



Filing ID #10074611

# FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B81 Cannon Building • Washington, DC 20515

## FILER INFORMATION

**Name:** David Lawrence Boyd  
**Status:** Congressional Candidate  
**State/District:** IN06

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2026  
**Filing Date:** 03/30/2026  
**Period Covered:** 01/01/2025– 03/06/2026

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

None disclosed.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
PROGRESSIVE INSURANCE	SALARY	\$25,622.12	\$159,760.85
PHYSICIANS RESEARCH GROUP	SPOUSE SALARY	\$11,620.05	\$5,419.70

## SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	WELLS FARGO BANK	02/23	CREDIT CARD	\$10,000 - \$15,000

## SCHEDULE E: POSITIONS

None disclosed.

## SCHEDULE F: AGREEMENTS

None disclosed.

## **SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE**

None disclosed.

## **EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION**

**Trusts:** Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes  No

**Exemption:** Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

Yes  No

## **CERTIFICATION AND SIGNATURE**

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** David Lawrence Boyd , 03/30/2026