

# 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.

|                                                                                                                                                                                |                    |                                                             |  |                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------|--|--------------------------------------------------|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Chris Pappas for Congress                                                                                                               |                    |                                                             |  |                                                  |
| <b>ADDRESS</b> (number and street) PO Box 313                                                                                                                                  |                    |                                                             |  |                                                  |
| <b>CITY</b><br>Manchester                                                                                                                                                      | <b>STATE</b><br>NH | <b>ZIP CODE</b><br>03105                                    |  |                                                  |
| <b>2. NAME OF CANDIDATE</b><br>Pappas, Chris, , ,                                                                                                                              |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House NH 01 |  | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00660464 |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |                    |                                                             |  |                                                  |

  

|                                                     |                    |                               |                                           |                                       |                                                                                                                                                                |
|-----------------------------------------------------|--------------------|-------------------------------|-------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. FULL NAME</b><br>Daitz, Linda, , ,            |                    |                               | Name of Employer<br>Not Employed          | Date (month, day, year)<br>09/03/2022 | Amount<br>2900.00                                                                                                                                              |
| <b>MAILING ADDRESS</b><br>40 E 83rd St              |                    |                               | <b>Transaction ID : VSHA8TSEDQ1</b>       |                                       |                                                                                                                                                                |
| <b>CITY</b><br>New York                             | <b>STATE</b><br>NY | <b>ZIP CODE</b><br>10028-0843 | Occupation<br>Not Employed                |                                       |                                                                                                                                                                |
| <b>B. FULL NAME</b><br>Dow, Abigail, , ,            |                    |                               | Name of Employer<br>Aspire Public Schools | Date (month, day, year)<br>09/03/2022 | Amount<br>2900.00                                                                                                                                              |
| <b>MAILING ADDRESS</b><br>302A W 12th St # 195      |                    |                               | <b>Transaction ID : VSHA8TSEDN5</b>       |                                       |                                                                                                                                                                |
| <b>CITY</b><br>New York                             | <b>STATE</b><br>NY | <b>ZIP CODE</b><br>10014-7906 | Occupation<br>Instructional Coach         |                                       |                                                                                                                                                                |
| <b>C. FULL NAME</b><br>Dow, Abigail, , ,            |                    |                               | Name of Employer<br>Aspire Public Schools | Date (month, day, year)<br>09/03/2022 | Amount<br>2900.00                                                                                                                                              |
| <b>MAILING ADDRESS</b><br>302A W 12th St # 195      |                    |                               | <b>Transaction ID : VSHA8TSEDP3</b>       |                                       |                                                                                                                                                                |
| <b>CITY</b><br>New York                             | <b>STATE</b><br>NY | <b>ZIP CODE</b><br>10014-7906 | Occupation<br>Instructional Coach         |                                       |                                                                                                                                                                |
| <b>D. FULL NAME</b><br>More Perfect Union PAC       |                    |                               | Name of Employer                          | Date (month, day, year)<br>09/03/2022 | Amount<br>2900.00                                                                                                                                              |
| <b>MAILING ADDRESS</b><br>PO Box 15320              |                    |                               | <b>Transaction ID : VSHA8TSED75</b>       |                                       |                                                                                                                                                                |
| <b>CITY</b><br>Washington                           | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20003-0320 | Occupation                                |                                       |                                                                                                                                                                |
| <b>E. FULL NAME</b><br>Van Bokkelen, James, , ,     |                    |                               | Name of Employer<br>N/A                   | Date (month, day, year)<br>09/03/2022 | Amount<br>1900.00                                                                                                                                              |
| <b>MAILING ADDRESS</b><br>45 Hildale Ave            |                    |                               | <b>Transaction ID : VSHA8TSFX36</b>       |                                       |                                                                                                                                                                |
| <b>CITY</b><br>South Hampton                        | <b>STATE</b><br>NH | <b>ZIP CODE</b><br>03827-3513 | Occupation<br>Retired                     |                                       |                                                                                                                                                                |
| <b>SIGNATURE (optional)</b><br>Coffman, Andrea, , , |                    |                               | <b>DATE</b><br>09/05/2022                 |                                       | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>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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| <b>1. NAME OF COMMITTEE IN FULL</b><br>Chris Pappas for Congress                                                                                                            |  |                                                             |  |
| <b>ADDRESS</b> (number and street) PO Box 313                                                                                                                               |  |                                                             |  |
| <b>CITY, STATE, and ZIP CODE</b><br>Manchester NH 03105                                                                                                                     |  |                                                             |  |
| <b>2. NAME OF CANDIDATE</b><br>Pappas, Chris, , ,                                                                                                                           |  | <b>3. OFFICE SOUGHT</b> (State and District)<br>House NH 01 |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00660464                                                                                                                            |  | <i><b>continuation page</b></i>                             |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |  |                                                             |  |
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Van Bokkelen, James, , ,<br><br>45 Hilldale Ave<br><br>South Hampton NH 03827-3513                                     |  |                                                             |  |
| <b>Name of Employer</b><br>N/A<br><br><b>Transaction ID : VSHA8TSFX44</b><br><b>Occupation</b><br>Retired                                                                   |  | <b>Date (month, day, year)</b><br>09/03/2022                |  |
| <b>Amount</b><br>2900.00                                                                                                                                                    |  |                                                             |  |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                           |  |                                                             |  |
| <b>Name of Employer</b>                                                                                                                                                     |  | <b>Date (month, day, year)</b>                              |  |
| <b>Occupation</b>                                                                                                                                                           |  | <b>Amount</b>                                               |  |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                           |  |                                                             |  |
| <b>Name of Employer</b>                                                                                                                                                     |  | <b>Date (month, day, year)</b>                              |  |
| <b>Occupation</b>                                                                                                                                                           |  | <b>Amount</b>                                               |  |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                           |  |                                                             |  |
| <b>Name of Employer</b>                                                                                                                                                     |  | <b>Date (month, day, year)</b>                              |  |
| <b>Occupation</b>                                                                                                                                                           |  | <b>Amount</b>                                               |  |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                           |  |                                                             |  |
| <b>Name of Employer</b>                                                                                                                                                     |  | <b>Date (month, day, year)</b>                              |  |
| <b>Occupation</b>                                                                                                                                                           |  | <b>Amount</b>                                               |  |