

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 Friends of Chris Smith			
ADDRESS (number and street) PO Box 1266			
CITY Toms River	STATE NJ	ZIP CODE 08754-1266	
2. NAME OF CANDIDATE Smith, Christopher, H, ,		3. OFFICE SOUGHT (State and District) House NJ 04	
4. FEC IDENTIFICATION NUMBER C00096412			
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME Castelo, Robert, , ,		Name of Employer Marine Transport, Inc	
MAILING ADDRESS 1012 Quail Place		Date (month, day, year) 06/01/2022	
CITY Brielle		STATE NJ	
ZIP CODE 08730-1116		Amount 1000.00	
B. FULL NAME Taylor, Karen, , Mrs.,		Name of Employer Matrix Dev Grp	
MAILING ADDRESS 124 Inlet Terrace		Date (month, day, year) 06/01/2022	
CITY Belmar		STATE NJ	
ZIP CODE 07719-2148		Amount 1000.00	
C. FULL NAME		Name of Employer	
MAILING ADDRESS		Date (month, day, year)	
CITY		STATE	
ZIP CODE		Amount	
D. FULL NAME		Name of Employer	
MAILING ADDRESS		Date (month, day, year)	
CITY		STATE	
ZIP CODE		Amount	
E. FULL NAME		Name of Employer	
MAILING ADDRESS		Date (month, day, year)	
CITY		STATE	
ZIP CODE		Amount	
SIGNATURE (optional) Roldan, Mary, , ,		DATE 06/01/2022	
[Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

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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)

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F6N

Transaction ID :

According to FEC regulations, the Threshold Amount for Form 6 is \$1,000.00

Form/Schedule:

Transaction ID: