

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

William Marks for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2026 To: M M / D D / Y Y Y Y 05 / 31 / 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))	0.00	48610.09
(b) Total Contribution Refunds (from Line 20(d))	7000.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 7000.00	41610.09
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1642.93	57641.42
(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))	1642.93	57641.42
8. Cash on Hand at Close of Reporting Period (from Line 27)		
	0.00	
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	

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

William Marks for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2026 To: M M / D D / Y Y Y Y 05 / 31 / 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).....	0.00	24487.00
(ii) Unitemized.....	0.00	23123.09
(iii) TOTAL of contributions from individuals ▶	0.00	47610.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	48610.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	30000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	30000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	300.36	444.85
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	300.36	79054.94

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.....	1642.93	57641.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	9088.52	9088.52
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	9088.52	9088.52
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	7000.00	7000.00
(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)).....	7000.00	7000.00
21. OTHER DISBURSEMENTS	0.00	5325.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17731.45	79054.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17431.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	300.36
25. SUBTOTAL (add Line 23 and Line 24).....	17731.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17731.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 14	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
William Marks for Congress

Full Name (Last, First, Middle Initial) Ramp Corporation			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 07 / 2026	
Mailing Address 28 West 23 Street 2nd Floor			Transaction ID : A-1207	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period 271.25	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Rewards	
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 421.34		

Full Name (Last, First, Middle Initial) Ramp Corporation			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2026	
Mailing Address 28 West 23 Street 2nd Floor			Transaction ID : A-1219	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period 11.99	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Rewards	
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 433.33		

Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address				
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

SUBTOTAL of Receipts This Page (optional)..... ▶	283.24
TOTAL This Period (last page this line number only)..... ▶	283.24

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
William Marks for Congress

Full Name (Last, First, Middle Initial) A. Sunrise Political Solutions, Inc			Date of Disbursement MM / DD / YYYY 04 / 01 / 2026	
Mailing Address PO BOX 1004			FEC Identification Number C	
City La Mesa	State CA	Zip Code 91944	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Compliance Services		Category/ Type 001	Transaction ID : B-1205	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Integrated Solutions: Political			Date of Disbursement MM / DD / YYYY 04 / 02 / 2026	
Mailing Address 4142 Adams Avenue Suite 103-550			FEC Identification Number C	
City San Diego	State CA	Zip Code 92116	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Compliance Software		Category/ Type 001	Transaction ID : B-1204	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Ramp Corporation			Date of Disbursement MM / DD / YYYY 04 / 02 / 2026	
Mailing Address 28 West 23 Street 2nd Floor			FEC Identification Number C	
City New York	State NY	Zip Code 10010	Amount of Each Disbursement this Period 230.94	
Purpose of Disbursement Credit Card Payment		Category/ Type 001	Transaction ID : B-1208	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1180.94
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 Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
William Marks for Congress

Full Name (Last, First, Middle Initial) A. Meta Platforms Inc			Date of Disbursement MM / DD / YYYY 03 / 31 / 2026	
Mailing Address 1 Meta Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 11.99	
Purpose of Disbursement Facebook Ads		Category/ Type 004	Transaction ID : B-1209	
Candidate Name		Memo Item MEMO: Subvendor of-Ramp Corporation		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Meta Platforms Inc			Date of Disbursement MM / DD / YYYY 03 / 31 / 2026	
Mailing Address 1 Meta Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 218.95	
Purpose of Disbursement Facebook Ads		Category/ Type 004	Transaction ID : B-1210	
Candidate Name		Memo Item MEMO: Subvendor of-Ramp Corporation		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Ramp Corporation			Date of Disbursement MM / DD / YYYY 04 / 03 / 2026	
Mailing Address 28 West 23 Street 2nd Floor			FEC Identification Number C	
City New York	State NY	Zip Code 10010	Amount of Each Disbursement this Period 11.99	
Purpose of Disbursement Credit Card Payment		Category/ Type 001	Transaction ID : B-1211	
Candidate Name		Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	11.99
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 Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
William Marks for Congress

Full Name (Last, First, Middle Initial) A. Meta Platforms Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2026	
Mailing Address 1 Meta Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 11.99	
Purpose of Disbursement Facebook Ads		Category/ Type 001	Transaction ID : B-1212	
Candidate Name		Memo Item MEMO: Subvendor of-Ramp Corporation		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Integrated Solutions: Political			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2026	
Mailing Address 4142 Adams Avenue Suite 103-550			FEC Identification Number C	
City San Diego	State CA	Zip Code 92116	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Compliance Software		Category/ Type 001	Transaction ID : B-1218	
Candidate Name		Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	1642.93

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 14	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
William Marks for Congress

Full Name (Last, First, Middle Initial) A. Marks, William, James, Mr,		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2026
Mailing Address PO BOX 170265		FEC Identification Number C H6TX25211
City Arlington	State TX	Zip Code 76003
Purpose of Disbursement Loan Repayment	<input type="checkbox"/> 009	Amount of Each Disbursement this Period 9088.52
Candidate Name Marks, William, James, Mr,	Category/ Type	Transaction ID : B-1220
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX District: 25		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	9088.52
TOTAL This Period (last page this line number only).....▶	9088.52

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
William Marks for Congress

Full Name (Last, First, Middle Initial) A. Jones, Nelson, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2026
Mailing Address 2016 Main Street Apt 1701		FEC Identification Number C
City Houston	State TX	Zip Code 77002
Purpose of Disbursement Refund of Contribution	Category/ Type 010	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-1215 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Ricca, Peter, , ,		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2026
Mailing Address 2106 W Pioneer Pkwy Suite 132		FEC Identification Number C
City Pantego	State TX	Zip Code 76013
Purpose of Disbursement Refund of Contribution	Category/ Type 010	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-1216 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	7000.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : C-206**
 William Marks for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marks, William, James, Mr,		<input checked="" type="checkbox"/> Primary
Mailing Address PO BOX 170265		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Arlington	State TX	ZIP Code 76003
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 0.00
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TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 23 / 2025	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	[] 0.00
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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10
Transaction ID : C-206

Outstanding Loan Amount of 20000.00 was reduced in the amount of 20000.00 by forgiveness

Form/Schedule:
Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : C-412**
 William Marks for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Marks, William, James, Mr,		<input checked="" type="checkbox"/> Primary
Mailing Address PO BOX 170265		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Arlington	State TX	ZIP Code 76003
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	9088.52	0.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 09 / 29 / 2025	M M / D D / Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	0.00
TOTALS This Period (last page in this line only).....▶	0.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10
Transaction ID : C-412

Outstanding Loan Amount of 10000.00 was reduced in the amount of 911.48 by forgiveness

Form/Schedule:
Transaction ID: