

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 The Markey Committee				
ADDRESS (number and street) PO Box 69				
CITY Medford	STATE MA	ZIP CODE 02155		
2. NAME OF CANDIDATE Markey, Edward, , ,		3. OFFICE SOUGHT (State and District) Senate MA		4. FEC IDENTIFICATION NUMBER C00196774
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____				
A. FULL NAME Carbone, Marie, , ,		Name of Employer Retired		Date (month, day, year) 08/16/2026
MAILING ADDRESS 45 Traders Way Apt 60403 CITY Salem		Transaction ID : 46416301 Occupation Retired		Amount 1000.00
B. FULL NAME Cloern, Boyd, , ,		Name of Employer Steptoe		Date (month, day, year) 08/16/2026
MAILING ADDRESS 1850 Macarthur Dr CITY Mclean		Transaction ID : 46415949 Occupation Lawyer		Amount 1000.00
C. FULL NAME Corbett, Greg, , ,		Name of Employer Wolf Greenfield		Date (month, day, year) 08/16/2026
MAILING ADDRESS 70 Winter St CITY Hingham		Transaction ID : 46415883 Occupation Attorney		Amount 1000.00
D. FULL NAME Deutscher, David, , ,		Name of Employer Not Employed		Date (month, day, year) 08/16/2026
MAILING ADDRESS 6 Greenvalley Dr CITY Lafayette		Transaction ID : 46416036 Occupation Not Employed		Amount 1000.00
E. FULL NAME Echtman, Elyse, , ,		Name of Employer Steptoe		Date (month, day, year) 08/16/2026
MAILING ADDRESS 69 Rock Ridge Dr CITY Rye Brook		Transaction ID : 46415880 Occupation Attorney		Amount 3500.00
SIGNATURE (optional) Carbone, Marie, , ,			DATE 08/18/2026	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)

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5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Poe, James, , , 174 Spring St Hopkinton MA 01748-1526		Name of Employer Lincoln Financial Group Transaction ID : 46415860 Occupation Actuary	
		Date (month, day, year) 08/16/2026	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Wilner, Thomas, , , 39 Country Rd Boynton Beach FL 33436-5602		Name of Employer Not Employed Transaction ID : 46416258 Occupation Not Employed	
		Date (month, day, year) 08/16/2026	
		Amount 1000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	