

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 Dr Kim Schrier for Congress			
ADDRESS (number and street) PO Box 2728			
CITY Issaquah	STATE WA	ZIP CODE 98027	
2. NAME OF CANDIDATE Schrier, Kim, , Dr.,		3. OFFICE SOUGHT (State and District) House WA 08	
4. FEC IDENTIFICATION NUMBER C00652628			
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME CHERPAC			Name of Employer	Date (month, day, year) 10/20/2022	Amount 1000.00
MAILING ADDRESS PO Box 65322			Transaction ID : VTR5FW32J21		
CITY Washington	STATE DC	ZIP CODE 20035-5322	Occupation		
B. FULL NAME CLEAN PAC			Name of Employer	Date (month, day, year) 10/20/2022	Amount 2500.00
MAILING ADDRESS PO Box 151563			Transaction ID : VTR5FW31MS8		
CITY San Rafael	STATE CA	ZIP CODE 94915-1563	Occupation		
C. FULL NAME Dalby, Glenn, , ,			Name of Employer Retired	Date (month, day, year) 10/20/2022	Amount 1000.00
MAILING ADDRESS 17525 10Th Ave NW			Transaction ID : VTR5FW31NB0		
CITY Shoreline	STATE WA	ZIP CODE 98177-3804	Occupation Retired		
D. FULL NAME DENNY HECK FOR CONGRESS			Name of Employer	Date (month, day, year) 10/20/2022	Amount 2000.00
MAILING ADDRESS PO Box 235			Transaction ID : VTR5FW31MN6		
CITY Olympia	STATE WA	ZIP CODE 98507-0235	Occupation		
E. FULL NAME ENVIRONMENT AMERICA VOTER ACTION			Name of Employer	Date (month, day, year) 10/20/2022	Amount 1000.00
MAILING ADDRESS 294 Washington St Ste 500			Transaction ID : VTR5FW31MT6		
CITY Boston	STATE MA	ZIP CODE 02108-4612	Occupation		
SIGNATURE (optional) Lloyd, Philip, , ,			DATE 10/21/2022	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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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	Date (month, day, year)	Amount
Hakala, Gregg, , , 4323 356Th Dr SE Fall City WA 98024-9307	T-Mobile Transaction ID : VTR5FW31N29 Occupation System Engineer	10/20/2022	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE HUMAN RIGHTS CAMPAIGN PAC 1640 Rhode Island Ave NW Washington DC 20036-3200	Name of Employer Transaction ID : VTR5FW31MV4 Occupation	Date (month, day, year) 10/20/2022	Amount 1500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Lee, Matthew, , , 19116 SE 22Nd PI Sammamish WA 98075-9692	Name of Employer Microsoft Corp Transaction ID : VTR5FW30X88 Occupation Software Engineer	Date (month, day, year) 10/20/2022	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Moore, William, , , 117 Hillcrest Rd Raleigh NC 27605-1717	Name of Employer Transaction ID : VTR5FW31MW2 Occupation	Date (month, day, year) 10/20/2022	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Pepper, Daniel, , , 3000 Webster Point Rd NE Seattle WA 98105-5339	Name of Employer Lake Washington Vascular PLLC Transaction ID : VTR5FW311S9 Occupation Physician	Date (month, day, year) 10/20/2022	Amount 1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Whitbeck, Monte, , , 900 228Th Ave NE Unit 15C Sammamish WA 98074-5803	Name of Employer Cisco Systems Transaction ID : VTR5FW31N37 Occupation Product Manager	Date (month, day, year) 10/20/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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