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
Mike Thompson For Congress

ADDRESS (number and street) 5445 Madison Avenue

CITY	STATE	ZIP CODE
Sacramento	CA	95841

2. NAME OF CANDIDATE
Thompson, Mike, , ,

3. OFFICE SOUGHT (State and District)
House CA 04

4. FEC IDENTIFICATION NUMBER
C00326363

5. IS THIS AN AMENDMENT? [X] NO, THIS IS A NEW FILING [ ] YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____

	Name of Employer	Date (month, day, year)	Amount
A. FULL NAME National Emergency Medicine Political Action Committee (NEMPAC) **MAILING ADDRESS** PO Box 619911 **CITY** Dallas **STATE** TX **ZIP CODE** 75261	**Transaction ID : INC.F65.73509** Occupation	06/01/2022	2500.00
B. FULL NAME **MAILING ADDRESS** **CITY** **STATE** **ZIP CODE**	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME **MAILING ADDRESS** **CITY** **STATE** **ZIP CODE**	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME **MAILING ADDRESS** **CITY** **STATE** **ZIP CODE**	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME **MAILING ADDRESS** **CITY** **STATE** **ZIP CODE**	Name of Employer Occupation	Date (month, day, year)	Amount

SIGNATURE (optional)
Lewis, Denise, , ,
[Electronically Filed]

DATE
06/02/2022

For further information contact:
Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-694-1100

FEC FORM 6
(Revised 03/2016)