

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 Mike Haridopolos for Congress				
ADDRESS (number and street) 610 S Boulevard				
CITY Tampa		STATE FL		ZIP CODE 33606-2647
2. NAME OF CANDIDATE Haridopolos, Mike, , ,			3. OFFICE SOUGHT (State and District) House FL 08	
4. FEC IDENTIFICATION NUMBER C00877324				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME Nissen, Larry, , ,			Name of Employer n/a	Date (month, day, year) 10/29/2024
MAILING ADDRESS 2424 Willowbrook Road			Transaction ID : 611B05551AE4943C5	Amount 2500.00
CITY Merritt Island	STATE FL	ZIP CODE 32952	Occupation retired	
B. FULL NAME Nissen, Carol, , ,			Name of Employer n/a	Date (month, day, year) 10/29/2024
MAILING ADDRESS 2424 Willowbrook Road			Transaction ID : 6B56D3DBE3FFF4AD	Amount 2500.00
CITY Merritt Island	STATE FL	ZIP CODE 32952	Occupation retired	
C. FULL NAME Oral And Maxillofacial Surgery Political Action Committee			Name of Employer	Date (month, day, year) 10/29/2024
MAILING ADDRESS 9700 W. Byrn Mawr Avenue			Transaction ID : 601CD9BC5592D42B	Amount 5000.00
CITY Rosemont	STATE IL	ZIP CODE 60018	Occupation	
D. FULL NAME			Name of Employer	Date (month, day, year)
MAILING ADDRESS				Amount
CITY	STATE	ZIP CODE	Occupation	
E. FULL NAME			Name of Employer	Date (month, day, year)
MAILING ADDRESS				Amount
CITY	STATE	ZIP CODE	Occupation	
SIGNATURE (optional) Watkins, Nancy, , ,			DATE 10/30/2024	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)