

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 Kristen for Michigan						
ADDRESS (number and street) PO Box 854						
CITY Bay City		STATE MI		ZIP CODE 48707		
2. NAME OF CANDIDATE McDonald Rivet, Kristen, , ,			3. OFFICE SOUGHT (State and District) House MI 08		4. FEC IDENTIFICATION NUMBER C00864207	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____						
A. FULL NAME Brim, Remy, , ,			Name of Employer BGR Group		Date (month, day, year) 07/29/2024	
MAILING ADDRESS 2001 16Th St NW Apt 704			Transaction ID : 7313551		Amount 1000.00	
CITY Washington	STATE DC	ZIP CODE 20009-3416	Occupation Vice President			
B. FULL NAME Burnstein, Clifford, N., ,			Name of Employer Q Prime		Date (month, day, year) 07/29/2024	
MAILING ADDRESS 655 Avenue Of The Americas Apt PHA			Transaction ID : 7320938		Amount 3300.00	
CITY New York	STATE NY	ZIP CODE 10010-5107	Occupation Owner			
C. FULL NAME Burnstein, Clifford, N., ,			Name of Employer Q Prime		Date (month, day, year) 07/29/2024	
MAILING ADDRESS 655 Avenue Of The Americas Apt PHA			Transaction ID : 7320939		Amount 3300.00	
CITY New York	STATE NY	ZIP CODE 10010-5107	Occupation Owner			
D. FULL NAME Davidson, Gretchen, Gonzales, ,			Name of Employer El Studio 444		Date (month, day, year) 07/30/2024	
MAILING ADDRESS 444 Arlington St			Transaction ID : 7320934		Amount 1000.00	
CITY Birmingham	STATE MI	ZIP CODE 48009-1669	Occupation Musician			
E. FULL NAME Hu, Celine, , ,			Name of Employer Not Employed		Date (month, day, year) 07/30/2024	
MAILING ADDRESS 75 Mount Tiburon Rd			Transaction ID : 7316469		Amount 2000.00	
CITY Belvedere Tiburon	STATE CA	ZIP CODE 94920-1511	Occupation Not Employed			
SIGNATURE (optional) Olsen, Josie, , ,				DATE 07/31/2024	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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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
King, Hannah, , , 919 Mendocino Ave Berkeley CA 94707-1924		Name of Employer Self Employed Transaction ID : 7313549 Occupation Healthcare Consultant	
		Date (month, day, year) 07/29/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Orfalea, Natalie, , , PO Box 955 Summerland CA 93067-0955		Name of Employer Altruista Management Services LLC Transaction ID : 7320928 Occupation Property Manager	
		Date (month, day, year) 07/30/2024	
		Amount 3300.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Pasick, Rena, , , 3029 California St San Francisco CA 94115-2410		Name of Employer UC San Francisco Transaction ID : 7318404 Occupation Researcher	
		Date (month, day, year) 07/30/2024	
		Amount 3261.54	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Pasick, Rena, , , 3029 California St San Francisco CA 94115-2410		Name of Employer UC San Francisco Transaction ID : 7318405 Occupation Researcher	
		Date (month, day, year) 07/30/2024	
		Amount 38.46	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
PROGRESSIVE WOMEN'S ALLIANCE OF WEST MICHIGAN PO Box 1315 Grand Rapids MI 49501-1315		Name of Employer Transaction ID : 7320943 Occupation	
		Date (month, day, year) 07/29/2024	
		Amount 1000.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Schwartz, Alan, , , 26880 Willowgreen Dr Franklin MI 48025-1054		Name of Employer Honigman LLP Transaction ID : 7318396 Occupation Attorney	
		Date (month, day, year) 07/30/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
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	