

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 CISCOMANI FOR CONGRESS				
ADDRESS (number and street) PO BOX 35103				
CITY TUCSON		STATE AZ	ZIP CODE 85740-5103	
2. NAME OF CANDIDATE CISCOMANI, JUAN, , ,			3. OFFICE SOUGHT (State and District) House AZ 06	
4. FEC IDENTIFICATION NUMBER C00786194				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME PATE, LUTHER, S, , IV		Name of Employer INFORMATION REQUESTED		Date (month, day, year) 10/18/2024
MAILING ADDRESS PO BOX 20828		Transaction ID : 6DDD270FDB08F435		Amount 3300.00
CITY TUSCALOOSA	STATE AL	ZIP CODE 35402-0828	Occupation INFORMATION REQUESTED	
B. FULL NAME ZAGORIN, GREGORY, , ,		Name of Employer RETIRED		Date (month, day, year) 10/18/2024
MAILING ADDRESS 901 18TH ST. S		Transaction ID : 6F059D3E41CCA408f		Amount 1000.00
CITY ARLINGTON	STATE VA	ZIP CODE 22202	Occupation RETIRED	
C. FULL NAME IRELAND, MALLIE, , ,		Name of Employer INFORMATION REQUESTED		Date (month, day, year) 10/18/2024
MAILING ADDRESS 2007 GARDEN PL		Transaction ID : 6018D503FAB6D4BA		Amount 1000.00
CITY MOUNTAIN BRK	STATE AL	ZIP CODE 35223-1157	Occupation INFORMATION REQUESTED	
D. FULL NAME ROCKEFELLER, LISENNE, , ,		Name of Employer THE WINROCK GROUP		Date (month, day, year) 10/18/2024
MAILING ADDRESS PO BOX 3157		Transaction ID : 6FE3B14C0DC934BE		Amount 3300.00
CITY LITTLE ROCK	STATE AR	ZIP CODE 72203	Occupation PRESIDENT	
E. FULL NAME WELCH, STEWART, , ,		Name of Employer THE WELCH GROUP		Date (month, day, year) 10/18/2024
MAILING ADDRESS 3940 MONTCLAIR RD		Transaction ID : 68466CFBBD88044C		Amount 1000.00
CITY MOUNTAIN BRK	STATE AL	ZIP CODE 35213-2427	Occupation PRESIDENT	
SIGNATURE (optional) RAGAN, ASHLEY, , ,			DATE 10/20/2024	For further information, contact the Federal Election Commission 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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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
DANSBY, STEWART, , , 1330 21ST WAY S BIRMINGHAM AL 35205-3989		Name of Employer SELF EMPLOYED Date (month, day, year) 10/18/2024 Amount 1000.00 Transaction ID : 632C2A209FCED4AB9859 Occupation INVESTOR	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
REPUBLICAN JEWISH COALITION-PAC (RJC-PAC) 50 F ST NW STE 100 WASHINGTON DC 20001-1590		Name of Employer Date (month, day, year) 10/18/2024 Amount 5000.00 Transaction ID : 67B0B218639DA4D9C832 Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
U.S. ISRAEL PAC (USI PAC) 6100 PINES BLVD STE 305 PEMBROKE PINES FL 33024-7981		Name of Employer Date (month, day, year) 10/18/2024 Amount 3000.00 Transaction ID : 606EC8A688B2E4E6694A Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
LEADERSHIP AND ACCOUNTABILITY ARE NATIONAL KEYS PAC PO BOX 1639 BETHANY OK 73008-1639		Name of Employer Date (month, day, year) 10/18/2024 Amount 5000.00 Transaction ID : 63547D684968644F9A93 Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
MAINTAINING ALL REPUBLICANS IN OFFICE PAC 8724 SW 72ND ST # 421 MIAMI FL 33173-3512		Name of Employer Date (month, day, year) 10/18/2024 Amount 2000.00 Transaction ID : 61EF47B847BFC4FC0B16 Occupation	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
AMERICAN PRINCIPLES 20533 BISCAYNE BLVD # 250 MIAMI FL 33180-1529		Name of Employer Transaction ID : 6816C249D545548FA983 Occupation	Date (month, day, year) 10/18/2024 Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
VITORIA PAC 5132 N PALM AVE # 227 FRESNO CA 93704-2236		Name of Employer Transaction ID : 6E2459A625B0D4CBD9E2 Occupation	Date (month, day, year) 10/18/2024 Amount 5000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
		Name of Employer Occupation	Date (month, day, year) Amount

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