

**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

HAGGARD FOR CONGRESS

ADDRESS (number and street)

PO BOX 1053

Check if different
than previously
reported. (ACC)

MOORESVILLE

IN

46158

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00855890

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IN

04

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

in the
State of(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
10 / 01 / 2024

through

M M / D D / Y Y Y Y
12 / 31 / 2024*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

BROGHAMER, KEVIN, , ,

Signature of Treasurer

BROGHAMER, KEVIN, , ,

Date

M M / D D / Y Y Y Y
04 / 08 / 2025

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

HAGGARD FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024

	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))	23240.25	95982.05
(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))	23240.25	95982.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10142.66	35339.63
(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))	10142.66	35339.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	60642.42	
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.

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

HAGGARD FOR CONGRESS

Report Covering the Period: From: 10 / 01 / 2024 To: 12 / 31 / 2024

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 05 / 2024 (date of general election)	COLUMN C Total for 11 / 06 / 2024 (date after general election) through 12 / 31 / 2024 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
18155.00	69367.80	15155.00
(ii) Unitemized		
85.25	1314.25	45.00
(iii) Total of contributions from individuals		
18240.25	70682.05	15200.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
5000.00	25300.00	5000.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
23240.25	95982.05	20200.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
23240.25	95982.05	20200.00

POST-ELECTION DETAILED SUMMARY PAGE
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

HAGGARD FOR CONGRESS

Report Covering the Period: From: 10 / 01 / 2024 To: 12 / 31 / 2024

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
10142.66	35339.63	4302.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
---	---	--

(c) Other Political Committees (such as PACs)

0.00

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

0.00

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

10142.66

35339.63

4302.16

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

23240.25

95982.05

20200.00

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

10142.66

35339.63

4302.16

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

47544.83

23240.25

70785.08

10142.66

60642.42

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

PAGE 7 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

AUBIN, LUDGER, CHESTER, MR.,

Mailing Address 5520 WEST 200 NORTH

City

BARGERSVILLE

State

IN

Zip Code

46106-9469

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHNSON COUNTY REMC

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2024

Transaction ID : SA11A.193

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BISHOP, DUANE, , ,

Mailing Address 8888 E HENDRICKS CO RD

City

PLAINFIELD

State

IN

Zip Code

46168-7533

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CARPENTER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		06		2024

Transaction ID : SA11A.185

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BOWELL, MARK, , ,

Mailing Address 7710 SARGENT RD

City

INDIANAPOLIS

State

IN

Zip Code

46256-1833

FEC ID number of contributing
federal political committee.

C

Name of Employer

TESCO

Occupation

EVP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2024

Transaction ID : SA11A.178

Amount of Each Receipt this Period

1000.00

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

2000.00

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

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

PAGE 8 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

COPENHAVER, PAULA, , ,

A. Mailing Address 809 CROCKETT STCity
COVINGTONState
INZip Code
47932-1436FEC ID number of contributing
federal political committee.

C

Name of Employer
INDIANA ATTORNEY GENERALOccupation
DIRECTOR OF EXTERNAL AFFAIRS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 16 2024

Transaction ID : SA11A.196

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DELLINGER, MICHAEL, , ,

B. Mailing Address 862 MEADOW COURTCity
MOORESVILLEState
INZip Code
46158-2711FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN COUNTY EDCOccupation
EXECUTIVE DIRECTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 20 2024

Transaction ID : SA11A.184

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HAGGARD, JEFF, , ,

C. Mailing Address 2345 E COUNTRY CLUB RDCity
MARTINSVILLEState
INZip Code
46151-6212FEC ID number of contributing
federal political committee.

C

Name of Employer
HAGGARD & STOCKINGOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 05 2024

Transaction ID : SA11A.183

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1500.00

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

PAGE 9 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOPKINS, TREG, , DR.,

A.

Mailing Address 181 EAST COUNTY ROAD 1200 NORTH

City

ROACHDALE

State

IN

Zip Code

46172-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONNECTABLE EDUCATION

Occupation

NATIONAL DIRECT OF ADMIN. & LEADERSH

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2024D D / Y Y Y Y Y
28 / 2024Y Y Y Y Y
2024

Transaction ID : SA11A.179

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION**B.**

Full Name (Last, First, Middle Initial)

LONG, GREG, , ,

Mailing Address 1675 WEST SHORE DR

City

MARTINSVILLE

State

IN

Zip Code

46151-8885

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN AIRLINES

Occupation

PILOT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2024D D / Y Y Y Y Y
11 / 2024Y Y Y Y Y
2024

Transaction ID : SA11A.190

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION**C.**

Full Name (Last, First, Middle Initial)

MAHANT, SIDDHARTH, , ,

Mailing Address 6701 66TH STREET NORTHEAST

City

MARYSVILLE

State

WA

Zip Code

98270-6594

FEC ID number of contributing
federal political committee.

C

Name of Employer

MAHANT TRANSPORTATION LLC

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2024D D / Y Y Y Y Y
15 / 2024Y Y Y Y Y
2024

Transaction ID : SA11A.192

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION
SEE REATTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ▶

6500.00

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

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

PAGE 10 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCCONNELL, JOHN, , ,

A.

Mailing Address 725 NORTHRIDGE DRIVE

City

WEST LAFAYETTE

State

IN

Zip Code

47906-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer

PURDUE

Occupation

PROFESSOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2024			

Transaction ID : SA11A.180

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION**B.**

Full Name (Last, First, Middle Initial)

OVERTON, STEVEN, L., MR.,

Mailing Address 7546 E RUBY LN.

City

CAMBY

State

IN

Zip Code

46113-8032

FEC ID number of contributing
federal political committee.

C

Name of Employer

OVERTON INDUSTRIES

Occupation

CFO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2024			

Transaction ID : SA11A.177

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION**C.**

Full Name (Last, First, Middle Initial)

WEIL, BRENT, R., MR.,

Mailing Address 13101 REISING LANE

City

EVANSVILLE

State

IN

Zip Code

47720-7919

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			23			2024			

Transaction ID : SA11A.197

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►

1000.00

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

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

PAGE 11 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

YONOVER, SCOTT, D., MR.,

A.

Mailing Address 535 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

555.00

Date of Receipt

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

Transaction ID : SA11A.191

Amount of Each Receipt this Period

555.00

☐ Memo Item
CONTRIBUTION**B.**

Full Name (Last, First, Middle Initial)

CROWN SAFARI GROUP LLC

Mailing Address P.O. BOX 152

City

CAMBY

State

IN

Zip Code

46113-0152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	4

Transaction ID : SA11A.187

Amount of Each Receipt this Period

3300.00

☐ Memo Item
CONTRIBUTIONSEE PARTNERSHIP ATTRIBUTION; SEE
ATTRIBUTION BELOW**C.**

Full Name (Last, First, Middle Initial)

HAGGARD, BROOKE, , MRS.,

Mailing Address P.O. BOX 152

City

CAMBY

State

IN

Zip Code

46113-0152

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROWN SAFARI GROUP LLC

Occupation

PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	4

Transaction ID : SA11A.188

Amount of Each Receipt this Period

3300.00

☒ Memo Item
CONTRIBUTIONSEE PARTNERSHIP ATTRIBUTION; PARTNERSHIP
ATTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ▶

3855.00

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

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

PAGE 12 OF 16

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

SC MANUFACTURING TEXAS LLC

A.

Mailing Address 6401 COUNTY ROAD 912

City

JOSHUA

State

TX

Zip Code

76058-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2024			

Transaction ID : SA11A.186

Amount of Each Receipt this Period

3300.00



Memo Item

CONTRIBUTION

SEE PARTNERSHIP ATTRIBUTION; SEE
ATTRIBUTION BELOW**B.**

Full Name (Last, First, Middle Initial)

MILLER, CHRIS, , MR.,

Mailing Address 6401 COUNTY ROAD 912

City

JOSHUA

State

TX

Zip Code

76058-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SC MANUFACTURING

GENERAL MANAGER OF OPERATIONS

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2024			

Transaction ID : SA11A.189

Amount of Each Receipt this Period

3300.00



Memo Item

CONTRIBUTION

SEE PARTNERSHIP ATTRIBUTION; PARTNERSHIP
ATTRIBUTION**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

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

3300.00

18155.00

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

PAGE 13 OF 16

☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
12	13a	13b	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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE FUND FOR AMERICAN EXCEPTIONALISM**A.**Mailing Address 5868 E 71ST ST
STE E-372City
INDIANAPOLISState
INZip Code
46220-5878FEC ID number of contributing
federal political committee.**C** C00512855

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		23		2024

Transaction ID : SA11C.198

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5000.00

5000.00

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

PAGE 14 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BNC GRAPHICS LLC

Mailing Address 19 7TH AVENUE

City
BLUFFTONState
SCZip Code
29910Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

570.00

Transaction ID : SB17.I66

☐ Memo Item**B. BROGHAMER CONSULTING LLC**

Mailing Address 502 MONROE STREET

City
NEWPORTState
KYZip Code
41071Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1443.75

Transaction ID : SB17.I54

☐ Memo Item**C. BROGHAMER CONSULTING LLC**

Mailing Address 502 MONROE STREET

City
NEWPORTState
KYZip Code
41071Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1361.25

Transaction ID : SB17.I60

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

3375.00

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)

PAGE 15 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RED STITCH CREATIVE LLC

Mailing Address 1046 SUMMIT DRIVE

City
CARMELState
INZip Code
46032Purpose of Disbursement
MARKETING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

358.45

Transaction ID : SB17.I73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RHEIN CONSULTING LLC

Mailing Address 18358 GOINS BOULEVARD

City
CARMELState
INZip Code
46074Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB17.I59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RHEIN CONSULTING LLC

Mailing Address 18358 GOINS BOULEVARD

City
CARMELState
INZip Code
46074Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1720.00

Transaction ID : SB17.I68

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

4878.45

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:
(check only one)

PAGE 16 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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)

HAGGARD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RHEIN CONSULTING LLC

Mailing Address 18358 GOINS BOULEVARD

City
CARMELState
INZip Code
46074Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.169

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ 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

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1500.00

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

9753.45