

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 Katie Porter For Congress																						
ADDRESS (number and street) PO Box 5176																						
CITY Irvine		STATE CA		ZIP CODE 92617																		
2. NAME OF CANDIDATE Porter, Katherine, , ,			3. OFFICE SOUGHT (State and District) House CA 47																			
4. FEC IDENTIFICATION NUMBER C00636571																						
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">A. FULL NAME Zuber, Alison, C., ,</td> <td>Name of Employer Not Employed</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS 687 Grove Ln</td> <td>Transaction ID : VTEFS12Z24N1</td> <td>10/26/2022</td> <td>1000.00</td> </tr> <tr> <td>CITY Santa Barbara</td> <td>STATE CA</td> <td>ZIP CODE 93105-2449</td> <td>Occupation Not Employed</td> <td></td> <td></td> </tr> </table>					A. FULL NAME Zuber, Alison, C., ,			Name of Employer Not Employed	Date (month, day, year)	Amount	MAILING ADDRESS 687 Grove Ln			Transaction ID : VTEFS12Z24N1	10/26/2022	1000.00	CITY Santa Barbara	STATE CA	ZIP CODE 93105-2449	Occupation Not Employed		
A. FULL NAME Zuber, Alison, C., ,			Name of Employer Not Employed	Date (month, day, year)	Amount																	
MAILING ADDRESS 687 Grove Ln			Transaction ID : VTEFS12Z24N1	10/26/2022	1000.00																	
CITY Santa Barbara	STATE CA	ZIP CODE 93105-2449	Occupation Not Employed																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">B. FULL NAME Newhard, Eleanor, M., ,</td> <td>Name of Employer Not Employed</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS 40228 Via Aguadulce</td> <td>Transaction ID : VTEFS12Z4KD3</td> <td>10/26/2022</td> <td>100.00</td> </tr> <tr> <td>CITY Murrieta</td> <td>STATE CA</td> <td>ZIP CODE 92562-5505</td> <td>Occupation Retired</td> <td></td> <td></td> </tr> </table>					B. FULL NAME Newhard, Eleanor, M., ,			Name of Employer Not Employed	Date (month, day, year)	Amount	MAILING ADDRESS 40228 Via Aguadulce			Transaction ID : VTEFS12Z4KD3	10/26/2022	100.00	CITY Murrieta	STATE CA	ZIP CODE 92562-5505	Occupation Retired		
B. FULL NAME Newhard, Eleanor, M., ,			Name of Employer Not Employed	Date (month, day, year)	Amount																	
MAILING ADDRESS 40228 Via Aguadulce			Transaction ID : VTEFS12Z4KD3	10/26/2022	100.00																	
CITY Murrieta	STATE CA	ZIP CODE 92562-5505	Occupation Retired																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">C. FULL NAME Smith, Esca, , ,</td> <td>Name of Employer Commonwealth of Kentucky</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS 4949 Heathmoore Ct</td> <td>Transaction ID : VTEFS12Z24M3</td> <td>10/26/2022</td> <td>1000.00</td> </tr> <tr> <td>CITY Louisville</td> <td>STATE KY</td> <td>ZIP CODE 40241-1892</td> <td>Occupation Correctional Officer</td> <td></td> <td></td> </tr> </table>					C. FULL NAME Smith, Esca, , ,			Name of Employer Commonwealth of Kentucky	Date (month, day, year)	Amount	MAILING ADDRESS 4949 Heathmoore Ct			Transaction ID : VTEFS12Z24M3	10/26/2022	1000.00	CITY Louisville	STATE KY	ZIP CODE 40241-1892	Occupation Correctional Officer		
C. FULL NAME Smith, Esca, , ,			Name of Employer Commonwealth of Kentucky	Date (month, day, year)	Amount																	
MAILING ADDRESS 4949 Heathmoore Ct			Transaction ID : VTEFS12Z24M3	10/26/2022	1000.00																	
CITY Louisville	STATE KY	ZIP CODE 40241-1892	Occupation Correctional Officer																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">D. FULL NAME Newhard, Eleanor, M., ,</td> <td>Name of Employer Not Employed</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS 40228 Via Aguadulce</td> <td>Transaction ID : VTEFS12Z24K5</td> <td>10/26/2022</td> <td>900.00</td> </tr> <tr> <td>CITY Murrieta</td> <td>STATE CA</td> <td>ZIP CODE 92562-5505</td> <td>Occupation Retired</td> <td></td> <td></td> </tr> </table>					D. FULL NAME Newhard, Eleanor, M., ,			Name of Employer Not Employed	Date (month, day, year)	Amount	MAILING ADDRESS 40228 Via Aguadulce			Transaction ID : VTEFS12Z24K5	10/26/2022	900.00	CITY Murrieta	STATE CA	ZIP CODE 92562-5505	Occupation Retired		
D. FULL NAME Newhard, Eleanor, M., ,			Name of Employer Not Employed	Date (month, day, year)	Amount																	
MAILING ADDRESS 40228 Via Aguadulce			Transaction ID : VTEFS12Z24K5	10/26/2022	900.00																	
CITY Murrieta	STATE CA	ZIP CODE 92562-5505	Occupation Retired																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">E. FULL NAME Everytown for Gun Safety Action Fund, Inc. PAC (Everytown PAC)</td> <td>Name of Employer</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS 450 Lexington Ave</td> <td>Transaction ID : VTEFS12Z4GD7</td> <td>10/26/2022</td> <td>1000.00</td> </tr> <tr> <td>CITY New York</td> <td>STATE NY</td> <td>ZIP CODE 10017-3904</td> <td>Occupation</td> <td></td> <td></td> </tr> </table>					E. FULL NAME Everytown for Gun Safety Action Fund, Inc. PAC (Everytown PAC)			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 450 Lexington Ave			Transaction ID : VTEFS12Z4GD7	10/26/2022	1000.00	CITY New York	STATE NY	ZIP CODE 10017-3904	Occupation		
E. FULL NAME Everytown for Gun Safety Action Fund, Inc. PAC (Everytown PAC)			Name of Employer	Date (month, day, year)	Amount																	
MAILING ADDRESS 450 Lexington Ave			Transaction ID : VTEFS12Z4GD7	10/26/2022	1000.00																	
CITY New York	STATE NY	ZIP CODE 10017-3904	Occupation																			
SIGNATURE (optional) Warren, Alexander, , ,			DATE 10/28/2022		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)

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 Katie Porter For Congress			
ADDRESS (number and street) PO Box 5176			
CITY, STATE, and ZIP CODE Irvine CA 92617			
2. NAME OF CANDIDATE Porter, Katherine, , ,		3. OFFICE SOUGHT (State and District) House CA 47	
4. FEC IDENTIFICATION NUMBER C00636571		<i>continuation page</i>	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Anderson, Ruth, , , 10100 Cypress Cove Dr Apt 428 Fort Myers FL 33908-7672			
Name of Employer Not Employed		Date (month, day, year) 10/26/2022	
Transaction ID : VTEFS12Z24J7 Occupation Retired		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Cumiford, Marilyn, , , PO Box 146 Millville CA 96062-0146			
Name of Employer Not Employed		Date (month, day, year) 10/26/2022	
Transaction ID : VTEFS12Z24H9 Occupation Retired		Amount 1900.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	