

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 Robin Kelly for Congress					
ADDRESS (number and street) PO Box 3411					
CITY Chicago		STATE IL		ZIP CODE 60654	
2. NAME OF CANDIDATE Kelly, Robin, , ,			3. OFFICE SOUGHT (State and District) House IL 02		4. FEC IDENTIFICATION NUMBER C00539866
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____					
A. FULL NAME American Chemistry Council PAC			Name of Employer		Date (month, day, year)
MAILING ADDRESS 700 2nd St NE			Transaction ID : 8202644		Amount 1000.00
CITY Washington	STATE DC	ZIP CODE 20002-8100	Occupation		
B. FULL NAME AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE			Name of Employer		Date (month, day, year)
MAILING ADDRESS 2400 N St NW			Transaction ID : 8191079		Amount 1000.00
CITY Washington	STATE DC	ZIP CODE 20037-1153	Occupation		
C. FULL NAME Beidler, Prudence, R., ,			Name of Employer Not Employed		Date (month, day, year)
MAILING ADDRESS 20 Stone Gate Rd			Transaction ID : 8191032		Amount 1500.00
CITY Lake Forest	STATE IL	ZIP CODE 60045-2433	Occupation volunteer		
D. FULL NAME JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE			Name of Employer		Date (month, day, year)
MAILING ADDRESS 1 Johnson and Johnson Plz			Transaction ID : 8191088		Amount 1000.00
CITY New Brunswick	STATE NJ	ZIP CODE 08933-0001	Occupation		
E. FULL NAME Lundbeck LLC Employee PAC			Name of Employer		Date (month, day, year)
MAILING ADDRESS 6 Parkway North Blvd Ste 400			Transaction ID : 8191081		Amount 2000.00
CITY Deerfield	STATE IL	ZIP CODE 60015-2522	Occupation		
SIGNATURE (optional) Presta, Anthony, , ,				DATE 10/26/2024	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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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)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND 1 Constitution Ave NE Washington DC 20002-5618		Date (month, day, year) 10/24/2024	Amount 2500.00
Transaction ID : 8191127			
Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Otsuka America Pharmaceutical INC PAC 2440 Research Blvd Rockville MD 20850-3238		Date (month, day, year) 10/24/2024	Amount 1500.00
Transaction ID : 8191102			
Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Rizvi, Zafar, , , 2196 Kershner Rd Dayton OH 45414-1268		Date (month, day, year) 10/24/2024	Amount 2500.00
Transaction ID : 8185436			
Occupation President & CEO			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer S.C. Johnson & Son, INC. Political Action Committee 1667 K St NW Ste 650 Washington DC 20006-1652		Date (month, day, year) 10/24/2024	Amount 2000.00
Transaction ID : 8202646			
Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer SOCIETY FOR VASCULAR SURGERY POLITICAL ACTION COMMITTEE 9400 W Higgins Rd Ste 315 Rosemont IL 60018-4975		Date (month, day, year) 10/24/2024	Amount 2500.00
Transaction ID : 8191100			
Occupation			

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
The Society of Thoracic Surgeons PAC		Name of Employer	
20 F St NW		Date (month, day, year)	
Ste 310C		10/24/2024	
Washington DC 20001-6700		Amount	
		1000.00	
		Transaction ID : 8191077	
		Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
US Bank Corporation PAC		Name of Employer	
800 Nicollet Mall		Date (month, day, year)	
Minneapolis MN 55402-7000		10/24/2024	
		Amount	
		1000.00	
		Transaction ID : 8191126	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	

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