

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 TIFFANY FOR WISCONSIN, INC.			
ADDRESS (number and street) PO BOX 1007			
CITY WAUSAU	STATE WI	ZIP CODE 54402-1007	
2. NAME OF CANDIDATE TIFFANY, TOM, , ,		3. OFFICE SOUGHT (State and District) House WI 07	
		4. FEC IDENTIFICATION NUMBER C00718635	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME RAPTOR PAC		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1015 15TH STREET NW, STE 802		Transaction ID : 67302247F68C84C97	Amount 11/03/2022 1000.00
CITY WASHINGTON	STATE DC	ZIP CODE 20005	Occupation
B. FULL NAME OSHKOSH CORPORATION EMPLOYEES PAC		Name of Employer	Date (month, day, year)
MAILING ADDRESS PO BOX 4864		Transaction ID : 60EA3A13782E64FA7	Amount 11/03/2022 2500.00
CITY MIDLAND	STATE TX	ZIP CODE 79704	Occupation
C. FULL NAME AMERICAN COUNCIL OF ENGINEERING COMPANIES ACEC PAC		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1015 15TH STREET NW SUITE 802		Transaction ID : 6E1C0C9A41A2D463	Amount 11/03/2022 1000.00
CITY WASHINGTON	STATE DC	ZIP CODE 20005	Occupation
D. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
E. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
SIGNATURE (optional) KOTH, FRED, , ,		DATE 11/03/2022	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)