

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 FRIENDS OF MICHAEL GUEST				
ADDRESS (number and street) POST OFFICE BOX 470				
CITY BRANDON		STATE MS		ZIP CODE 39043
2. NAME OF CANDIDATE GUEST, MICHAEL PATRICK, , ,			3. OFFICE SOUGHT (State and District) House MS 03	
4. FEC IDENTIFICATION NUMBER C00665752				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				

A. FULL NAME Duff, Thomas, M, ,			Name of Employer Southern Tire Mart		Date (month, day, year) 06/24/2022		Amount 2900.00	
MAILING ADDRESS 73 Tidewater Road			Transaction ID : F6.12313					
CITY Hattiesburg	STATE MS	ZIP CODE 39402	Occupation Owner					
B. FULL NAME Johnson, Edwin, , ,			Name of Employer		Date (month, day, year) 06/24/2022		Amount 1000.00	
MAILING ADDRESS PO Box 1348			Transaction ID : F6.12308					
CITY Columbia	STATE MS	ZIP CODE 39429	Occupation					
C. FULL NAME Moore, Phil, , ,			Name of Employer		Date (month, day, year) 06/24/2022		Amount 1000.00	
MAILING ADDRESS 212 Sawbridge Dr.			Transaction ID : F6.12310					
CITY Ridgeland	STATE MS	ZIP CODE 39157	Occupation					
D. FULL NAME Morgan, Harry, , ,			Name of Employer		Date (month, day, year) 06/24/2022		Amount 1000.00	
MAILING ADDRESS 26 Belletower Turn			Transaction ID : F6.12309					
CITY Hattiesburg	STATE MS	ZIP CODE 39402	Occupation					
E. FULL NAME Riggsbee, James, A., ,			Name of Employer		Date (month, day, year) 06/24/2022		Amount 1000.00	
MAILING ADDRESS			Transaction ID : F6.12290					
CITY	STATE	ZIP CODE	Occupation					
SIGNATURE (optional) Lisker, Lisa, , ,				DATE 06/26/2022		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		
[Electronically Filed]								

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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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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Shepard, Rachelle, , , 3939 Greystone Dr. Cedar Rapids IA 52411	Transaction ID : F6.12312 Occupation	06/24/2022	2500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Thaggard, Lee, , , Post Office Box 1089 Meridian MS 39301	Name of Employer Barry Thaggard & May Transaction ID : F6.12311 Occupation Attorney	Date (month, day, year) 06/24/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE 101 NORTH 3RD STREET MOORHEAD MN 56560	Name of Employer Transaction ID : F6.12318 Occupation	Date (month, day, year) 06/24/2022	Amount 5000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC) P.O. BOX 961039 FORT WORTH TX 76161	Name of Employer Transaction ID : F6.12315 Occupation	Date (month, day, year) 06/24/2022	Amount 2000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE MOLINA HEALTHCARE, INC. PAC 200 OCEANGATE SUITE 100 LONG BEACH CA 90802	Name of Employer Transaction ID : F6.12317 Occupation	Date (month, day, year) 06/24/2022	Amount 2000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE 8400 WESTPARK DRIVE TYSONS VA 22102		Name of Employer Transaction ID : F6.12314 Occupation		Date (month, day, year) 06/24/2022 Amount 5000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND ONE CONSTITUTION AVE NE WASHINGTON DC 20002		Name of Employer Transaction ID : F6.12316 Occupation		Date (month, day, year) 06/24/2022 Amount 2000.00
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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