

**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

Andy Kaplan for Congress

ADDRESS (number and street)

1117 Palmyra Dr

Check if different
than previously
reported. (ACC)

Tega Cay

SC

29708

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00958199

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

SC

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

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
01 / 01 / 2026

through

M M / D D / Y Y Y Y
03 / 31 / 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 Kaplan, Andrew, , ,

Signature of Treasurer

Kaplan, Andrew, , ,

Date

M M / D D / Y Y Y Y
08 / 09 / 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

Andy Kaplan for Congress

Report Covering the Period:

From:

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

To:

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

	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))	681.95	681.95
(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))	681.95	681.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	581.95	581.95
(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))	581.95	581.95
8. Cash on Hand at Close of Reporting Period (from Line 27)	100.00	
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

Andy Kaplan for Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 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).....

(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.....

581.95

581.95

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

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

581.95

581.95

III. CASH SUMMARY

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

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

681.95

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

681.95

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

581.95

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

100.00

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 7

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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)

Andy Kaplan for Congress

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

A.

Mailing Address 1117 Palmyra DR

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

12.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 04 2026

Transaction ID : SA11D.4110

Amount of Each Receipt this Period

12.90

☐ Memo Item

Website Expense - Wix

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

B.

Mailing Address 1117 Palmyra DR

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

199.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 04 2026

Transaction ID : SA11D.4112

Amount of Each Receipt this Period

186.18

☐ Memo Item

Website Expense - Wix

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

C.

Mailing Address 1117 Palmyra DR

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

217.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2026

Transaction ID : SA11D.4114

Amount of Each Receipt this Period

17.97

☐ Memo Item

Website Expense - Wix

SUBTOTAL of Receipts This Page (optional)..... ►

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

217.05

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 6 OF 7

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Andy Kaplan for Congress

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

A.

Mailing Address 1117 Palmyra DR

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

397.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2026

Transaction ID : SA11D.4116

Amount of Each Receipt this Period

180.90

☐ Memo Item

Website Expense - Wix

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

B.

Mailing Address 1117 Palmyra DR

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

581.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 27 2026

Transaction ID : SA11D.4118

Amount of Each Receipt this Period

184.00

☐ Memo Item

American Majority - Strategy & Fundraising Tool

Full Name (Last, First, Middle Initial)

Kaplan, Andrew, , ,

C.

Mailing Address 1117 Palmyra Dr

City

Tega Cay

State

SC

Zip Code

29708

FEC ID number of contributing
federal political committee.

C H6SC05236

Name of Employer

Hologic, Inc.

Occupation

Med Device

Receipt For: 2026

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4109

Amount of Each Receipt this Period

100.00

☐ Memo Item

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

464.90

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

681.95

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

PAGE 7 OF 7

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Andy Kaplan for Congress

Full Name (Last, First, Middle Initial)

A. Kaplan, Andrew, , ,

Mailing Address 1117 Palmyra DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2026

City
Tega CayState
SCZip Code
29708

FEC Identification Number

☒ H6SC05236Purpose of Disbursement
Website Expense - WixCandidate Name
Kaplan, Andrew, , ,Category/
Type

Amount of Each Disbursement this Period

17.97

Transaction ID : SB17.4115

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: SC

District: 05

Full Name (Last, First, Middle Initial)

B. Kaplan, Andrew, , ,

Mailing Address 1117 Palmyra DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2026

City
Tega CayState
SCZip Code
29708

FEC Identification Number

☒ H6SC05236Purpose of Disbursement
Website Expense - WixCandidate Name
Kaplan, Andrew, , ,Category/
Type

Amount of Each Disbursement this Period

180.90

Transaction ID : SB17.4117

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: SC

District: 05

Full Name (Last, First, Middle Initial)

C. Kaplan, Andrew, , ,

Mailing Address 1117 Palmyra DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2026

City
Tega CayState
SCZip Code
29708

FEC Identification Number

☒ H6SC05236Purpose of Disbursement
American Majority - Strategy & Fundraising ToolCandidate Name
Kaplan, Andrew, , ,Category/
Type

Amount of Each Disbursement this Period

184.00

Transaction ID : SB17.4119

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: SC

District: 05

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

382.87

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

382.87