

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 PALLONE FOR CONGRESS																					
ADDRESS (number and street) PO BOX 3176																					
CITY LONG BRANCH	STATE NJ	ZIP CODE 07740																			
2. NAME OF CANDIDATE Pallone, Frank, , , Jr		3. OFFICE SOUGHT (State and District) House NJ 06																			
4. FEC IDENTIFICATION NUMBER C00226928																					
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 American College of Rheumatology PAC (RheumPAC) </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) 06/02/2022 </td> <td style="padding: 5px;"> Amount 5000.00 </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS C00432823 2200 Lake Boulevard NE </td> <td colspan="3" style="padding: 5px;"> Transaction ID : WFT2022531752-1 </td> </tr> <tr> <td style="padding: 5px;"> CITY Atlanta </td> <td style="padding: 5px;"> STATE GA </td> <td style="padding: 5px;"> ZIP CODE 30319 </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				A. FULL NAME American College of Rheumatology PAC (RheumPAC)			Name of Employer	Date (month, day, year) 06/02/2022	Amount 5000.00	MAILING ADDRESS C00432823 2200 Lake Boulevard NE			Transaction ID : WFT2022531752-1			CITY Atlanta	STATE GA	ZIP CODE 30319	Occupation		
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SIGNATURE (optional) Nichols, Peter, D, ,			DATE 06/03/2022		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																
[Electronically Filed]																					

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FEC FORM 6
(Revised 03/2016)