

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 BURCHETT FOR CONGRESS							
ADDRESS (number and street) PO BOX 51345							
CITY KNOXVILLE	STATE TN	ZIP CODE 37950					
2. NAME OF CANDIDATE BURCHETT, TIM, , ,		3. OFFICE SOUGHT (State and District) House TN 02					
4. FEC IDENTIFICATION NUMBER C00652149							
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 (BUILDPAC) MAILING ADDRESS 1201 15TH STREET, NW <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">CITY WASHINGTON</td> <td style="width: 15%; border: none;">STATE DC</td> <td style="width: 15%; border: none;">ZIP CODE 20005</td> <td style="width: 45%; border: none;">Name of Employer Transaction ID : F6.28727 Occupation</td> </tr> </table>				CITY WASHINGTON	STATE DC	ZIP CODE 20005	Name of Employer Transaction ID : F6.28727 Occupation
CITY WASHINGTON	STATE DC	ZIP CODE 20005	Name of Employer Transaction ID : F6.28727 Occupation				
B. FULL NAME TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC) MAILING ADDRESS 325 7TH STREET, NW, SUITE 1000 <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">CITY WASHINGTON</td> <td style="width: 15%; border: none;">STATE DC</td> <td style="width: 15%; border: none;">ZIP CODE 20004</td> <td style="width: 45%; border: none;">Name of Employer Transaction ID : F6.28726 Occupation</td> </tr> </table>		CITY WASHINGTON	STATE DC	ZIP CODE 20004	Name of Employer Transaction ID : F6.28726 Occupation	Date (month, day, year) 07/27/2022	Amount 2500.00
CITY WASHINGTON	STATE DC	ZIP CODE 20004	Name of Employer Transaction ID : F6.28726 Occupation				
C. FULL NAME MAILING ADDRESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">CITY</td> <td style="width: 15%; border: none;">STATE</td> <td style="width: 15%; border: none;">ZIP CODE</td> <td style="width: 45%; border: none;">Name of Employer Occupation</td> </tr> </table>		CITY	STATE	ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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CITY	STATE	ZIP CODE	Name of Employer Occupation				
SIGNATURE (optional) Goins, Robert, L., , [Electronically Filed]			DATE 07/28/2022	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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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)