



SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISSOURI TRUTH PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		17443.03
(b) Cash on Hand at Beginning of Reporting Period.....	17443.03	
(c) Total Receipts (from Line 19) .....	500.00	500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	17943.03	17943.03
7. Total Disbursements (from Line 31).....	17600.00	17600.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	343.03	343.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

MISSOURI TRUTH PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	500.00	500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	500.00	500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	500.00	500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	500.00	500.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2300.00	2300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2300.00	2300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15300.00	15300.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17600.00	17600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17600.00	17600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	500.00	500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	500.00	500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2300.00	2300.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2300.00	2300.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)  
**MISSOURI TRUTH PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MOSELEY, ERIN, , ,**

Mailing Address **501 SAMUELS AVE**

City <b>FORT WORTH</b>	State <b>TX</b>	Zip Code <b>76102</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>LOCKHEED</b>	Occupation (for Individual) <b>VP</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**03 / 08 / 2024**

**Transaction ID : SA11AI.4288**

Amount of Each Receipt this Period  
**500.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>500.00</b>

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)
MISSOURI TRUTH PAC

Full Name (Last, First, Middle Initial)

A. AX CAPITAL

Mailing Address 555 METRO PLACE N
STE 525

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement ACCOUNTING & COMPLIANCE

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date of Disbursement: 03 / 19 / 2024

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B.4270

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINCO FUNDRAISING

Mailing Address 4007 BALCONES DR

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement FUNDRAISING SERVICES

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: 2024 Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date of Disbursement: 01 / 26 / 2024

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B.4271

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date of Disbursement

FEC Identification Number

FEC Identification Number: C

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2300.00

2300.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MISSOURI TRUTH PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN JACK FOR CONGRESS**

Mailing Address 225 MARKET PLACE CONNECTOR  
NUM 1055

City PEACHTREE CITY State GA Zip Code 30269

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: GA District: 03

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			25			2024			

FEC Identification Number

**C** C00872473

**Transaction ID : SB23.4295**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. DESPOSITO FOR NEW YORK**

Mailing Address PO BOX 188

City ISLAND PARK State NY Zip Code 11558

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NY District: 04

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			25			2024			

FEC Identification Number

**C** C00809426

**Transaction ID : SB23.4297**

Amount of Each Disbursement this Period

2000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. KEN CALVERT FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2438

City CORONA State CA Zip Code 92878

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District: 41

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			12			2024			

FEC Identification Number

**C** C00257337

**Transaction ID : SB23.4290**

Amount of Each Disbursement this Period

1000.00
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Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MISSOURI TRUTH PAC**

Full Name (Last, First, Middle Initial)

**A. LALOTA FOR CONGRESS**

Mailing Address PO BOX 5744

City  
HAUPPAUGE

State  
NY

Zip Code  
11788

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: NY District: 01

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	4

FEC Identification Number

**C** C00806018

**Transaction ID : SB23.4294**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MERRIN FOR CONGRESS**

Mailing Address PO BOX 75

City  
MONCLOVA

State  
OH

Zip Code  
43542

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	2	4

FEC Identification Number

**C** C00863829

**Transaction ID : SB23.4280**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MESSMER FOR CONGRESS**

Mailing Address PO BOX 44003

City  
INDIANAPOLIS

State  
IN

Zip Code  
46244

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: IN District: 08

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	4

FEC Identification Number

**C** C00867218

**Transaction ID : SB23.4291**

Amount of Each Disbursement this Period

1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

**TOTAL** This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
MISSOURI TRUTH PAC

Full Name (Last, First, Middle Initial)

A. MIKE BOST FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: 2024
Primary (checked), General, Other (specify)

Date of Disbursement

Date field: 03 / 05 / 2024

FEC Identification Number

C00546499

Transaction ID : SB23.4284

Amount of Each Disbursement this Period

Amount field: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MIKE BOST FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For: 2024
Primary (checked), General, Other (specify)

Date of Disbursement

Date field: 03 / 05 / 2024

FEC Identification Number

C00546499

Transaction ID : SB23.4286

Amount of Each Disbursement this Period

Amount field: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MISSOURI REPUBLICAN STATE COMMITTEE-FEDERAL

Mailing Address PO BOX 73

City JEFFERSON CITY State MO Zip Code 65102

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House, Senate, President
State: District:

Disbursement For:
Primary, General, Other (specify)

Date of Disbursement

Date field: 02 / 27 / 2024

FEC Identification Number

C00008664

Transaction ID : SB23.4282

Amount of Each Disbursement this Period

Amount field: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Subtotal field: 2300.00

Total field: (empty)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MISSOURI TRUTH PAC**

Full Name (Last, First, Middle Initial)

### A. NANCY DAHLSTROM FOR ALASKA

Mailing Address PO BOX 770729

City  
EAGLE RIVER

State  
AK

Zip Code  
99577

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: AK District: 00

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2024

FEC Identification Number

C C00856716

Transaction ID : SB23.4278

Amount of Each Disbursement this Period

1000.00
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Memo Item

Full Name (Last, First, Middle Initial)

### B. TRUMP SAVE AMERICA JOINT FUNDRAISING COMMITTEE

Mailing Address P.O. BOX 13570

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2024

FEC Identification Number

C C00770941

Transaction ID : SB23.4276

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6000.00
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15300.00
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