

# 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<br>Vindman for Congress                                                                                                                    |             |                                  |                                                      |                                                                                                             |
| ADDRESS (number and street) 4222 Fortuna Center Plz, Ste 664                                                                                                            |             |                                  |                                                      |                                                                                                             |
| CITY<br>Dumfries                                                                                                                                                        |             | STATE<br>VA                      |                                                      | ZIP CODE<br>22025                                                                                           |
| 2. NAME OF CANDIDATE<br>Vindman, Yevgeny 'Eugene', , ,                                                                                                                  |             |                                  | 3. OFFICE SOUGHT (State and District)<br>House VA 07 |                                                                                                             |
| 4. FEC IDENTIFICATION NUMBER<br>C00856955                                                                                                                               |             |                                  |                                                      |                                                                                                             |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |             |                                  |                                                      |                                                                                                             |
| A. FULL NAME<br>AIR LINE PILOTS ASSOCIATION PAC                                                                                                                         |             |                                  |                                                      |                                                                                                             |
| MAILING ADDRESS<br>7950 Jones Branch Dr<br>Ste 400S                                                                                                                     |             | Name of Employer<br>N/A          |                                                      | Date (month, day, year)<br>07/22/2026                                                                       |
| CITY<br>Mclean                                                                                                                                                          | STATE<br>VA | ZIP CODE<br>22102-3215           | Transaction ID : 11714136                            | Amount<br>2000.00                                                                                           |
| B. FULL NAME<br>Cochran, David, , ,                                                                                                                                     |             |                                  |                                                      |                                                                                                             |
| MAILING ADDRESS<br>9500 SW 84th St                                                                                                                                      |             | Name of Employer<br>N/A          |                                                      | Date (month, day, year)<br>07/22/2026                                                                       |
| CITY<br>Denton                                                                                                                                                          | STATE<br>NE | ZIP CODE<br>68339-3187           | Transaction ID : 11714133                            | Amount<br>1000.00                                                                                           |
| C. FULL NAME<br>Ehni, Daniel, , ,                                                                                                                                       |             |                                  |                                                      |                                                                                                             |
| MAILING ADDRESS<br>111 Seavey Highlands Dr                                                                                                                              |             | Name of Employer<br>self         |                                                      | Date (month, day, year)<br>07/22/2026                                                                       |
| CITY<br>Etna                                                                                                                                                            | STATE<br>PA | ZIP CODE<br>15223-1509           | Transaction ID : 11714134                            | Amount<br>1000.00                                                                                           |
| D. FULL NAME<br>Eveland, Patricia, , ,                                                                                                                                  |             |                                  |                                                      |                                                                                                             |
| MAILING ADDRESS<br>148 Doc Carpenter Ln                                                                                                                                 |             | Name of Employer<br>Not Employed |                                                      | Date (month, day, year)<br>07/22/2026                                                                       |
| CITY<br>Madison                                                                                                                                                         | STATE<br>VA | ZIP CODE<br>22727-4020           | Transaction ID : 11714131                            | Amount<br>700.00                                                                                            |
| E. FULL NAME<br>Eveland, Patricia, , ,                                                                                                                                  |             |                                  |                                                      |                                                                                                             |
| MAILING ADDRESS<br>148 Doc Carpenter Ln                                                                                                                                 |             | Name of Employer<br>Not Employed |                                                      | Date (month, day, year)<br>07/22/2026                                                                       |
| CITY<br>Madison                                                                                                                                                         | STATE<br>VA | ZIP CODE<br>22727-4020           | Transaction ID : 11714132                            | Amount<br>300.00                                                                                            |
| SIGNATURE (optional)<br>Murray, Allison, P., ,                                                                                                                          |             |                                  | DATE<br>07/24/2026                                   | For further information,<br>contact the Federal Election Commission<br>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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| 1. NAME OF COMMITTEE IN FULL<br>Vindman for Congress                                                                                                                    |  |                                                      |                         |
| ADDRESS (number and street) 4222 Fortuna Center Plz, Ste 664                                                                                                            |  |                                                      |                         |
| CITY, STATE, and ZIP CODE<br>Dumfries VA 22025                                                                                                                          |  |                                                      |                         |
| 2. NAME OF CANDIDATE<br>Vindman, Yevgeny 'Eugene', , ,                                                                                                                  |  | 3. OFFICE SOUGHT (State and District)<br>House VA 07 |                         |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00856955            |                         |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                      |                         |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
| Yuhaaviatam of San Manuel Nation                                                                                                                                        |  | Name of Employer                                     | Date (month, day, year) |
| 515 S Figueroa St                                                                                                                                                       |  | Transaction ID : 11714135                            | 07/22/2026              |
| Ste 1110                                                                                                                                                                |  | Occupation                                           | Amount                  |
| Los Angeles CA 90071-3314                                                                                                                                               |  |                                                      | 2500.00                 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |                         |
|                                                                                                                                                                         |  | Name of Employer                                     | Date (month, day, year) |
|                                                                                                                                                                         |  | Occupation                                           | Amount                  |

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