

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 BEN CLINE FOR CONGRESS, INC.									
ADDRESS (number and street) P.O. BOX 1790									
CITY HARRISONBURG	STATE VA	ZIP CODE 22803							
2. NAME OF CANDIDATE CLINE, BENJAMIN, LEE, ,		3. OFFICE SOUGHT (State and District) House VA 06							
4. FEC IDENTIFICATION NUMBER C00661561									
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____									
A. FULL NAME DUNN, TIMOTHY, M, , MAILING ADDRESS P.O. BOX 52268 <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">CITY</td> <td style="width: 16%; border: none;">STATE</td> <td style="width: 16%; border: none;">ZIP CODE</td> </tr> <tr> <td style="border: none;">MIDLAND</td> <td style="border: none;">TX</td> <td style="border: none;">79710</td> </tr> </table>		CITY	STATE	ZIP CODE	MIDLAND	TX	79710	Name of Employer CROWNQUEST OPERATING Transaction ID : 11310 Occupation CEO	Date (month, day, year) 06/16/2022 Amount 2900.00
CITY	STATE	ZIP CODE							
MIDLAND	TX	79710							
B. FULL NAME COX ENTERPRISES PAC (COXPAC) INC. MAILING ADDRESS 975 F STREET, NW SUITE 300 <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">CITY</td> <td style="width: 16%; border: none;">STATE</td> <td style="width: 16%; border: none;">ZIP CODE</td> </tr> <tr> <td style="border: none;">WASHINGTON</td> <td style="border: none;">DC</td> <td style="border: none;">20004</td> </tr> </table>		CITY	STATE	ZIP CODE	WASHINGTON	DC	20004	Name of Employer Transaction ID : 11311 Occupation	Date (month, day, year) 06/16/2022 Amount 5000.00
CITY	STATE	ZIP CODE							
WASHINGTON	DC	20004							
C. FULL NAME MAILING ADDRESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">CITY</td> <td style="width: 16%; border: none;">STATE</td> <td style="width: 16%; border: none;">ZIP CODE</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>		CITY	STATE	ZIP CODE				Name of Employer Occupation	Date (month, day, year) Amount
CITY	STATE	ZIP CODE							
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CITY	STATE	ZIP CODE							
SIGNATURE (optional) MCMENAMIN, LAURA, , , [Electronically Filed]			DATE 06/17/2022						
For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100									

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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)