

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 JD VANCE FOR SENATE INC			
ADDRESS (number and street) PO BOX 6564			
CITY Cincinnati	STATE OH	ZIP CODE 45206	
2. NAME OF CANDIDATE VANCE, J, D, ,		3. OFFICE SOUGHT (State and District) Senate OH	4. FEC IDENTIFICATION NUMBER C00783142
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME DEPENDABLE CONSERVATIVE LEADERSHIP PAC MAILING ADDRESS 824 S MILLEDGE AVE STE 101 <table style="width: 100%;"> <tr> <td style="width: 25%;">CITY</td> <td style="width: 25%;">STATE</td> <td style="width: 25%;">ZIP CODE</td> </tr> <tr> <td>ATHENS</td> <td>GA</td> <td>30605-</td> </tr> </table>	CITY	STATE	ZIP CODE	ATHENS	GA	30605-	Name of Employer Transaction ID : TX32693 Occupation	Date (month, day, year) 04/25/2022	Amount 2900.00
CITY	STATE	ZIP CODE							
ATHENS	GA	30605-							
B. FULL NAME DEPENDABLE CONSERVATIVE LEADERSHIP PAC MAILING ADDRESS 824 S MILLEDGE AVE STE 101 <table style="width: 100%;"> <tr> <td style="width: 25%;">CITY</td> <td style="width: 25%;">STATE</td> <td style="width: 25%;">ZIP CODE</td> </tr> <tr> <td>ATHENS</td> <td>GA</td> <td>30605-</td> </tr> </table>	CITY	STATE	ZIP CODE	ATHENS	GA	30605-	Name of Employer Transaction ID : TX32694 Occupation	Date (month, day, year) 04/25/2022	Amount 2100.00
CITY	STATE	ZIP CODE							
ATHENS	GA	30605-							
C. FULL NAME MAILING ADDRESS <table style="width: 100%;"> <tr> <td style="width: 25%;">CITY</td> <td style="width: 25%;">STATE</td> <td style="width: 25%;">ZIP CODE</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	CITY	STATE	ZIP CODE				Name of Employer Occupation	Date (month, day, year)	Amount
CITY	STATE	ZIP CODE							
D. FULL NAME MAILING ADDRESS <table style="width: 100%;"> <tr> <td style="width: 25%;">CITY</td> <td style="width: 25%;">STATE</td> <td style="width: 25%;">ZIP CODE</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	CITY	STATE	ZIP CODE				Name of Employer Occupation	Date (month, day, year)	Amount
CITY	STATE	ZIP CODE							
E. FULL NAME MAILING ADDRESS <table style="width: 100%;"> <tr> <td style="width: 25%;">CITY</td> <td style="width: 25%;">STATE</td> <td style="width: 25%;">ZIP CODE</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	CITY	STATE	ZIP CODE				Name of Employer Occupation	Date (month, day, year)	Amount
CITY	STATE	ZIP CODE							

SIGNATURE (optional) LISKER, LISA, , , [Electronically Filed]	DATE 04/26/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 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)