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
April McClain Delaney for Congress

ADDRESS (number and street) PO BOX 83940

CITY	STATE	ZIP CODE
Gaithersburg	MD	20883

2. NAME OF CANDIDATE
McClain Delaney, April, , ,

3. OFFICE SOUGHT (State and District)
House MD 06

4. FEC IDENTIFICATION NUMBER
C00854471

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

A. FULL NAME ALLIANCE FOR RETIRED AMERICANS POLITICAL ACTION FUND **MAILING ADDRESS** 815 16Th St NW Fl 4 **CITY** Washington **STATE** DC **ZIP CODE** 20006-4101	Name of Employer **Transaction ID : 11522099** Occupation	Date (month, day, year) 06/17/2026	Amount 1000.00
B. FULL NAME Johnsen, R Christian, , , **MAILING ADDRESS** 4636 Garfield St NW **CITY** Washington **STATE** DC **ZIP CODE** 20007-1025	Name of Employer Jones Walker LLP **Transaction ID : 11524586** Occupation Attorney	Date (month, day, year) 06/18/2026	Amount 1000.00
C. FULL NAME Karplus, Barbara, , , **MAILING ADDRESS** 4041 Barcelona Pl # 91320 **CITY** Newbury Park **STATE** CA **ZIP CODE** 91320-2803	Name of Employer Self **Transaction ID : 11524591** Occupation Tax Practitioner	Date (month, day, year) 06/18/2026	Amount 3500.00
D. FULL NAME NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE / AMERICAN COLLEGE OF EMERGENCY PHYSICIANS **MAILING ADDRESS** 4950 W Royal Ln **CITY** Irving **STATE** TX **ZIP CODE** 75063-2524	Name of Employer **Transaction ID : 11524580** Occupation	Date (month, day, year) 06/18/2026	Amount 1500.00
E. FULL NAME Rothman, Karen, , , **MAILING ADDRESS** 11209 Fall River Ct **CITY** Potomac **STATE** MD **ZIP CODE** 20854-2233	Name of Employer Not Employed **Transaction ID : 11524581** Occupation Not Employed	Date (month, day, year) 06/18/2026	Amount 500.00

SIGNATURE (optional)
Martin, David, , ,

DATE
06/19/2026

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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Gaithersburg MD 20883

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
Rothman, Karen, , , 11209 Fall River Ct Potomac MD 20854-2233	Not Employed **Transaction ID : 11524582** Occupation: Not Employed	06/18/2026	500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
Womer, Rod, , , 4041 Barcelona Pl Newbury Park CA 91320-2803	Not Employed **Transaction ID : 11524592** Occupation: Not Employed	06/18/2026	3500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount