

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 Torres for Congress																						
ADDRESS (number and street) PO Box 580303																						
CITY Bronx		STATE NY		ZIP CODE 10458																		
2. NAME OF CANDIDATE Torres, Ritchie, John, ,			3. OFFICE SOUGHT (State and District) House NY 15																			
4. FEC IDENTIFICATION NUMBER C00699744																						
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 Cicilline, David, , , </td> <td> Name of Employer Ri-01 </td> <td> Date (month, day, year) 08/11/2022 </td> <td> Amount 2000.00 </td> </tr> <tr> <td colspan="3"> MAILING ADDRESS 15 Barbary Hill Rd </td> <td> Transaction ID : VVC9MT3C6S6 </td> <td></td> <td></td> </tr> <tr> <td> CITY Providence </td> <td> STATE RI </td> <td> ZIP CODE 02906-3319 </td> <td> Occupation Us Congressman </td> <td></td> <td></td> </tr> </table>					A. FULL NAME Cicilline, David, , ,			Name of Employer Ri-01	Date (month, day, year) 08/11/2022	Amount 2000.00	MAILING ADDRESS 15 Barbary Hill Rd			Transaction ID : VVC9MT3C6S6			CITY Providence	STATE RI	ZIP CODE 02906-3319	Occupation Us Congressman		
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SIGNATURE (optional) May, Jennifer, , ,				DATE 08/12/2022	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]																						

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 Rubin, Robert, , , 911 Park Ave New York NY 10075-0337	Name of Employer Council on Foreign Relations Transaction ID : VVC9MT3C6R9 Occupation Co-Chair	Date (month, day, year) 08/10/2022	Amount 2900.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Sapru, Nitin, , , 413 Clifton St Westfield NJ 07090-2614	Name of Employer Saba Capital Transaction ID : VVC9MT3C6P3 Occupation Finance	Date (month, day, year) 08/10/2022	Amount 2900.00
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
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