

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 Sherman for Congress					
ADDRESS (number and street) 445 S. Figueroa Street Suite 2400					
CITY Los Angeles		STATE CA		ZIP CODE 90071	
2. NAME OF CANDIDATE Sherman, Brad, , ,			3. OFFICE SOUGHT (State and District) House CA 32		4. FEC IDENTIFICATION NUMBER C00308742
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____					
A. FULL NAME Butera, James, , ,				Name of Employer Butera & Andrews	
MAILING ADDRESS 190 Harrier Way Unit 24 CITY				Date (month, day, year) 05/27/2026	
Chester		STATE MD	ZIP CODE 21619-2472	Amount 1000.00	
				Transaction ID : 11400036	
				Occupation Attorney	
B. FULL NAME California Credit Union Employees Federal PAC				Name of Employer	
MAILING ADDRESS 515 S Figueroa St Ste 1110 CITY				Date (month, day, year) 05/27/2026	
Los Angeles		STATE CA	ZIP CODE 90071-3314	Amount 2500.00	
				Transaction ID : 11394626	
				Occupation	
C. FULL NAME Heiman, Julie, , ,				Name of Employer The Arc Fresno/Madera Counties	
MAILING ADDRESS 31 Garden Ter				Date (month, day, year) 05/27/2026	
Irvine		STATE CA	ZIP CODE 92603-4212	Amount 3000.00	
				Transaction ID : 11386732	
				Occupation Attorney	
D. FULL NAME Hobb, Joseph, , ,				Name of Employer ALG Lawyers	
MAILING ADDRESS 5116 Beeman Ave				Date (month, day, year) 05/27/2026	
Valley Village		STATE CA	ZIP CODE 91607-2929	Amount 1400.00	
				Transaction ID : 11386711	
				Occupation Lawyer	
E. FULL NAME Istrin, Jonathan, , ,				Name of Employer Libertana	
MAILING ADDRESS 5537 Bluebell Ave				Date (month, day, year) 05/27/2026	
Valley Village		STATE CA	ZIP CODE 91607-1909	Amount 1400.00	
				Transaction ID : 11386602	
				Occupation Administrator	
SIGNATURE (optional) Kaufman, Stephen, , ,				DATE 05/29/2026	
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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ADDRESS (number and street) 445 S. Figueroa Street Suite 2400			
CITY, STATE, and ZIP CODE Los Angeles CA 90071			
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5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE National Association of Mutual Insurance Companies PAC 3601 Vincennes Rd Indianapolis IN 46268-1154		Name of Employer Date (month, day, year) 05/27/2026 Amount 2500.00 Transaction ID : 11394625 Occupation	
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	