

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 Suhas for Virginia						
ADDRESS (number and street) PO Box 302						
CITY Ashburn		STATE VA		ZIP CODE 20146		
2. NAME OF CANDIDATE Subramanyam, Suhas, , ,			3. OFFICE SOUGHT (State and District) House VA 10		4. FEC IDENTIFICATION NUMBER C00856963	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____						
A. FULL NAME Abramowitz, Ava, J., ,			Name of Employer N/A		Date (month, day, year) 10/22/2024	
MAILING ADDRESS 39255 Crooked Bridge Ln			Transaction ID : 5672737		Amount 1000.00	
CITY Leesburg	STATE VA	ZIP CODE 20175-6664	Occupation Not Employed			
B. FULL NAME Chapman, Tim, , ,			Name of Employer N/A		Date (month, day, year) 10/22/2024	
MAILING ADDRESS 360 Windover Ave NW			Transaction ID : 5672738		Amount 1000.00	
CITY Vienna	STATE VA	ZIP CODE 22180-4414	Occupation Not Employed			
C. FULL NAME FUTURE FORUM PAC			Name of Employer		Date (month, day, year) 10/22/2024	
MAILING ADDRESS PO Box 83142			Transaction ID : 5672741		Amount 1000.00	
CITY Gaithersburg	STATE MD	ZIP CODE 20883-3142	Occupation			
D. FULL NAME Herring, Grant, W., ,			Name of Employer GH Public Affairs		Date (month, day, year) 10/22/2024	
MAILING ADDRESS 1673 Park Rd NW Apt 201			Transaction ID : 5672736		Amount 1000.00	
CITY Washington	STATE DC	ZIP CODE 20010-2133	Occupation Consultant			
E. FULL NAME Reddy, Prem, , ,			Name of Employer Prime Healthcare Services, Inc.		Date (month, day, year) 10/22/2024	
MAILING ADDRESS 16850 Bear Valley Rd Ste 200			Transaction ID : 5672740		Amount 3300.00	
CITY Victorville	STATE CA	ZIP CODE 92395-5794	Occupation Owner			
SIGNATURE (optional) Murray, Allison, , ,				DATE 10/24/2024	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 Shukla, Aseem, , , 212 N 21st St Unit 1 Philadelphia PA 19103-1098		Name of Employer U of Penn Transaction ID : 5672739 Occupation Physician	
		Date (month, day, year) 10/22/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	