

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<br>Marlene for Congress                                                                                                                    |             |                        |                                                      |                                                                                                              |
| ADDRESS (number and street) 7904 E Chaparral Rd<br>Suite A110-472                                                                                                       |             |                        |                                                      |                                                                                                              |
| CITY<br>Scottsdale                                                                                                                                                      |             | STATE<br>AZ            |                                                      | ZIP CODE<br>85250                                                                                            |
| 2. NAME OF CANDIDATE<br>Galan-Woods, Marlene, , ,                                                                                                                       |             |                        | 3. OFFICE SOUGHT (State and District)<br>House AZ 01 |                                                                                                              |
| 4. FEC IDENTIFICATION NUMBER<br>C00840751                                                                                                                               |             |                        |                                                      |                                                                                                              |
| 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 _____ / _____ / _____ |             |                        |                                                      |                                                                                                              |
| A. FULL NAME<br>Coughlin, John, , ,                                                                                                                                     |             |                        |                                                      | Name of Employer<br>Self Employed<br><br>Transaction ID : 6580221<br><br>Occupation<br>Management Consultant |
| MAILING ADDRESS<br>830 N 4th Ave                                                                                                                                        |             |                        |                                                      |                                                                                                              |
| CITY<br>Phoenix                                                                                                                                                         | STATE<br>AZ | ZIP CODE<br>85003-1314 | Date (month, day, year)<br>07/17/2024                |                                                                                                              |
|                                                                                                                                                                         |             |                        | Amount<br>1000.00                                    |                                                                                                              |
| B. FULL NAME<br>Mayo, Keith, , ,                                                                                                                                        |             |                        |                                                      | Name of Employer<br>Not Employed<br><br>Transaction ID : 6580242<br><br>Occupation<br>Not Employed           |
| MAILING ADDRESS<br>3926 Forest Beach Dr NW                                                                                                                              |             |                        |                                                      |                                                                                                              |
| CITY<br>Gig Harbor                                                                                                                                                      | STATE<br>WA | ZIP CODE<br>98335-5701 | Date (month, day, year)<br>07/17/2024                |                                                                                                              |
|                                                                                                                                                                         |             |                        | Amount<br>1000.00                                    |                                                                                                              |
| C. FULL NAME<br>Berman, Kathy, , ,                                                                                                                                      |             |                        |                                                      | Name of Employer<br>Not Employed<br><br>Transaction ID : 6582187<br><br>Occupation<br>Retired                |
| MAILING ADDRESS<br>1614 Roanoke Way                                                                                                                                     |             |                        |                                                      |                                                                                                              |
| CITY<br>Mercer Island                                                                                                                                                   | STATE<br>WA | ZIP CODE<br>98040-2022 | Date (month, day, year)<br>07/17/2024                |                                                                                                              |
|                                                                                                                                                                         |             |                        | Amount<br>2000.00                                    |                                                                                                              |
| D. FULL NAME<br>Franklin, Charles, , ,                                                                                                                                  |             |                        |                                                      | Name of Employer<br>Self Employed<br><br>Transaction ID : 6580219<br><br>Occupation<br>Attorney              |
| MAILING ADDRESS<br>11539 N 128th Pl                                                                                                                                     |             |                        |                                                      |                                                                                                              |
| CITY<br>Scottsdale                                                                                                                                                      | STATE<br>AZ | ZIP CODE<br>85259-3530 | Date (month, day, year)<br>07/17/2024                |                                                                                                              |
|                                                                                                                                                                         |             |                        | Amount<br>1000.00                                    |                                                                                                              |
| E. FULL NAME<br>Berman, Kathy, , ,                                                                                                                                      |             |                        |                                                      | Name of Employer<br>Not Employed<br><br>Transaction ID : 6580229<br><br>Occupation<br>Retired                |
| MAILING ADDRESS<br>1614 Roanoke Way                                                                                                                                     |             |                        |                                                      |                                                                                                              |
| CITY<br>Mercer Island                                                                                                                                                   | STATE<br>WA | ZIP CODE<br>98040-2022 | Date (month, day, year)<br>07/17/2024                |                                                                                                              |
|                                                                                                                                                                         |             |                        | Amount<br>1000.00                                    |                                                                                                              |
| SIGNATURE (optional)<br>McIntosh, Ellen, , ,                                                                                                                            |             |                        | DATE<br>07/19/2024                                   | For further information,<br>contact the Federal Election Commission<br>at 800-424-9530 or visit www.fec.gov  |

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