

# 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><br><b>BO HINES FOR CONGRESS</b>                                                                                                            |                    |                                                             |  |
| <b>ADDRESS</b> (number and street) 1441 E BROAD STREET<br>#214                                                                                                                 |                    |                                                             |  |
| <b>CITY</b><br>FUQUAY VARINA                                                                                                                                                   | <b>STATE</b><br>NC | <b>ZIP CODE</b><br>27526                                    |  |
| <b>2. NAME OF CANDIDATE</b><br>HINES, ROBERT, NICHOLAS, ,                                                                                                                      |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House NC 01 |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00766162                                                                                                                               |                    |                                                             |  |
| <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><br>AMERICAN FINANCIAL SERVICES ASSOCIATION<br><br><b>MAILING ADDRESS</b><br>919 18TH STREET NW<br>#300<br><b>CITY</b><br>WASHINGTON    | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20006 | <b>Name of Employer</b><br><br><b>Transaction ID : RRQZ9M3SB49QNJU</b><br><b>Occupation</b>  | <b>Date (month, day, year)</b><br>11/08/2022                                                                                                                   | <b>Amount</b><br>2500.00 |
| <b>B. FULL NAME</b><br>AMERICAN GRIT PAC<br><br><b>MAILING ADDRESS</b><br>824 S MILLEDGE AVENUE<br>SUITE 101<br><b>CITY</b><br>ATHENS                      | <b>STATE</b><br>GA | <b>ZIP CODE</b><br>30605 | <b>Name of Employer</b><br><br><b>Transaction ID : RDXUN72WXJRN8C</b><br><b>Occupation</b>   | <b>Date (month, day, year)</b><br>11/08/2022                                                                                                                   | <b>Amount</b><br>1000.00 |
| <b>C. FULL NAME</b><br>CAMPAIGN FOR WORKING FAMILIES PAC<br><br><b>MAILING ADDRESS</b><br>2800 S SHIRLINGTON ROAD<br>SUITE 930<br><b>CITY</b><br>ARLINGTON | <b>STATE</b><br>VA | <b>ZIP CODE</b><br>22206 | <b>Name of Employer</b><br><br><b>Transaction ID : R23UGDP2X9R32JD3</b><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>11/07/2022                                                                                                                   | <b>Amount</b><br>1000.00 |
| <b>D. FULL NAME</b><br>CLUB FOR GROWTH PAC<br><br><b>MAILING ADDRESS</b><br>2001 L STREET NW<br>SUITE 600<br><b>CITY</b><br>WASHINGTON                     | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20036 | <b>Name of Employer</b><br><br><b>Transaction ID : R8FK98G5M5V3RF5J</b><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>11/08/2022                                                                                                                   | <b>Amount</b><br>1140.00 |
| <b>E. FULL NAME</b><br>KAHN, MICHAEL, A, ,<br><br><b>MAILING ADDRESS</b><br>12115 DOWNS ROAD<br><b>CITY</b><br>PINEVILLE                                   | <b>STATE</b><br>NC | <b>ZIP CODE</b><br>28134 | <b>Name of Employer</b><br><br><b>Transaction ID : R7HBP32KYYQKGGZ</b><br><b>Occupation</b>  | <b>Date (month, day, year)</b><br>11/07/2022                                                                                                                   | <b>Amount</b><br>1000.00 |
| <b>SIGNATURE (optional)</b><br>BOLES, JASON, D, ,<br><br><div style="text-align: center;">[Electronically Filed]</div>                                     |                    |                          | <b>DATE</b><br>11/09/2022                                                                    | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |                          |

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)

(See Reverse Side for Instructions)

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| 1. NAME OF COMMITTEE IN FULL<br>BO HINES FOR CONGRESS                                                                                                                   |  |                                                                                |  | continuation page                                                       |
| ADDRESS (number and street) 1441 E BROAD STREET<br>#214                                                                                                                 |  |                                                                                |  |                                                                         |
| CITY, STATE, and ZIP CODE<br>FUQUAY VARINA NC 27526                                                                                                                     |  |                                                                                |  |                                                                         |
| 2. NAME OF CANDIDATE<br>HINES, ROBERT, NICHOLAS, ,                                                                                                                      |  | 3. OFFICE SOUGHT (State and District)<br>House NC 01                           |  | 4. FEC IDENTIFICATION NUMBER<br>C00766162                               |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                                                |  |                                                                         |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>WINRED PAC<br><br>PO BOX 9891<br><br>ARLINGTON VA 22219                                                                   |  | Name of Employer<br><br><br>Transaction ID : R6V4Z29A4KGG9X5W93J<br>Occupation |  | Date (month, day, year)<br><br>11/08/2022<br><br>Amount<br><br>11278.47 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                         |  | Date (month, day, year)<br><br><br>Amount                               |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                         |  | Date (month, day, year)<br><br><br>Amount                               |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                         |  | Date (month, day, year)<br><br><br>Amount                               |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                         |  | Date (month, day, year)<br><br><br>Amount                               |

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