

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

TRUTH IN CONGRESS

ADDRESS (number and street)

7132 SORENSON CIRCLE

Check if different
than previously
reported. (ACC)

DALLAS

TX

75227

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00797316

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

TX

05

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
05 / 26 / 2026in the
State of

TX

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
05 / 06 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Torres, Ruth, , ,

Signature of Treasurer

Torres, Ruth, , ,

Date

M M / D D / Y Y Y Y
05 / 14 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

TRUTH IN CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
05 / 06 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	10.00	1671.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10.00	1671.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2559.84	7085.18
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2559.84	7085.18
8. Cash on Hand at Close of Reporting Period (from Line 27)	4035.09	
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)	38040.14	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TRUTH IN CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
05 / 06 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.) 15. OTHER RECEIPTS
(Dividends, Interest, etc.) 16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2559.84	7085.18
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	16530.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2559.84	23615.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6584.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10.00
25. SUBTOTAL (add Line 23 and Line 24).....	6594.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2559.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4035.09

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. Civitech PBCMailing Address 1023 Springdale Rd
Suite 1JCity
AustinState
TXZip Code
78721Purpose of Disbursement
softwarre

004

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

Date of Disbursement

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

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

108.25

Transaction ID : SB17.4417

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COSTCO WHSE

Mailing Address 1225 State HWY 276

City
RockwallState
TXZip Code
75032Purpose of Disbursement
gas

002

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	6

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

49.08

Transaction ID : SB17.4474

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COSTCO WHSE

Mailing Address 1225 State HWY 276

City
RockwallState
TXZip Code
75032Purpose of Disbursement
Volunteer Snacks & Drinks

004

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

Date of Disbursement

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

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

107.45

Transaction ID : SB17.4477

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

264.78

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. COSTCO WHSE

Mailing Address 1225 State HWY 276

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	6

City
RockwallState
TXZip Code
75032

FEC Identification Number

C C00797316Purpose of Disbursement
Gas

002

Amount of Each Disbursement this Period

55.76

Transaction ID : SB17.4481

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

State: TX

District: 05

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	6

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C C00797316Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

125.21

Transaction ID : SB17.4500

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

State: TX

District: 05

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C C00797316Purpose of Disbursement
travel

002

Amount of Each Disbursement this Period

52.89

Transaction ID : SB17.4469

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

State: TX

District: 05

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

233.86

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2026

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

0.00

Transaction ID : SB17.4470

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2026

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C C00797316

Purpose of Disbursement
travel

Candidate Name

TRUTH IN CONGRESS

Category/
Type

Amount of Each Disbursement this Period

10.64

Transaction ID : SB17.4471

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State: TX

District: 05

Runoff

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2026

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C C00797316

Purpose of Disbursement
travel

Candidate Name

TRUTH IN CONGRESS

Category/
Type

Amount of Each Disbursement this Period

175.98

Transaction ID : SB17.4472

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State: TX

District: 05

Runoff

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

186.62

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	6

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C	C00797316
---	-----------

Purpose of Disbursement
travel

002

Amount of Each Disbursement this Period

115.41

Transaction ID : SB17.4502

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State: TX

District: 05

Runoff

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C	C00797316
---	-----------

Purpose of Disbursement
travel

002

Amount of Each Disbursement this Period

215.41

Transaction ID : SB17.4478

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State: TX

District: 05

Runoff

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	6

City
NorwalkState
CTZip Code
06851

FEC Identification Number

C	C00797316
---	-----------

Purpose of Disbursement
travel

002

Amount of Each Disbursement this Period

246.98

Transaction ID : SB17.4423

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State: TX

District: 05

Runoff

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

577.80

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 401 Merritt 7

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2026

City
NorwalkState
CTZip Code
06851Purpose of Disbursement
travel

002

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

130.81

Transaction ID : SB17.4485

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sixt

Mailing Address 2500 S Garage Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2026

City
DallasState
TXZip Code
75261Purpose of Disbursement
Car Rental

002

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

149.15

Transaction ID : SB17.4419

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sixt

Mailing Address 2500 S Garage Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2026

City
DallasState
TXZip Code
75261Purpose of Disbursement
Car Rental

002

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

State: TX District: 05

Runoff

FEC Identification Number

C C00797316

Amount of Each Disbursement this Period

200.41

Transaction ID : SB17.4421

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

480.37

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. Tmobile

Mailing Address 12920 SE 38th St

Date of Disbursement

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

City
BellevueState
WAZip Code
98006

FEC Identification Number

C	C00797316
---	-----------

Purpose of Disbursement
Administrative

001

Amount of Each Disbursement this Period

93.06

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.4387

☐ Memo Item

State: TX

District: 05

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1515 3rd St

Date of Disbursement

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

City
San FranciscoState
CAZip Code
94158

FEC Identification Number

C	C00797316
---	-----------

Purpose of Disbursement
Transportation

002

Amount of Each Disbursement this Period

40.59

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

Transaction ID : SB17.4422

☐ Memo Item

State: TX

District: 05

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1515 3rd St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	6

City
San FranciscoState
CAZip Code
94158

FEC Identification Number

C	C00797316
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Purpose of Disbursement
travel

002

Amount of Each Disbursement this Period

44.11

Candidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

Transaction ID : SB17.4473

☐ Memo Item

State: TX

District: 05

Full Name (Last, First, Middle Initial)

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

177.76

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1515 3rd St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2026

City
San FranciscoState
CAZip Code
94158

FEC Identification Number

C C00797316

Purpose of Disbursement
transport

002

Amount of Each Disbursement this Period

50.12

Transaction ID : SB17.4424

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: TX District: 05Disbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

Full Name (Last, First, Middle Initial)

B. WAL-MART

Mailing Address 555 W Intersate 30

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2026

City
GarlandState
TXZip Code
75043

FEC Identification Number

C C00797316

Purpose of Disbursement
Volunteer Snacks

004

Amount of Each Disbursement this Period

43.65

Transaction ID : SB17.4466

☐ Memo ItemCandidate Name
TRUTH IN CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: TX District: 05Disbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

93.77

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

2014.96

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼

Torres, Ruth, , ,

Mailing Address

3330 N Galloway Ave
S304 PMB 131

City

Mesquite

State

TX

ZIP Code

75150

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 01 / 2022M M / D D / Y Y Y Y
01/01/2023

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4108

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2022

☐ Primary☒ General☐ Other (specify) ▼

Torres, Ruth, , ,

Mailing Address

3330 N Galloway Ave
S304 PMB 131

City

Mesquite

State

TX

ZIP Code

75150

☒ Personal Funds of the Candidate

Original Amount of Loan

230.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

230.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 13 / 2022

M M / D D / Y Y Y Y

01/01/2023

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

230.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4109

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Torres, Ruth, , ,

Mailing Address

3330 N Galloway Ave
S304 PMB 131

City

Mesquite

State

TX

ZIP Code

75150

☒ Personal Funds of the Candidate

Original Amount of Loan

800.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

800.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 01 / 2023

M M / D D / Y Y Y Y

11/06/2024

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

800.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4110

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Torres, Ruth, , ,

Mailing Address

3330 N Galloway Ave
S304 PMB 131

City

Mesquite

State

TX

ZIP Code

75150

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 02 / 2023

M M / D D / Y Y Y Y

11/06/2024

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4111

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Torres, Ruth, , ,

Mailing Address

3330 N Galloway Ave
S304 PMB 131

City

Mesquite

State

TX

ZIP Code

75150

☒ Personal Funds of the Candidate

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 01 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

none

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4329

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

TRUTH IN CONGRESS

Mailing Address

7132 SORENSON CIRCLE

City

DALLAS

State

TX

ZIP Code

75227

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 20 / 2025M M / D D / Y Y Y Y
11/03/2026Y Y Y Y / Y Y Y Y
11/03/2026

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4505

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

TRUTH IN CONGRESS

Mailing Address

7132 SORENSON CIRCLE

City

DALLAS

State

TX

ZIP Code

75227

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 07 / 2026

M M / D D / Y Y Y Y

11/03/2026

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 19 OF 21

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4112

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Marsaw, Leonard, , ,

Mailing Address

525 Melody Meadow

City

Rockwall

State

TX

ZIP Code

75087

☐ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 15 / 2024

M M / D D / Y Y Y Y

04/15/2024

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 21

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4114

TRUTH IN CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Marsaw, Leonard, , ,

Mailing Address

525 Melody Meadow

City

Rockwall

State

TX

ZIP Code

75087

☐ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 15 / 2024

M M / D D / Y Y Y Y

04/15/2024

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

36530.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

TRUTH IN CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Get Out The Vote

Nature of Debt (Purpose):

Robocalls & Texts

Mailing Address

City

New York

State

NY

Zip Code

Outstanding Balance Beginning This Period

1110.14

Transaction ID : SD10.4259

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1110.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Innovative Solutions IT

Nature of Debt (Purpose):

Mailer Design

Mailing Address 10862 Redstone Ct

City

Missouri City

State

TX

Zip Code

77459

Outstanding Balance Beginning This Period

400.00

Transaction ID : SD10.4258

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

1510.14

2) **TOTALS** This Period (last page this line number only)

1510.14

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

36530.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

38040.14