

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>KUSTOFF FOR CONGRESS                                                                                                                    |             |                                                      |                                                                                                             |
| ADDRESS (number and street) PO BOX 58823                                                                                                                                |             |                                                      |                                                                                                             |
| CITY<br>NASHVILLE                                                                                                                                                       | STATE<br>TN | ZIP CODE<br>37205-8823                               |                                                                                                             |
| 2. NAME OF CANDIDATE<br>KUSTOFF, DAVID, , ,                                                                                                                             |             | 3. OFFICE SOUGHT (State and District)<br>House TN 08 |                                                                                                             |
|                                                                                                                                                                         |             | 4. FEC IDENTIFICATION NUMBER<br>C00614826            |                                                                                                             |
| 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>GREEN, J. NATHAN, , MR.,                                                                                                                                |             | Name of Employer<br>VANDERBILT UNIVERSITY            |                                                                                                             |
| MAILING ADDRESS<br>32 VAUGHNS GAP RD.                                                                                                                                   |             | Date (month, day, year)<br>07/14/2024                |                                                                                                             |
| CITY<br>NASHVILLE                                                                                                                                                       | STATE<br>TN | ZIP CODE<br>37205-4304                               | Amount<br>1000.00                                                                                           |
|                                                                                                                                                                         |             | Transaction ID : 68D0880E1C17E4D8C                   |                                                                                                             |
|                                                                                                                                                                         |             | Occupation<br>VICE CHANCELLOR FOR GOV'T REI          |                                                                                                             |
| B. FULL NAME<br>RACHELSON, DAVID, , MR.,                                                                                                                                |             | Name of Employer<br>SELF-EMPLOYED                    |                                                                                                             |
| MAILING ADDRESS<br>75 26TH ST NW                                                                                                                                        |             | Date (month, day, year)<br>07/15/2024                |                                                                                                             |
| CITY<br>ATLANTA                                                                                                                                                         | STATE<br>GA | ZIP CODE<br>30309-2004                               | Amount<br>1000.00                                                                                           |
|                                                                                                                                                                         |             | Transaction ID : 635D2D397D69C4921                   |                                                                                                             |
|                                                                                                                                                                         |             | Occupation<br>CONSULTING                             |                                                                                                             |
| 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)<br>WATKINS, JR., WILLIAM, , ,                                                                                                                      |             | DATE<br>07/15/2024                                   | 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.