

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 Marc Veasey Congressional Campaign Committee																					
ADDRESS (number and street) PO Box 50084																					
CITY Fort Worth	STATE TX	ZIP CODE 76105																			
2. NAME OF CANDIDATE Veasey, Marc, Allison, ,		3. OFFICE SOUGHT (State and District) House TX 33																			
4. FEC IDENTIFICATION NUMBER C00506832																					
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____																					
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SIGNATURE (optional) Roe, Chelsea, ,			DATE 10/26/2022		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																
<i>[Electronically Filed]</i>																					

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 INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC) 1101 Pennsylvania Ave NW Ste 200 Washington DC 20004-2514			
Name of Employer Transaction ID : 6650079 Occupation		Date (month, day, year) 10/24/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE PAKISTANI AMERICAN PUBLIC AFFAIRS COMMITTEE PAK-PAC 20 F St NW # 775 Washington DC 20001-6700			
Name of Employer Transaction ID : 6650060 Occupation		Date (month, day, year) 10/24/2022	Amount 5000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Shabnam, Saba, , , 400 Wellington Ct Southlake TX 76092-7807			
Name of Employer Self Transaction ID : 6650073 Occupation Physician		Date (month, day, year) 10/24/2022	Amount 1450.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year)	Amount
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