

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 DAVE MCCORMICK FOR U.S. SENATE																						
ADDRESS (number and street) PO BOX 23215																						
CITY PITTSBURGH		STATE PA		ZIP CODE 15222																		
2. NAME OF CANDIDATE MCCORMICK, DAVE, , ,			3. OFFICE SOUGHT (State and District) Senate PA																			
4. FEC IDENTIFICATION NUMBER C00800623																						
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"> A. FULL NAME BALDWIN, SHERMAN, , , </td> <td> Name of Employer LCR CAPITAL PARTNERS </td> <td> Date (month, day, year) 05/12/2022 </td> <td> Amount 2000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 92 MANSFIELD AVENUE </td> <td> Transaction ID : TX19603 </td> <td></td> <td></td> </tr> <tr> <td> CITY DARIEN </td> <td> STATE CT </td> <td> ZIP CODE 06820-3519 </td> <td> Occupation CEO </td> <td></td> <td></td> </tr> </table>					A. FULL NAME BALDWIN, SHERMAN, , ,			Name of Employer LCR CAPITAL PARTNERS	Date (month, day, year) 05/12/2022	Amount 2000.00	MAILING ADDRESS 92 MANSFIELD AVENUE			Transaction ID : TX19603			CITY DARIEN	STATE CT	ZIP CODE 06820-3519	Occupation CEO		
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SIGNATURE (optional) JEWELL, RICHARD, , ,				DATE 05/13/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																	
[Electronically Filed]																						

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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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A. FULL NAME, MAILING ADDRESS AND ZIP CODE ORTENZIO, ROCCO, , , 4732 GETTYSBURG ROAD MECHANICSBURG PA 17055-4325	Name of Employer SELECT MEDICAL Transaction ID : TX19679 Occupation EXECUTIVE	Date (month, day, year) 05/12/2022	Amount 2900.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE SULLIVAN, FRANK, , , 2628 PEARL ROAD MEDINA OH 44256-7623	Name of Employer RPM INTERNATIONAL Transaction ID : TX19583 Occupation CEO	Date (month, day, year) 05/12/2022	Amount 2900.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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