

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 GALLREIN FOR CONGRESS				
ADDRESS (number and street) PO BOX 1059				
CITY SHELBYVILLE		STATE KY	ZIP CODE 40066-1059	
2. NAME OF CANDIDATE GALLREIN, ED, , ,			3. OFFICE SOUGHT (State and District) House KY 04	
4. FEC IDENTIFICATION NUMBER C00923995				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME GOLDBERG, ROBERT, , ,		Name of Employer NONE		Date (month, day, year) 05/11/2026
MAILING ADDRESS 5200 RIVER TRL		Transaction ID : 6F8F75B6F16A149C0		Amount 1000.00
CITY LYNDHURST	STATE OH	ZIP CODE 44124-3765	Occupation RETIRED	
B. FULL NAME BLACK, ARTHUR, , ,		Name of Employer SELF EMPLOYED		Date (month, day, year) 05/11/2026
MAILING ADDRESS 2901 S OCEAN BLVD APT 1001		Transaction ID : 64ADF12F0B130403E		Amount 3500.00
CITY HIGHLAND BEACH	STATE FL	ZIP CODE 33487-1866	Occupation INVESTMENTS	
C. FULL NAME KOHEN, RUTH, , ,		Name of Employer NONE		Date (month, day, year) 05/11/2026
MAILING ADDRESS 5428 PARKWOOD LN		Transaction ID : 6C9CCBAC4D9A54B.		Amount 3500.00
CITY MERCER ISLAND	STATE WA	ZIP CODE 98040-5105	Occupation RETIRED	
D. FULL NAME LEVIN, YALE, , ,		Name of Employer LAFAYETTE ASSOCIATES		Date (month, day, year) 05/11/2026
MAILING ADDRESS 13915 OLD COAST RD UNIT 1406		Transaction ID : 6675E013C0E244A8E		Amount 1000.00
CITY NAPLES	STATE FL	ZIP CODE 34110-8733	Occupation EX VP	
E. FULL NAME YOFFIE, LESLIE, , ,		Name of Employer NONE		Date (month, day, year) 05/11/2026
MAILING ADDRESS 410 CONWAY COMMONS LN		Transaction ID : 650F304258EF14010		Amount 1000.00
CITY SAINT LOUIS	STATE MO	ZIP CODE 63141-8565	Occupation RETIRED	
SIGNATURE (optional) KILGORE, PAUL, , ,			DATE 05/13/2026	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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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)

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ADDRESS (number and street) PO BOX 1059			
CITY, STATE, and ZIP CODE SHELBYVILLE KY 40066-1059			
2. NAME OF CANDIDATE GALLREIN, ED, , ,		3. OFFICE SOUGHT (State and District) House KY 04	
4. FEC IDENTIFICATION NUMBER C00923995		<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			
BROWN, LARRY, , , 11746 BELLA DONNA CT PALM BEACH GARDENS FL 33418-1559		Name of Employer NONE Transaction ID : 6907A42BC3C6F4EDBB4 Occupation RETIRED	
Date (month, day, year) 05/11/2026		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
GREENSPOON, GERALD, , , 200 E BROWARD BLVD STE 1800 FT LAUDERDALE FL 33301-1949		Name of Employer GREENSPOON MARDER, LLP Transaction ID : 6AF3763E7FC5F4C9AB7B Occupation LAWYER	
Date (month, day, year) 05/11/2026		Amount 1000.00	
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	