

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 RUDY FOR INDIANA			
ADDRESS (number and street) PO BOX 26141			
CITY ALEXANDRIA	STATE VA	ZIP CODE 22313-6141	
2. NAME OF CANDIDATE YAKYM, RUDY, C., , III		3. OFFICE SOUGHT (State and District) House IN 02	
4. FEC IDENTIFICATION NUMBER C00822767			
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			

A. FULL NAME CONCERNED AMERICANS FOR FREEDOM & OPPORTUNITY PAC (CAFO PAC) MAILING ADDRESS 228 S WASHINGTON ST STE 115 <table style="width: 100%;"> <tr> <td style="width: 33%;">CITY ALEXANDRIA</td> <td style="width: 17%;">STATE VA</td> <td style="width: 50%;">ZIP CODE 22314-5404</td> </tr> </table>	CITY ALEXANDRIA	STATE VA	ZIP CODE 22314-5404	Name of Employer Transaction ID : TX4020 Occupation	Date (month, day, year) 10/28/2022	Amount 2500.00
CITY ALEXANDRIA	STATE VA	ZIP CODE 22314-5404				
B. FULL NAME UPPER HAND FUND MAILING ADDRESS PO BOX 2485 <table style="width: 100%;"> <tr> <td style="width: 33%;">CITY SPRINGFIELD</td> <td style="width: 17%;">STATE VA</td> <td style="width: 50%;">ZIP CODE 22152-</td> </tr> </table>	CITY SPRINGFIELD	STATE VA	ZIP CODE 22152-	Name of Employer Transaction ID : TX4037 Occupation	Date (month, day, year) 10/29/2022	Amount 5000.00
CITY SPRINGFIELD	STATE VA	ZIP CODE 22152-				
C. FULL NAME FORD, SHARIE, , , MAILING ADDRESS 58482 COUNTY ROAD 117 <table style="width: 100%;"> <tr> <td style="width: 33%;">CITY GOSHEN</td> <td style="width: 17%;">STATE IN</td> <td style="width: 50%;">ZIP CODE 46528-7033</td> </tr> </table>	CITY GOSHEN	STATE IN	ZIP CODE 46528-7033	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX4024 INFORMATION REQUESTED PER BI	Date (month, day, year) 10/28/2022	Amount 2900.00
CITY GOSHEN	STATE IN	ZIP CODE 46528-7033				
D. FULL NAME PARIN, MICHAEL, , , MAILING ADDRESS 12930 MARSH LANDING <table style="width: 100%;"> <tr> <td style="width: 33%;">CITY WEST PALM BEACH</td> <td style="width: 17%;">STATE FL</td> <td style="width: 50%;">ZIP CODE 33418-7503</td> </tr> </table>	CITY WEST PALM BEACH	STATE FL	ZIP CODE 33418-7503	Name of Employer RETIRED Transaction ID : TX4019 RETIRED	Date (month, day, year) 10/28/2022	Amount 5000.00
CITY WEST PALM BEACH	STATE FL	ZIP CODE 33418-7503				
E. FULL NAME SHAFFNER, BRUCE, , , MAILING ADDRESS 2310 WINONA AVENUE <table style="width: 100%;"> <tr> <td style="width: 33%;">CITY WINONA LAKE</td> <td style="width: 17%;">STATE IN</td> <td style="width: 50%;">ZIP CODE 46590-2113</td> </tr> </table>	CITY WINONA LAKE	STATE IN	ZIP CODE 46590-2113	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX4032 INFORMATION REQUESTED PER BI	Date (month, day, year) 10/28/2022	Amount 1000.00
CITY WINONA LAKE	STATE IN	ZIP CODE 46590-2113				

SIGNATURE (optional) MARSTON, CHRIS, , , [Electronically Filed]	DATE 10/30/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
---	---------------------------	--

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)

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 RUDY FOR INDIANA			
ADDRESS (number and street) PO BOX 26141			
CITY, STATE, and ZIP CODE ALEXANDRIA VA 22313-6141			
2. NAME OF CANDIDATE YAKYM, RUDY, C., , III		3. OFFICE SOUGHT (State and District) House IN 02	
4. FEC IDENTIFICATION NUMBER C00822767		<i>continuation page</i>	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE SNOW, CRAIG, , , 6 STONE CAMP TRAIL WINONA LAKE IN 46590-1600			
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX4031 Occupation INFORMATION REQUESTED PER BI		Date (month, day, year) 10/28/2022 Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	
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	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	