

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 Jonathan Nez for Congress					
ADDRESS (number and street) PO Box 1854					
CITY Flagstaff		STATE AZ		ZIP CODE 86002	
2. NAME OF CANDIDATE Nez, Jonathan, , ,			3. OFFICE SOUGHT (State and District) House AZ 02		4. FEC IDENTIFICATION NUMBER C00853473
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____					
A. FULL NAME Salt River Pima-Maricopa Indian Community				Name of Employer	
MAILING ADDRESS 10005 E Osborn Rd				Date (month, day, year) 10/21/2024	
CITY Scottsdale				STATE AZ	
ZIP CODE 85256				Amount 1000.00	
				Transaction ID : CDR-00000000029527	
B. FULL NAME Ted Lieu for Congress				Name of Employer	
MAILING ADDRESS 777 S Figueroa St, Ste 4050				Date (month, day, year) 10/21/2024	
CITY Los Angeles				STATE CA	
ZIP CODE 90017				Amount 2000.00	
				Transaction ID : CDR-00000000029409	
C. FULL NAME Match-E-Be-Nash-She-Wish Band of Pottawatomi Indians				Name of Employer	
MAILING ADDRESS 2880 Mission Dr				Date (month, day, year) 10/21/2024	
CITY Shelbyville				STATE MI	
ZIP CODE 49344-				Amount 2000.00	
				Transaction ID : CDR-00000000029524	
D. FULL NAME Doing Right - Results Action Unity Leadership PAC				Name of Employer	
MAILING ADDRESS PO Box 1566				Date (month, day, year) 10/21/2024	
CITY Indio				STATE CA	
ZIP CODE 92202				Amount 1000.00	
				Transaction ID : CDR-00000000029526	
E. FULL NAME Gila River Indian Community				Name of Employer	
MAILING ADDRESS PO Box 2160				Date (month, day, year) 10/21/2024	
CITY Sacaton				STATE AZ	
ZIP CODE 85147				Amount 1000.00	
				Transaction ID : CDR-00000000029525	
SIGNATURE (optional) Phefelia, Nez, , ,				DATE 10/23/2024	
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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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Fond, Miriam, , , 888 8th Ave, Apt 11F New York NY 10019		Name of Employer Self-employed Date (month, day, year) 10/21/2024 Amount 1000.00 Transaction ID : CDR-0000000002952844 Occupation Teacher	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Wulin, Ned, , , 138 Hickory Hill Dr Fishersville VA 22939		Name of Employer Not Employed Date (month, day, year) 10/21/2024 Amount 1500.00 Transaction ID : CDR-0000000002938545 Occupation Not Employed	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Haviland, Mary, , , 1316 Turquoise Trl Cerrillos NM 87010		Name of Employer Not Employed Date (month, day, year) 10/21/2024 Amount 2000.00 Transaction ID : CDR-0000000002940111 Occupation Not Employed	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Neff, Thomas, , , 1316 Turquoise Trl Cerrillos NM 87010		Name of Employer Not Employed Date (month, day, year) 10/21/2024 Amount 3300.00 Transaction ID : CDR-0000000002942267 Occupation Not Employed	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Elder, Mark, , , 904 E Saddlehorn Rd Sedona AZ 86351		Name of Employer Not Employed Date (month, day, year) 10/21/2024 Amount 2000.00 Transaction ID : CDR-0000000002942663 Occupation Retired	

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Brand, Stephanie, , , 904 E Saddlehorn Rd Sedona AZ 86351		Name of Employer Not Employed Date (month, day, year) 10/21/2024 Amount 1000.00 Transaction ID : CDR-0000000002943533 Occupation Retired	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Date (month, day, year) Amount	
		Occupation	