

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 Dixon for Congress				
ADDRESS (number and street) PO Box 7300				
CITY Menlo Park		STATE CA		ZIP CODE 94026
2. NAME OF CANDIDATE Dixon, Peter, , ,			3. OFFICE SOUGHT (State and District) House CA 16	
4. FEC IDENTIFICATION NUMBER C00859439				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____				
A. FULL NAME Benhamou, Eric, , ,			Name of Employer BGV	
MAILING ADDRESS 41 Cebalo Ln			Date (month, day, year) 02/21/2024	
CITY Atherton			Amount 1000.00	
STATE CA			Transaction ID : 2528278	
ZIP CODE 94027-3917			Occupation Venture Capitalist	
B. FULL NAME Gonzalez, Kenneth, , ,			Name of Employer NightDragon	
MAILING ADDRESS 1115 Bay St			Date (month, day, year) 02/21/2024	
CITY Alameda			Amount 3300.00	
STATE CA			Transaction ID : 2528282	
ZIP CODE 94501-3911			Occupation Manager	
C. FULL NAME Gwak, Daniel, , ,			Name of Employer Point72	
MAILING ADDRESS 943 22Nd Ave E			Date (month, day, year) 02/21/2024	
CITY Seattle			Amount 3300.00	
STATE WA			Transaction ID : 2528288	
ZIP CODE 98112-3514			Occupation Investor	
D. FULL NAME Hargis, Charles, B., ,			Name of Employer Castelion Corporation	
MAILING ADDRESS 4733 Old Dominion Dr			Date (month, day, year) 02/21/2024	
CITY Arlington			Amount 1000.00	
STATE VA			Transaction ID : 2528293	
ZIP CODE 22207-3541			Occupation Manufacturing	
E. FULL NAME Hoang, Francis, , ,			Name of Employer Fluet	
MAILING ADDRESS 1624 Market St Ste Pm 202			Date (month, day, year) 02/21/2024	
CITY Denver			Amount 1000.00	
STATE CO			Transaction ID : 2528277	
ZIP CODE 80202-1518			Occupation Lawyer	
SIGNATURE (optional) Pratt, Christopher, , ,			DATE 02/23/2024	
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			
Marrujo, Dan, M., , 8995 Los Lagos Cir S Granite Bay CA 95746-5832		Name of Employer Self Transaction ID : 2528283 Occupation Business Owner	
		Date (month, day, year) 02/21/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Paietta, John, , , 1204 Pickett Ridge Ct Beavercreek OH 45434-7085		Name of Employer N/A Transaction ID : 2528289 Occupation Not Employed	
		Date (month, day, year) 02/21/2024	
		Amount 2000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Rao, Shyam, , , 136 Devonshire Blvd San Carlos CA 94070-1623		Name of Employer Tote Technologies Inc Transaction ID : 2528274 Occupation Founder & Ceo	
		Date (month, day, year) 02/21/2024	
		Amount 5000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Reynolds, Jake, , , 83 Linda Vista Ave Atherton CA 94027-5428		Name of Employer TCV Transaction ID : 2528285 Occupation Investor	
		Date (month, day, year) 02/21/2024	
		Amount 2500.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Sonsini, Larry, , , 7 Robert S Dr Menlo Park CA 94025-5543		Name of Employer Wilson Sonsini Transaction ID : 2528284 Occupation Attorney At Law	
		Date (month, day, year) 02/21/2024	
		Amount 3300.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Sparks, Thomas, E, , Jr PO Box 472290 San Francisco CA 94147-2290		Name of Employer Date (month, day, year) 02/21/2024 Amount 2500.00 Transaction ID : 2514692 Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Wilder, Abigail, , , 3301 Tripp Rd Woodside CA 94062-3631		Name of Employer Mary A. Crocker Trust Date (month, day, year) 02/21/2024 Amount 1000.00 Transaction ID : 2528296 Occupation Executive Director	
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	