

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 Val Hoyle for Congress																																																																																																									
ADDRESS (number and street) PO Box 657																																																																																																									
CITY Springfield	STATE OR	ZIP CODE 97477																																																																																																							
2. NAME OF CANDIDATE Hoyle, Valerie, , ,		3. OFFICE SOUGHT (State and District) House OR 00																																																																																																							
4. FEC IDENTIFICATION NUMBER C00796144																																																																																																									
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____																																																																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> A. FULL NAME AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS Attn Accounts Receivable 815 Black </td> <td style="padding: 5px;"> Transaction ID : 5769454 </td> <td style="padding: 5px;"> 10/24/2022 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Washington </td> <td style="padding: 5px;"> STATE DC </td> <td style="padding: 5px;"> ZIP CODE 20006 </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 5px;"> B. FULL NAME Amos, Adell, , , </td> <td style="padding: 5px;"> Name of Employer Not Employed </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 400 W 22Nd Ave </td> <td style="padding: 5px;"> Transaction ID : 5778058 </td> <td style="padding: 5px;"> 10/25/2022 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Eugene </td> <td style="padding: 5px;"> STATE OR </td> <td style="padding: 5px;"> ZIP CODE 97405-2628 </td> <td style="padding: 5px;"> Occupation Not Employed </td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 5px;"> C. FULL NAME ATHENA PAC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS 301 W Platt St # 385 </td> <td style="padding: 5px;"> Transaction ID : 5769442 </td> <td style="padding: 5px;"> 10/24/2022 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Tampa </td> <td style="padding: 5px;"> STATE FL </td> <td style="padding: 5px;"> ZIP CODE 33606-2292 </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 5px;"> D. FULL NAME DEBORAH ROSS FOR CONGRESS </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS PO Box 28258 </td> <td style="padding: 5px;"> Transaction ID : 5769435 </td> <td style="padding: 5px;"> 10/24/2022 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Raleigh </td> <td style="padding: 5px;"> STATE NC </td> <td style="padding: 5px;"> ZIP CODE 27611-8258 </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 5px;"> E. FULL NAME FAIR SHOT PAC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> MAILING ADDRESS PO Box 361 </td> <td style="padding: 5px;"> Transaction ID : 5769452 </td> <td style="padding: 5px;"> 10/24/2022 </td> <td style="padding: 5px;"> 3000.00 </td> </tr> <tr> <td style="padding: 5px;"> CITY Malden </td> <td style="padding: 5px;"> STATE MA </td> <td style="padding: 5px;"> ZIP CODE 02148-0004 </td> <td style="padding: 5px;"> Occupation </td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 5px;"> SIGNATURE (optional) Giarraputo, Holly, , , </td> <td style="padding: 5px;"> DATE 10/26/2022 </td> <td colspan="2" style="padding: 5px;"> For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 </td> </tr> <tr> <td colspan="3" style="padding: 5px; text-align: center;"> <i>[Electronically Filed]</i> </td> <td colspan="3"></td> </tr> </table>				A. FULL NAME AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS Attn Accounts Receivable 815 Black			Transaction ID : 5769454	10/24/2022	1000.00	CITY Washington	STATE DC	ZIP CODE 20006	Occupation			B. FULL NAME Amos, Adell, , ,			Name of Employer Not Employed	Date (month, day, year)	Amount	MAILING ADDRESS 400 W 22Nd Ave			Transaction ID : 5778058	10/25/2022	1000.00	CITY Eugene	STATE OR	ZIP CODE 97405-2628	Occupation Not Employed			C. FULL NAME ATHENA PAC			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS 301 W Platt St # 385			Transaction ID : 5769442	10/24/2022	1000.00	CITY Tampa	STATE FL	ZIP CODE 33606-2292	Occupation			D. FULL NAME DEBORAH ROSS FOR CONGRESS			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS PO Box 28258			Transaction ID : 5769435	10/24/2022	1000.00	CITY Raleigh	STATE NC	ZIP CODE 27611-8258	Occupation			E. FULL NAME FAIR SHOT PAC			Name of Employer	Date (month, day, year)	Amount	MAILING ADDRESS PO Box 361			Transaction ID : 5769452	10/24/2022	3000.00	CITY Malden	STATE MA	ZIP CODE 02148-0004	Occupation			SIGNATURE (optional) Giarraputo, Holly, , ,			DATE 10/26/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		<i>[Electronically Filed]</i>					
A. FULL NAME AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE			Name of Employer	Date (month, day, year)	Amount																																																																																																				
MAILING ADDRESS Attn Accounts Receivable 815 Black			Transaction ID : 5769454	10/24/2022	1000.00																																																																																																				
CITY Washington	STATE DC	ZIP CODE 20006	Occupation																																																																																																						
B. FULL NAME Amos, Adell, , ,			Name of Employer Not Employed	Date (month, day, year)	Amount																																																																																																				
MAILING ADDRESS 400 W 22Nd Ave			Transaction ID : 5778058	10/25/2022	1000.00																																																																																																				
CITY Eugene	STATE OR	ZIP CODE 97405-2628	Occupation Not Employed																																																																																																						
C. FULL NAME ATHENA PAC			Name of Employer	Date (month, day, year)	Amount																																																																																																				
MAILING ADDRESS 301 W Platt St # 385			Transaction ID : 5769442	10/24/2022	1000.00																																																																																																				
CITY Tampa	STATE FL	ZIP CODE 33606-2292	Occupation																																																																																																						
D. FULL NAME DEBORAH ROSS FOR CONGRESS			Name of Employer	Date (month, day, year)	Amount																																																																																																				
MAILING ADDRESS PO Box 28258			Transaction ID : 5769435	10/24/2022	1000.00																																																																																																				
CITY Raleigh	STATE NC	ZIP CODE 27611-8258	Occupation																																																																																																						
E. FULL NAME FAIR SHOT PAC			Name of Employer	Date (month, day, year)	Amount																																																																																																				
MAILING ADDRESS PO Box 361			Transaction ID : 5769452	10/24/2022	3000.00																																																																																																				
CITY Malden	STATE MA	ZIP CODE 02148-0004	Occupation																																																																																																						
SIGNATURE (optional) Giarraputo, Holly, , ,			DATE 10/26/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																																																																																																					
<i>[Electronically Filed]</i>																																																																																																									

--	--	--

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 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 Val Hoyle for Congress			
ADDRESS (number and street) PO Box 657			
CITY, STATE, and ZIP CODE Springfield OR 97477			
2. NAME OF CANDIDATE Hoyle, Valerie, ,		3. OFFICE SOUGHT (State and District) House OR 00	
4. FEC IDENTIFICATION NUMBER C00796144		continuation page	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			

A. FULL NAME, MAILING ADDRESS AND ZIP CODE GARAMENDI FOR CONGRESS PO Box 2978 Fairfield CA 94533-0978	Name of Employer Transaction ID : 5767071 Occupation	Date (month, day, year) 10/24/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE JUDY CHU FOR CONGRESS 16633 Ventura Blvd Ste 1008 Van Nuys CA 91436-1856	Name of Employer Transaction ID : 5767090 Occupation	Date (month, day, year) 10/24/2022	Amount 2000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Koza, John, , PO Box 1441 Los Altos CA 94023-1441	Name of Employer Not Employed Transaction ID : 5767177 Occupation Not Employed	Date (month, day, year) 10/24/2022	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND 700 Maritime Blvd Ste B Linthicum Heights MD 21090-1953	Name of Employer Transaction ID : 5769446 Occupation	Date (month, day, year) 10/24/2022	Amount 1500.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Scattone, Francesco, , PO Box 2247 Setauket NY 11733-0726	Name of Employer Renaissance Technologies Transaction ID : 5767257 Occupation Finance	Date (month, day, year) 10/24/2022	Amount 1000.00

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 Val Hoyle for Congress			
ADDRESS (number and street) PO Box 657			
CITY, STATE, and ZIP CODE Springfield OR 97477			
2. NAME OF CANDIDATE Hoyle, Valerie, , ,		3. OFFICE SOUGHT (State and District) House OR 00	
4. FEC IDENTIFICATION NUMBER C00796144		<i>continuation page</i>	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Shamey, Katherine, , , 85110 Dunns Ln Florence OR 97439-8444			
Name of Employer Retired Transaction ID : 5769457 Occupation Retired		Date (month, day, year) 10/24/2022 Amount 2000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Veasey, Marc, , , PO Box 50084 Fort Worth TX 76105-0084			
Name of Employer U.S. Government Transaction ID : 5767263 Occupation Member Of Congress		Date (month, day, year) 10/24/2022 Amount 1000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	