

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 THE PAT HARRIGAN COMMITTEE																						
ADDRESS (number and street) PO BOX 97275																						
CITY RALEIGH		STATE NC		ZIP CODE 27624																		
2. NAME OF CANDIDATE HARRIGAN, PAT, , ,			3. OFFICE SOUGHT (State and District) House NC 14																			
4. FEC IDENTIFICATION NUMBER C00802298																						
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"> A. FULL NAME Conner, Shelly, , , </td> <td> Name of Employer Homemaker </td> <td> Date (month, day, year) 05/09/2022 </td> <td> Amount 1000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 3200 Beaty Rd </td> <td> Transaction ID : F6.5272 </td> <td></td> <td></td> </tr> <tr> <td> CITY Gastonia </td> <td> STATE NC </td> <td> ZIP CODE 28056 </td> <td> Occupation Homemaker </td> <td></td> <td></td> </tr> </table>					A. FULL NAME Conner, Shelly, , ,			Name of Employer Homemaker	Date (month, day, year) 05/09/2022	Amount 1000.00	MAILING ADDRESS 3200 Beaty Rd			Transaction ID : F6.5272			CITY Gastonia	STATE NC	ZIP CODE 28056	Occupation Homemaker		
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SIGNATURE (optional) McMichael, Collin, , ,				DATE 05/11/2022	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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Name of Employer Transaction ID : F6.5271 Occupation		Date (month, day, year) 05/09/2022	
Amount 1000.00			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year)	
Amount			
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