

# 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> Engel for Arizona			
<b>ADDRESS</b> (number and street) PO Box 40721			
<b>CITY</b> Tucson	<b>STATE</b> AZ	<b>ZIP CODE</b> 85717	
<b>2. NAME OF CANDIDATE</b> Engel, Kirsten, , ,		<b>3. OFFICE SOUGHT</b> (State and District) House AZ 06	
<b>4. FEC IDENTIFICATION NUMBER</b> C00773820			
<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> Cotter, Byron, , ,		<b>Name of Employer</b> Not Employed	
<b>MAILING ADDRESS</b> 65465 E Rocky Mesa Dr		<b>Date</b> (month, day, year) 07/24/2024	
<b>CITY</b> Saddlebrooke		<b>STATE</b> AZ	
<b>STATE</b> AZ		<b>ZIP CODE</b> 85739-1695	
		<b>Occupation</b> Retired	
<b>Transaction ID</b> : 4909544		<b>Amount</b> 2000.00	
<b>B. FULL NAME</b> DEMOCRATIC WOMEN OF THE SOUTH ORANGE COUNTY		<b>Name of Employer</b> Not Employed	
<b>MAILING ADDRESS</b> PO Box 383		<b>Date</b> (month, day, year) 07/24/2024	
<b>CITY</b> San Clemente		<b>STATE</b> CA	
<b>STATE</b> CA		<b>ZIP CODE</b> 92674-0383	
		<b>Occupation</b> Retired	
<b>Transaction ID</b> : 4909541		<b>Amount</b> 2000.00	
<b>C. FULL NAME</b> Gabel, Caroline, , ,		<b>Name of Employer</b> Not Employed	
<b>MAILING ADDRESS</b> 113 Hoffman Ln		<b>Date</b> (month, day, year) 07/24/2024	
<b>CITY</b> Chestertown		<b>STATE</b> MD	
<b>STATE</b> MD		<b>ZIP CODE</b> 21620-1913	
		<b>Occupation</b> Retired	
<b>Transaction ID</b> : 4909575		<b>Amount</b> 3300.00	
<b>D. FULL NAME</b> Kaufer, Isaac, , ,		<b>Name of Employer</b> Isaac Kaufer	
<b>MAILING ADDRESS</b> 25 Walker St		<b>Date</b> (month, day, year) 07/24/2024	
<b>CITY</b> Somerville		<b>STATE</b> MA	
<b>STATE</b> MA		<b>ZIP CODE</b> 02144-1622	
		<b>Occupation</b> Customer Support	
<b>Transaction ID</b> : 4909570		<b>Amount</b> 3300.00	
<b>E. FULL NAME</b>		<b>Name of Employer</b>	
<b>MAILING ADDRESS</b>		<b>Date</b> (month, day, year)	
<b>CITY</b>		<b>STATE</b>	
<b>STATE</b>		<b>ZIP CODE</b>	
		<b>Occupation</b>	
<b>SIGNATURE (optional)</b> Montoya, Dacey, , ,		<b>DATE</b> 07/25/2024	
For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov			

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