

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 Texans for Henry Cuellar Congressional Campaign																						
ADDRESS (number and street) 1519 Washington Street Suite 200																						
CITY Laredo		STATE TX		ZIP CODE 78040																		
2. NAME OF CANDIDATE Cuellar, Henry, , ,		3. OFFICE SOUGHT (State and District) House TX 28		4. FEC IDENTIFICATION NUMBER C00371302																		
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 Denton, Jean, , , </td> <td> Name of Employer Innovative Federal Strategies </td> <td> Date (month, day, year) 05/10/2022 </td> <td> Amount 1000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 15 9Th St SE </td> <td> Transaction ID : 5483164 </td> <td></td> <td></td> </tr> <tr> <td> CITY Washington </td> <td> STATE DC </td> <td> ZIP CODE 20003-1333 </td> <td> Occupation Consultant </td> <td></td> <td></td> </tr> </table>					A. FULL NAME Denton, Jean, , ,			Name of Employer Innovative Federal Strategies	Date (month, day, year) 05/10/2022	Amount 1000.00	MAILING ADDRESS 15 9Th St SE			Transaction ID : 5483164			CITY Washington	STATE DC	ZIP CODE 20003-1333	Occupation Consultant		
A. FULL NAME Denton, Jean, , ,			Name of Employer Innovative Federal Strategies	Date (month, day, year) 05/10/2022	Amount 1000.00																	
MAILING ADDRESS 15 9Th St SE			Transaction ID : 5483164																			
CITY Washington	STATE DC	ZIP CODE 20003-1333	Occupation Consultant																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> B. FULL NAME Weiner, Kane, , , </td> <td> Name of Employer Texas Crude Energy, LLC </td> <td> Date (month, day, year) 05/10/2022 </td> <td> Amount 2900.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 3448 Locke Ln </td> <td> Transaction ID : 5483267 </td> <td></td> <td></td> </tr> <tr> <td> CITY Houston </td> <td> STATE TX </td> <td> ZIP CODE 77027-4139 </td> <td> Occupation President </td> <td></td> <td></td> </tr> </table>					B. FULL NAME Weiner, Kane, , ,			Name of Employer Texas Crude Energy, LLC	Date (month, day, year) 05/10/2022	Amount 2900.00	MAILING ADDRESS 3448 Locke Ln			Transaction ID : 5483267			CITY Houston	STATE TX	ZIP CODE 77027-4139	Occupation President		
B. FULL NAME Weiner, Kane, , ,			Name of Employer Texas Crude Energy, LLC	Date (month, day, year) 05/10/2022	Amount 2900.00																	
MAILING ADDRESS 3448 Locke Ln			Transaction ID : 5483267																			
CITY Houston	STATE TX	ZIP CODE 77027-4139	Occupation President																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> C. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td></td> <td></td> <td></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td> Occupation </td> <td></td> <td></td> </tr> </table>					C. 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																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> D. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td></td> <td></td> <td></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td> Occupation </td> <td></td> <td></td> </tr> </table>					D. 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																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> E. FULL NAME </td> <td> Name of Employer </td> <td> Date (month, day, year) </td> <td> Amount </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS </td> <td></td> <td></td> <td></td> </tr> <tr> <td> CITY </td> <td> STATE </td> <td> ZIP CODE </td> <td> Occupation </td> <td></td> <td></td> </tr> </table>					E. 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) Ortiz, Jerri, Lynn, ,			DATE 05/12/2022	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]																						

--	--	--

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)