

# 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.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------|-------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------|----------------------------------------------|--------------------------|------------------------------------------------|--|--|----------------------------------|--|--|---------------------------------|--------------------|--------------------------|-----------------------------------------|--|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br><b>DAVIS FOR CONGRESS/FRIENDS OF DAVIS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>ADDRESS</b> (number and street) 5956 W. Race Avenue                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b><br>Chicago                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    | <b>STATE</b><br>IL       |                                                             | <b>ZIP CODE</b><br>60644                     |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Davis, Danny K., , Mr.,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                          | <b>3. OFFICE SOUGHT</b> (State and District)<br>House IL 07 |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00172619                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>A. FULL NAME</b><br/>Duby, NilabhKumar C, , ,           </td> <td> <b>Name of Employer</b><br/>EY           </td> <td> <b>Date (month, day, year)</b><br/>06/21/2022           </td> <td> <b>Amount</b><br/>1000.00           </td> </tr> <tr> <td colspan="3"> <b>MAILING ADDRESS</b><br/>819 Lamont Court           </td> <td> <b>Transaction ID : F6.33981</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>Naperville           </td> <td> <b>STATE</b><br/>IL           </td> <td> <b>ZIP CODE</b><br/>60540           </td> <td> <b>Occupation</b><br/>Financial services           </td> <td></td> <td></td> </tr> </table>         |                    |                          |                                                             |                                              | <b>A. FULL NAME</b><br>Duby, NilabhKumar C, , ,                                                                                                                |  |  | <b>Name of Employer</b><br>EY               | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00 | <b>MAILING ADDRESS</b><br>819 Lamont Court     |  |  | <b>Transaction ID : F6.33981</b> |  |  | <b>CITY</b><br>Naperville       | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60540 | <b>Occupation</b><br>Financial services |  |  |
| <b>A. FULL NAME</b><br>Duby, NilabhKumar C, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    |                          | <b>Name of Employer</b><br>EY                               | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00                                                                                                                                       |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>MAILING ADDRESS</b><br>819 Lamont Court                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                          | <b>Transaction ID : F6.33981</b>                            |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b><br>Naperville                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60540 | <b>Occupation</b><br>Financial services                     |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>B. FULL NAME</b><br/>Patel, Nilesh N., , ,           </td> <td> <b>Name of Employer</b><br/>Private practice           </td> <td> <b>Date (month, day, year)</b><br/>06/21/2022           </td> <td> <b>Amount</b><br/>1000.00           </td> </tr> <tr> <td colspan="3"> <b>MAILING ADDRESS</b><br/>3 Falcon Lakes Dr.           </td> <td> <b>Transaction ID : F6.33982</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>South Barrington           </td> <td> <b>STATE</b><br/>IL           </td> <td> <b>ZIP CODE</b><br/>60010           </td> <td> <b>Occupation</b><br/>Dentist           </td> <td></td> <td></td> </tr> </table> |                    |                          |                                                             |                                              | <b>B. FULL NAME</b><br>Patel, Nilesh N., , ,                                                                                                                   |  |  | <b>Name of Employer</b><br>Private practice | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00 | <b>MAILING ADDRESS</b><br>3 Falcon Lakes Dr.   |  |  | <b>Transaction ID : F6.33982</b> |  |  | <b>CITY</b><br>South Barrington | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60010 | <b>Occupation</b><br>Dentist            |  |  |
| <b>B. FULL NAME</b><br>Patel, Nilesh N., , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                          | <b>Name of Employer</b><br>Private practice                 | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00                                                                                                                                       |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>MAILING ADDRESS</b><br>3 Falcon Lakes Dr.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                          | <b>Transaction ID : F6.33982</b>                            |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b><br>South Barrington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60010 | <b>Occupation</b><br>Dentist                                |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>C. FULL NAME</b><br/>Reddi, Ramana K, , ,           </td> <td> <b>Name of Employer</b><br/>EnSoftek           </td> <td> <b>Date (month, day, year)</b><br/>06/21/2022           </td> <td> <b>Amount</b><br/>1000.00           </td> </tr> <tr> <td colspan="3"> <b>MAILING ADDRESS</b><br/>6 Victoria Court           </td> <td> <b>Transaction ID : F6.33983</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>Oak Brook           </td> <td> <b>STATE</b><br/>IL           </td> <td> <b>ZIP CODE</b><br/>60523           </td> <td> <b>Occupation</b><br/>CEO           </td> <td></td> <td></td> </tr> </table>                       |                    |                          |                                                             |                                              | <b>C. FULL NAME</b><br>Reddi, Ramana K, , ,                                                                                                                    |  |  | <b>Name of Employer</b><br>EnSoftek         | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00 | <b>MAILING ADDRESS</b><br>6 Victoria Court     |  |  | <b>Transaction ID : F6.33983</b> |  |  | <b>CITY</b><br>Oak Brook        | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60523 | <b>Occupation</b><br>CEO                |  |  |
| <b>C. FULL NAME</b><br>Reddi, Ramana K, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                    |                          | <b>Name of Employer</b><br>EnSoftek                         | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1000.00                                                                                                                                       |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>MAILING ADDRESS</b><br>6 Victoria Court                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                          | <b>Transaction ID : F6.33983</b>                            |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b><br>Oak Brook                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60523 | <b>Occupation</b><br>CEO                                    |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>D. FULL NAME</b><br/>Sowell, Zenobia L., , ,           </td> <td> <b>Name of Employer</b><br/>Self employed           </td> <td> <b>Date (month, day, year)</b><br/>06/21/2022           </td> <td> <b>Amount</b><br/>1500.00           </td> </tr> <tr> <td colspan="3"> <b>MAILING ADDRESS</b><br/>330 S. Michigan Ave.           </td> <td> <b>Transaction ID : F6.33984</b> </td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b><br/>Chicago           </td> <td> <b>STATE</b><br/>IL           </td> <td> <b>ZIP CODE</b><br/>60604           </td> <td> <b>Occupation</b><br/>Dentist           </td> <td></td> <td></td> </tr> </table>         |                    |                          |                                                             |                                              | <b>D. FULL NAME</b><br>Sowell, Zenobia L., , ,                                                                                                                 |  |  | <b>Name of Employer</b><br>Self employed    | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1500.00 | <b>MAILING ADDRESS</b><br>330 S. Michigan Ave. |  |  | <b>Transaction ID : F6.33984</b> |  |  | <b>CITY</b><br>Chicago          | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60604 | <b>Occupation</b><br>Dentist            |  |  |
| <b>D. FULL NAME</b><br>Sowell, Zenobia L., , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                          | <b>Name of Employer</b><br>Self employed                    | <b>Date (month, day, year)</b><br>06/21/2022 | <b>Amount</b><br>1500.00                                                                                                                                       |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>MAILING ADDRESS</b><br>330 S. Michigan Ave.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                          | <b>Transaction ID : F6.33984</b>                            |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b><br>Chicago                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>STATE</b><br>IL | <b>ZIP CODE</b><br>60604 | <b>Occupation</b><br>Dentist                                |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> <b>E. FULL NAME</b> </td> <td> <b>Name of Employer</b> </td> <td> <b>Date (month, day, year)</b> </td> <td> <b>Amount</b> </td> </tr> <tr> <td colspan="3"> <b>MAILING ADDRESS</b> </td> <td></td> <td></td> <td></td> </tr> <tr> <td> <b>CITY</b> </td> <td> <b>STATE</b> </td> <td> <b>ZIP CODE</b> </td> <td> <b>Occupation</b> </td> <td></td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                |                    |                          |                                                             |                                              | <b>E. FULL NAME</b>                                                                                                                                            |  |  | <b>Name of Employer</b>                     | <b>Date (month, day, year)</b>               | <b>Amount</b>            | <b>MAILING ADDRESS</b>                         |  |  |                                  |  |  | <b>CITY</b>                     | <b>STATE</b>       | <b>ZIP CODE</b>          | <b>Occupation</b>                       |  |  |
| <b>E. FULL NAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                          | <b>Name of Employer</b>                                     | <b>Date (month, day, year)</b>               | <b>Amount</b>                                                                                                                                                  |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>MAILING ADDRESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>CITY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>STATE</b>       | <b>ZIP CODE</b>          | <b>Occupation</b>                                           |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>SIGNATURE (optional)</b><br>Davis, Vera G., , Mrs.,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                          | <b>DATE</b><br>06/22/2022                                   |                                              | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |
| <b>[Electronically Filed]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |                          |                                                             |                                              |                                                                                                                                                                |  |  |                                             |                                              |                          |                                                |  |  |                                  |  |  |                                 |                    |                          |                                         |  |  |

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**FEC FORM 6**  
(Revised 03/2016)