

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 LAUREL LEE FOR CONGRESS, INC.			
ADDRESS (number and street) P.O. BOX 2743			
CITY BRANDON	STATE FL	ZIP CODE 33509	
2. NAME OF CANDIDATE LEE, LAUREL MRS., , ,		3. OFFICE SOUGHT (State and District) House FL 15	
4. FEC IDENTIFICATION NUMBER C00815373			
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			

A. FULL NAME DOWNS, DANIEL, , , MAILING ADDRESS 18503 AMBLY LN CITY TAMPA STATE FL ZIP CODE 33647			Name of Employer THE CANADIAN MEDSTORE Transaction ID : F6.6979 Occupation REGIONAL DIRECTOR	Date (month, day, year) 10/31/2022	Amount 1000.00
B. FULL NAME SCHORLIS, BENJAMIN, , , MAILING ADDRESS 7821 1ST AVE S CITY ST. PETERSBURG STATE FL ZIP CODE 33707			Name of Employer ENTREPRENEUR Transaction ID : F6.6977 Occupation ENTREPRENEUR	Date (month, day, year) 10/31/2022	Amount 1000.00
C. FULL NAME PINE TREES PAC MAILING ADDRESS PO BOX 524 CITY BANGOR STATE ME ZIP CODE 04402			Name of Employer Transaction ID : F6.6975 Occupation	Date (month, day, year) 10/31/2022	Amount 2500.00
D. FULL NAME MAILING ADDRESS CITY STATE ZIP CODE			Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME MAILING ADDRESS CITY STATE ZIP CODE			Name of Employer Occupation	Date (month, day, year)	Amount

SIGNATURE (optional) CRATE, BRADLEY, , , [Electronically Filed]		DATE 11/01/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
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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)