

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 Walberg for Congress																																																																																																																																		
ADDRESS (number and street) PO Box 1362 317 W Washington Ave																																																																																																																																		
CITY Jackson		STATE MI		ZIP CODE 49204-1362																																																																																																																														
2. NAME OF CANDIDATE Walberg, Timothy, L, Rep,			3. OFFICE SOUGHT (State and District) House MI 07																																																																																																																															
4. FEC IDENTIFICATION NUMBER C00390724																																																																																																																																		
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 Xcel Energy Employee PAC </td> <td colspan="2"> Name of Employer </td> <td rowspan="4"> Date (month, day, year) 07/18/2022 </td> <td rowspan="4"> Amount 1000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 701 Pennsylvania Ave NW Ste 250 </td> <td colspan="2"> Transaction ID : 6B7612642BBD74298 </td> </tr> <tr> <td> CITY Washington </td> <td> STATE DC </td> <td> ZIP CODE 20004-3625 </td> <td colspan="2"> Occupation </td> </tr> <tr> <td colspan="3"></td> <td colspan="2"></td> </tr> <tr> <td colspan="3"> B. FULL NAME </td> <td colspan="2"> Name of Employer </td> <td rowspan="4"> Date (month, day, year) </td> <td rowspan="4"> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="2"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="2"> Occupation </td> </tr> <tr> <td colspan="3"></td> <td colspan="2"></td> </tr> <tr> <td colspan="3"> C. FULL NAME </td> <td colspan="2"> Name of Employer </td> <td rowspan="4"> Date (month, day, year) </td> <td rowspan="4"> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="2"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="2"> Occupation </td> </tr> <tr> <td colspan="3"></td> <td colspan="2"></td> </tr> <tr> <td colspan="3"> D. FULL NAME </td> <td colspan="2"> Name of Employer </td> <td rowspan="4"> Date (month, day, year) </td> <td rowspan="4"> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="2"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="2"> Occupation </td> </tr> <tr> <td colspan="3"></td> <td colspan="2"></td> </tr> <tr> <td colspan="3"> E. FULL NAME </td> <td colspan="2"> Name of Employer </td> <td rowspan="4"> Date (month, day, year) </td> <td rowspan="4"> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td colspan="2"></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td colspan="2"> Occupation </td> </tr> <tr> <td colspan="3"></td> <td colspan="2"></td> </tr> <tr> <td colspan="4"> SIGNATURE (optional) Yeutter, Jeffrey, , , </td> <td colspan="2"> DATE 07/19/2022 </td> <td colspan="2"> 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="4" style="text-align: center;"> [Electronically Filed] </td> <td colspan="4"></td> </tr> </table>					A. FULL NAME Xcel Energy Employee PAC			Name of Employer		Date (month, day, year) 07/18/2022	Amount 1000.00	MAILING ADDRESS 701 Pennsylvania Ave NW Ste 250			Transaction ID : 6B7612642BBD74298		CITY Washington	STATE DC	ZIP CODE 20004-3625	Occupation							B. FULL NAME			Name of Employer		Date (month, day, year)	Amount	MAILING ADDRESS					CITY	STATE	ZIP CODE	Occupation							C. FULL NAME			Name of Employer		Date (month, day, year)	Amount	MAILING ADDRESS					CITY	STATE	ZIP CODE	Occupation							D. FULL NAME			Name of Employer		Date (month, day, year)	Amount	MAILING ADDRESS					CITY	STATE	ZIP CODE	Occupation							E. FULL NAME			Name of Employer		Date (month, day, year)	Amount	MAILING ADDRESS					CITY	STATE	ZIP CODE	Occupation							SIGNATURE (optional) Yeutter, Jeffrey, , ,				DATE 07/19/2022		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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