

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 Haley Stevens for Congress																					
ADDRESS (number and street) 33717 Woodward Ave #539																					
CITY Birmingham	STATE MI	ZIP CODE 48009																			
2. NAME OF CANDIDATE Stevens, Haley, , ,		3. OFFICE SOUGHT (State and District) House MI 11																			
4. FEC IDENTIFICATION NUMBER C00638650																					
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 Milliken & Company PAC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) 11/05/2022 </td> <td style="padding: 5px;"> Amount 2500.00 </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 920 Milliken Rd </td> <td colspan="3" style="padding: 5px;"> Transaction ID : 7883619 </td> </tr> <tr> <td style="width: 25%; padding: 5px;"> CITY Spartanburg </td> <td style="width: 15%; padding: 5px;"> STATE SC </td> <td style="width: 15%; padding: 5px;"> ZIP CODE 29303-4906 </td> <td style="width: 35%; padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				A. FULL NAME Milliken & Company PAC			Name of Employer	Date (month, day, year) 11/05/2022	Amount 2500.00	MAILING ADDRESS 920 Milliken Rd			Transaction ID : 7883619			CITY Spartanburg	STATE SC	ZIP CODE 29303-4906	Occupation		
A. FULL NAME Milliken & Company PAC			Name of Employer	Date (month, day, year) 11/05/2022	Amount 2500.00																
MAILING ADDRESS 920 Milliken Rd			Transaction ID : 7883619																		
CITY Spartanburg	STATE SC	ZIP CODE 29303-4906	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> B. FULL NAME </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td style="padding: 5px;"> CITY </td> <td style="padding: 5px;"> STATE </td> <td style="padding: 5px;"> ZIP CODE </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				B. FULL NAME			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS						CITY	STATE	ZIP CODE	Occupation		
B. FULL NAME			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS																					
CITY	STATE	ZIP CODE	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> C. FULL NAME </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td style="padding: 5px;"> CITY </td> <td style="padding: 5px;"> STATE </td> <td style="padding: 5px;"> ZIP CODE </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				C. FULL NAME			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS						CITY	STATE	ZIP CODE	Occupation		
C. FULL NAME			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS																					
CITY	STATE	ZIP CODE	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> D. FULL NAME </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td style="padding: 5px;"> CITY </td> <td style="padding: 5px;"> STATE </td> <td style="padding: 5px;"> ZIP CODE </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				D. FULL NAME			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS						CITY	STATE	ZIP CODE	Occupation		
D. FULL NAME			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS																					
CITY	STATE	ZIP CODE	Occupation																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> E. FULL NAME </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS </td> <td colspan="3"></td> </tr> <tr> <td style="padding: 5px;"> CITY </td> <td style="padding: 5px;"> STATE </td> <td style="padding: 5px;"> ZIP CODE </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> </table>				E. FULL NAME			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS						CITY	STATE	ZIP CODE	Occupation		
E. FULL NAME			Name of Employer	Date (month, day, year)	Amount																
MAILING ADDRESS																					
CITY	STATE	ZIP CODE	Occupation																		
SIGNATURE (optional) Marcotte, Maria, , ,			DATE 11/07/2022		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]																					

--	--	--

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)