS P O BOX 466 </td> <td colspan="2" style="padding: 5px;"> Transaction ID : 6B9911D8F925747C5 </td> <td></td> </tr> <tr> <td style="padding: 5px;"> CITY EAST AMHERST </td> <td style="padding: 5px;"> STATE NY </td> <td style="padding: 5px;"> ZIP CODE 14051 </td> <td colspan="2" style="padding: 5px;"> Occupation RETIRED </td> <td></td> </tr> </table>				A. FULL NAME MURRAY, NORMAN, , ,			Name of Employer RETIRED	Date (month, day, year) 08/09/2022	Amount 2900.00	MAILING ADDRESS P O BOX 466			Transaction ID : 6B9911D8F925747C5			CITY EAST AMHERST	STATE NY	ZIP CODE 14051	Occupation RETIRED		
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SIGNATURE (optional) BROGHAMER, KEVIN, , , [Electronically Filed]			DATE 08/10/2022	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)