

# 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.

|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------|-------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------------|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Kristen for Michigan                                                                                                                 |                    |                               |                                                             |                                  |                                                                              |
| <b>ADDRESS</b> (number and street) PO Box 854                                                                                                                               |                    |                               |                                                             |                                  |                                                                              |
| <b>CITY</b><br>Bay City                                                                                                                                                     |                    | <b>STATE</b><br>MI            |                                                             | <b>ZIP CODE</b><br>48707         |                                                                              |
| <b>2. NAME OF CANDIDATE</b><br>McDonald Rivet, Kristen, , ,                                                                                                                 |                    |                               | <b>3. OFFICE SOUGHT</b> (State and District)<br>House MI 08 |                                  | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00864207                             |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |                    |                               |                                                             |                                  |                                                                              |
| <b>A. FULL NAME</b><br>AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)                                                                                           |                    |                               |                                                             | Name of Employer                 |                                                                              |
| <b>MAILING ADDRESS</b><br>601 Pennsylvania Ave NW<br>Ste 750                                                                                                                |                    |                               |                                                             | <b>Transaction ID : 10431799</b> |                                                                              |
| <b>CITY</b><br>Washington                                                                                                                                                   | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20004-2601 | <b>Occupation</b>                                           |                                  | <b>Date (month, day, year)</b><br>07/27/2026<br><br><b>Amount</b><br>1000.00 |
|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
| <b>B. FULL NAME</b><br>BFB PAC                                                                                                                                              |                    |                               |                                                             | Name of Employer                 |                                                                              |
| <b>MAILING ADDRESS</b><br>1701 16Th St NW<br>Apt 121                                                                                                                        |                    |                               |                                                             | <b>Transaction ID : 10431970</b> |                                                                              |
| <b>CITY</b><br>Washington                                                                                                                                                   | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20009-3110 | <b>Occupation</b>                                           |                                  | <b>Date (month, day, year)</b><br>07/26/2026<br><br><b>Amount</b><br>1000.00 |
|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
| <b>C. FULL NAME</b><br>Brausch, Joan, , ,                                                                                                                                   |                    |                               |                                                             | Name of Employer                 |                                                                              |
| <b>MAILING ADDRESS</b><br>106 Coventry Ct                                                                                                                                   |                    |                               |                                                             | <b>Transaction ID : 10426392</b> |                                                                              |
| <b>CITY</b><br>Midland                                                                                                                                                      | <b>STATE</b><br>MI | <b>ZIP CODE</b><br>48642-3612 | <b>Occupation</b><br>Not Employed                           |                                  | <b>Date (month, day, year)</b><br>07/26/2026<br><br><b>Amount</b><br>1000.00 |
|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
| <b>D. FULL NAME</b><br>Chiang, Ronny, S., ,                                                                                                                                 |                    |                               |                                                             | Name of Employer                 |                                                                              |
| <b>MAILING ADDRESS</b><br>643 S Hills Rd                                                                                                                                    |                    |                               |                                                             | <b>Transaction ID : 10426219</b> |                                                                              |
| <b>CITY</b><br>Bloomfield Hills                                                                                                                                             | <b>STATE</b><br>MI | <b>ZIP CODE</b><br>48302-1526 | <b>Occupation</b><br>Business Owner                         |                                  | <b>Date (month, day, year)</b><br>07/26/2026<br><br><b>Amount</b><br>1000.00 |
|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
| <b>E. FULL NAME</b><br>Cullman, Edgar, , , Jr                                                                                                                               |                    |                               |                                                             | Name of Employer                 |                                                                              |
| <b>MAILING ADDRESS</b><br>770 Park Ave                                                                                                                                      |                    |                               |                                                             | <b>Transaction ID : 10426264</b> |                                                                              |
| <b>CITY</b><br>New York                                                                                                                                                     | <b>STATE</b><br>NY | <b>ZIP CODE</b><br>10021-4153 | <b>Occupation</b><br>Executive                              |                                  | <b>Date (month, day, year)</b><br>07/26/2026<br><br><b>Amount</b><br>1000.00 |
|                                                                                                                                                                             |                    |                               |                                                             |                                  |                                                                              |
| <b>SIGNATURE (optional)</b><br>Olsen, Josie, , ,                                                                                                                            |                    |                               |                                                             | <b>DATE</b><br>07/28/2026        |                                                                              |
| 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)

48 HOUR NOTICE OF  
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|                                                                                                                                                                         |  |                                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------|--|
| 1. NAME OF COMMITTEE IN FULL<br>Kristen for Michigan                                                                                                                    |  |                                                                                                    |  |
| ADDRESS (number and street) PO Box 854                                                                                                                                  |  |                                                                                                    |  |
| CITY, STATE, and ZIP CODE<br>Bay City MI 48707                                                                                                                          |  |                                                                                                    |  |
| 2. NAME OF CANDIDATE<br>McDonald Rivet, Kristen, , ,                                                                                                                    |  | 3. OFFICE SOUGHT (State and District)<br>House MI 08                                               |  |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00864207                                                          |  |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                                                                    |  |
| continuation page                                                                                                                                                       |  |                                                                                                    |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                                                                    |  |
| Davis, Marlene, , ,<br><br>29261 Briarbank Ct<br><br>Southfield MI 48034-4627                                                                                           |  | Name of Employer<br>Not Employed<br><br>Transaction ID : 10426218<br>Occupation<br>Not Employed    |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>07/26/2026                                                              |  |
|                                                                                                                                                                         |  | Amount<br>1000.00                                                                                  |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                                                                    |  |
| END CITIZENS UNITED<br><br>100 M St SE<br>Ste 1050<br>Washington DC 20003-5167                                                                                          |  | Name of Employer<br><br>Transaction ID : 10431787<br>Occupation                                    |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>07/27/2026                                                              |  |
|                                                                                                                                                                         |  | Amount<br>2000.00                                                                                  |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                                                                    |  |
| Ghanem, Maher, , ,<br><br>580 Golfview Dr<br><br>Saginaw MI 48638-5869                                                                                                  |  | Name of Employer<br>CMU<br><br>Transaction ID : 10426222<br>Occupation<br>Surgeon                  |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>07/26/2026                                                              |  |
|                                                                                                                                                                         |  | Amount<br>1500.00                                                                                  |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                                                                    |  |
| Ghanem, Maher, , ,<br><br>580 Golfview Dr<br><br>Saginaw MI 48638-5869                                                                                                  |  | Name of Employer<br>CMU<br><br>Transaction ID : 10426223<br>Occupation<br>Surgeon                  |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>07/26/2026                                                              |  |
|                                                                                                                                                                         |  | Amount<br>1500.00                                                                                  |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                                                                    |  |
| Hausbeck, Tim, , ,<br><br>579 Foxboro Rd<br><br>Saginaw MI 48638-6215                                                                                                   |  | Name of Employer<br>Hausbeck Pickle Co. Inc.<br><br>Transaction ID : 10426220<br>Occupation<br>Ceo |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>07/26/2026                                                              |  |
|                                                                                                                                                                         |  | Amount<br>3500.00                                                                                  |  |

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| <b>1. NAME OF COMMITTEE IN FULL</b><br>Kristen for Michigan                                                                                                                 |  |                                                             |  |
| <b>ADDRESS</b> (number and street) PO Box 854                                                                                                                               |  |                                                             |  |
| <b>CITY, STATE, and ZIP CODE</b><br>Bay City MI 48707                                                                                                                       |  |                                                             |  |
| <b>2. NAME OF CANDIDATE</b><br>McDonald Rivet, Kristen, ,                                                                                                                   |  | <b>3. OFFICE SOUGHT</b> (State and District)<br>House MI 08 |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00864207                                                                                                                            |  | <b>continuation page</b>                                    |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |  |                                                             |  |

| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                                    | Name of Employer                                                                                                          | Date (month, day, year) | Amount  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------|---------|
| Hausbeck, Tim, , ,<br><br>579 Foxboro Rd<br><br>Saginaw MI 48638-6215                                                                                                         | Hausbeck Pickle Co. Inc.<br><br><b>Transaction ID : 10426221</b><br>Occupation<br>Ceo                                     | 07/26/2026              | 3500.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>INDEPENDENT PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE (IPAC)<br><br>3607 Fern Valley Rd<br><br>Louisville KY 40219-1916 | Name of Employer<br><br>Inclusive Abundance Initiative<br><br><b>Transaction ID : 10431800</b><br>Occupation<br>Nonprofit | 07/27/2026              | 1500.00 |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Kaufman, Derek, , ,<br><br>98 Round Hill Rd<br><br>Greenwich CT 06831-3744                                                  | Name of Employer<br><br>Inclusive Abundance Initiative<br><br><b>Transaction ID : 10426136</b><br>Occupation<br>Nonprofit | 07/27/2026              | 3500.00 |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Lamping, John, , ,<br><br>1299 Eva Ave<br><br>Los Altos CA 94024-6709                                                       | Name of Employer<br><br>Not Employed<br><br><b>Transaction ID : 10426227</b><br>Occupation<br>Not Employed                | 07/26/2026              | 3500.00 |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Padden, Jeffrey, D, ,<br><br>4288 Cherry Hill Dr<br><br>Okemos MI 48864-2969                                                | Name of Employer<br><br>Not Employed<br><br><b>Transaction ID : 10426226</b><br>Occupation<br>Not Employed                | 07/26/2026              | 1500.00 |

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| 1. NAME OF COMMITTEE IN FULL<br>Kristen for Michigan                                                                                                                    |  |                                                                                                                                                                               |  |
| ADDRESS (number and street) PO Box 854                                                                                                                                  |  |                                                                                                                                                                               |  |
| CITY, STATE, and ZIP CODE<br>Bay City MI 48707                                                                                                                          |  |                                                                                                                                                                               |  |
| 2. NAME OF CANDIDATE<br>McDonald Rivet, Kristen, , ,                                                                                                                    |  | 3. OFFICE SOUGHT (State and District)<br>House MI 08                                                                                                                          |  |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00864207                                                                                                                                     |  |
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| continuation page                                                                                                                                                       |  |                                                                                                                                                                               |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Rosenstock, Jason, , ,<br><br>100 M St SE<br>Ste 750<br>Washington DC 20003-3798                                      |  | Name of Employer<br>Thorn Run Partners<br><br>Transaction ID : 10426148<br>Occupation<br>Consultant<br><br>Date (month, day, year)<br>07/26/2026<br><br>Amount<br>1000.00     |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Ross, Doug, , ,<br><br>2201 Rhine Rd<br><br>West Bloomfield MI 48323-3068                                             |  | Name of Employer<br>American Promise Schools<br><br>Transaction ID : 10426391<br>Occupation<br>Educator<br><br>Date (month, day, year)<br>07/26/2026<br><br>Amount<br>1000.00 |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><br>Wiener, Carolyn, , ,<br><br>66 Vista Dr<br><br>Greenwich CT 06830-7128                                                |  | Name of Employer<br>Not Employed<br><br>Transaction ID : 10426225<br>Occupation<br>Not Employed<br><br>Date (month, day, year)<br>07/26/2026<br><br>Amount<br>1000.00         |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                                                                                                                        |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br><br><br>Occupation                                                                                                                                        |  |