

**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

Tiberi for Congress

ADDRESS (number and street)

2931 E Dublin Granville Road

Suite 190

Check if different
than previously
reported. (ACC)

Columbus

OH

43231-2098

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00347492

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

OH

12

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
05 / 06 / 2014in the
State of

OH

(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
04 / 01 / 2014

through

M M / D D / Y Y Y Y
04 / 16 / 2014

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 Jeffrey Benton

Signature of Treasurer

Jeffrey Benton

[Electronically Filed]

Date

M M / D D / Y Y Y Y
09 / 19 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 47

Write or Type Committee Name

Tiberi for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

	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))....	55150	2134916.25
(b) Total Contribution Refunds (from Line 20(d))	0	4555.82
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	55150	2130360.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	36852.61	777361.32
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	36852.61	777361.32
8. Cash on Hand at Close of Reporting Period (from Line 27)	2752949.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 47

Write or Type Committee Name

Tiberi for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

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).....

22150

739148.93

(ii) Unitemized.....

0

0

(iii) TOTAL of contributions from individuals ▶

22150

739148.93

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

33000

1395767.32

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

55150

2134916.25

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0

0

15. OTHER RECEIPTS (Dividends, Interest, etc.)

14.28

10685.89

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

55164.28

2145602.14

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 47

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36852.61	777361.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	3000
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	1555.82
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	4555.82
21. OTHER DISBURSEMENTS	6700	201245.52
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	43552.61	983162.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2741338.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55164.28
25. SUBTOTAL (add Line 23 and Line 24).....	2796502.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43552.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2752949.86

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

Mark Alfonso

Mailing Address 7286 Lambton Green N

City

New Albany

State

OH

Zip Code

43054-8085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Riverside Radiology Assoc

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2014

Transaction ID : A-CF33089

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Kristin L Barens

Mailing Address 28 Royal Grove

City

Irvine

State

CA

Zip Code

92620-3548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mullin Barens Sanford

Occupation

Insurance Sales

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		02		2014

Transaction ID : A-CF33013

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

George Blaha

Mailing Address 60 Kensington Oval

City

Rocky River

State

OH

Zip Code

44116-1505

FEC ID number of contributing
federal political committee.

C

Name of Employer

The BOLI Group

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		05		2014

Transaction ID : A-CF33048

Amount of Each Receipt this Period

500

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

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

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
Doyce A Boesch

Mailing Address 4515 W Street NW

City Washington State DC Zip Code 20007-1513

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

Name of Employer Self Occupation Govt Relations

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		12		2014

Transaction ID : A-CF33026

Amount of Each Receipt this Period

250

B. Full Name (Last, First, Middle Initial)
Michael P DeLauder

Mailing Address 5148 Hoover Gate Lane

City Westerville State OH Zip Code 43082-8030

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

Name of Employer Scioto Valve & Fitting Co. Occupation Owner

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2014

Transaction ID : A-CF33100

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Anthony Domino

Mailing Address 83 Long Lots Road

City New Canaan State CT Zip Code 06840-5041

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

Name of Employer self Occupation Benefits Consultant

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date 3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

Transaction ID : A-CF33019

Amount of Each Receipt this Period

1000

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

1750.00

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

PAGE 7 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Doran

Mailing Address 2530 Timberman Road

City Hamilton State OH Zip Code 45013-9622

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

Name of Employer Ace Doran Hauling & Rigging Occupation President

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **200**

Date of Receipt

M M	D D	Y Y Y Y
04	10	2014

Transaction ID : A-CF33095

Amount of Each Receipt this Period

200

B. Full Name (Last, First, Middle Initial)
Dennis Eslick

Mailing Address 3819 Wynnewood Drive

City Cedar Falls State IA Zip Code 50613-1696

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

Name of Employer Eslick Financial Advisor Occupation Financial Advisor

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

M M	D D	Y Y Y Y
04	10	2014

Transaction ID : A-CF33044

Amount of Each Receipt this Period

250

C. Full Name (Last, First, Middle Initial)
T. Hunter Ewing

Mailing Address 4810 Jett Road

City Atlanta State GA Zip Code 30327-4514

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

Name of Employer NLEC Occupation Insurance Advisor

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

M M	D D	Y Y Y Y
04	07	2014

Transaction ID : A-CF33017

Amount of Each Receipt this Period

250

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

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

700.00

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

PAGE 8 OF 47

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
Marcia Flaherty

Mailing Address 4433 Smothers Road

City State Zip Code
Westerville OH 43081-9652

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside Radiology AssociatesOccupation
CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2014

Transaction ID : A-CF33105

Amount of Each Receipt this Period

500

B. Full Name (Last, First, Middle Initial)
Carrie L Fleisher

Mailing Address 525 NE 38th Court

City State Zip Code
Hillsboro OR 97124-6338

FEC ID number of contributing
federal political committee.

C

Name of Employer
M Financial GroupOccupation
VP: Chief Risk & Compliance Officer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2014

Transaction ID : A-CF33018

Amount of Each Receipt this Period

300

C. Full Name (Last, First, Middle Initial)
Campbell Gerrish

Mailing Address 2 Windcrest Road

City State Zip Code
Rye NY 10580-1626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Winged Keel GroupOccupation
Principal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2014

Transaction ID : A-CF33042

Amount of Each Receipt this Period

1000

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

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

1800.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Neal C Groff

Mailing Address 5299 Dtc Boulevard
Suite 1100

City	State	Zip Code
Greenwood Village	CO	80111-3332

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Madison Group IncOccupation
Owner/Chairman

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : A-CF33025

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

B. Gordon Hammond

Mailing Address 222 Merchant Street
Suite 208

City	State	Zip Code
Honolulu	HI	96813-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		04		2014

Transaction ID : A-CF33103

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

C. Douglas Heintzelman

Mailing Address 7280 Waterston

City	State	Zip Code
New Albany	OH	43054-7105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside Radiology Assoc.Occupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : A-CF33086

Amount of Each Receipt this Period

500

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

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

900.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

Gerard M Hempstead

A.

Mailing Address 49 W Walling Drive

City

Creve Coeur

State

MO

Zip Code

63141-7371

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern MutualOccupation
Managing Partner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2014

Transaction ID : A-CF33084

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

John Hinderer

B.

Mailing Address 1515 Hebron Road

City

Heath

State

OH

Zip Code

43056-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Auto Dealer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2014

Transaction ID : A-CF33052

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Terence Horan

C.

Mailing Address 10298 Gentlewind Drive

City

Montgomery

State

OH

Zip Code

45242-5813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horan AssociatesOccupation
Insurance Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2014

Transaction ID : A-CF33046

Amount of Each Receipt this Period










1500

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

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

2500.00

FOR LINE NUMBER:
(check only one)

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

NAME OF COMMITTEE (In Full)
Tiberi for Congress

FEC Schedule A (Form 3) (Revised 02/2009)

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 12 OF 47

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial) Peter Lafferty		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014	
Mailing Address 4181 Reynoldsburg New Albany Road		Transaction ID : A-CF33087	
City New Albany	State OH	Zip Code 43054-8393	Amount of Each Receipt this Period _____ 500
FEC ID number of contributing federal political committee. C _____			
Name of Employer Riverside Radiology	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500		

B. Full Name (Last, First, Middle Initial) Chau Lai		Date of Receipt M M / D D / Y Y Y Y 04 / 08 / 2014	
Mailing Address 2658 Del Mar Heights Road # 221		Transaction ID : A-CF33021	
City Del Mar	State CA	Zip Code 92014-3100	Amount of Each Receipt this Period _____ 500
FEC ID number of contributing federal political committee. C _____			
Name of Employer Guardian Life Ins Co	Occupation Financial Advisor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500		

C. Full Name (Last, First, Middle Initial) Sidney Levine		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2014	
Mailing Address 325 N Williamson Boulevard Suite 120		Transaction ID : A-CF33049	
City Daytona Beach	State FL	Zip Code 32114-8172	Amount of Each Receipt this Period _____ 250
FEC ID number of contributing federal political committee. C _____			
Name of Employer Sales	Occupation Insurance Sales		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250		

SUBTOTAL of Receipts This Page (optional).....	_____ 1250.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

P Gerry Maurer

Mailing Address 601 Union Street

Suite 2500

City

Seattle

State

WA

Zip Code

98101-4074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Wealth Mgmt Advisor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : A-CF33027

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Michael E Nolan

Mailing Address 6720B Rockledge Drive

Suite 140

City

Bethesda

State

MD

Zip Code

20817-1884

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nolan Financial Group

Occupation

financial services

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		03		2014

Transaction ID : A-CF33014

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

John Olsen

Mailing Address 4645 Stonehaven Drive

City

Columbus

State

OH

Zip Code

43220-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio State University

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : A-CF33106

Amount of Each Receipt this Period

300

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

1550.00

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

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

Richard A. Oxender

A.

Mailing Address 1150 Clubview Boulevard N

City

Columbus

State

OH

Zip Code

43235-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oxender and Associates

Occupation

Gov't Relations

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2014

Transaction ID : A-CF33053

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Donald W Peters

B.

Mailing Address 40 Massey Drive

City

Westerville

State

OH

Zip Code

43081-1941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2014

Transaction ID : A-CF33040

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

Phillip Pickett

C.

Mailing Address 517 Boulder Lake Way

City

Vestavia

State

AL

Zip Code

35242-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwestern Mutual

Occupation

Insurance Sales

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2014

Transaction ID : A-CF33024

Amount of Each Receipt this Period

500

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 Page

FOR LINE NUMBER:

PAGE 15 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial) W. Luther Pierce			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		10		2014
M M	/	D D	/	Y Y Y Y										
04		10		2014										
Mailing Address 2313 Danbury Road			Transaction ID : A-CF33045											
City Greensboro	State NC	Zip Code 27408-5123	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250</td> </tr> </table>							250				
					250									
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Plybon & Associates												
Occupation Sales		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>250</td> </tr> </table>								250				
					250									
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)														
B. Full Name (Last, First, Middle Initial) David Pohl			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		10		2014
M M	/	D D	/	Y Y Y Y										
04		10		2014										
Mailing Address 82 Vertie Lane			Transaction ID : A-CF33094											
City Versailles	State OH	Zip Code 45380-9606	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>							500				
					500									
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Pohl Transportation, Inc												
Occupation President		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>								500				
					500									
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)														
C. Full Name (Last, First, Middle Initial) Douglas Reader			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		16		2014
M M	/	D D	/	Y Y Y Y										
04		16		2014										
Mailing Address 8263 Clouse Road			Transaction ID : A-CF33104											
City New Albany	State OH	Zip Code 43054-8724	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>							500				
					500									
FEC ID number of contributing federal political committee. <div>C</div>		Name of Employer Riverside Radiology Assoc.												
Occupation Physician		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>								500				
					500									
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5"></td> <td>1250.00</td> </tr> </table>							1250.00				
					1250.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Douglas Sibila

Mailing Address 2928 Croydon Drive NW

City

Canton

State

OH

Zip Code

44718-3302

FEC ID number of contributing federal political committee.

C

Name of Employer
People Services IncOccupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2014

Transaction ID : A-CF33093

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

B. Michael Silverberg

Mailing Address 358 Cosey Beach Avenue

City

East Haven

State

CT

Zip Code

06512-4616

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Life Insurance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2014

Transaction ID : A-CF33041

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

C. Frank Spencer

Mailing Address 3329 North Street

City

Granville

State

OH

Zip Code

43023-9746

FEC ID number of contributing federal political committee.

C

Name of Employer
NationwideOccupation
Sales Executive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		04		2014

Transaction ID : A-CF33102

Amount of Each Receipt this Period

250

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

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

700.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial) Robert Swartzbaugh		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 1015 N 98th Street Suite 221		Transaction ID : A-CF33047
City Omaha	State NE	Zip Code 68114-2362
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Swartzbaugh- Farber	Occupation President & CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	

Full Name (Last, First, Middle Initial) Gerard J Tavella Jr.		Date of Receipt M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 66 Smedley Road		Transaction ID : A-CF33020
City Fairfield	State CT	Zip Code 06824-5249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Prosperian Wealth	Occupation Financial Adviser	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Gray Teekell		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 401 Edwards Street Suite 1130		Transaction ID : A-CF33043
City Shreveport	State LA	Zip Code 71101-5561
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer The Teekell Co. Inc	Occupation Life Insurance	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

Rick Thomas

Mailing Address 5550 W Executive Drive
Suite 500

City	State	Zip Code
Tampa	FL	33609-1030

FEC ID number of contributing federal political committee.

C

Name of Employer
Thomas Financial

Occupation
CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : A-CF33113

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Donald Tippet

Mailing Address 3200 Bristol Street
Suite 600

City	State	Zip Code
Costa Mesa	CA	92626-1810

FEC ID number of contributing federal political committee.

C

Name of Employer
Tippett Moorhead

Occupation
Managing Partner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : A-CF33111

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Michael M. Van Buskirk

Mailing Address 1600 W Lane Avenue
Unit 325

City	State	Zip Code
Columbus	OH	43221-2588

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		12		2014

Transaction ID : A-CF33051

Amount of Each Receipt this Period

1200

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

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

3200.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

Kuldeep Vaswani

A.

Mailing Address 10211 Windsor Way

City

Powell

State

OH

Zip Code

43065-8759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside RadiologyOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2014

Transaction ID : A-CF33088

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Michael Weinberg

B.

Mailing Address 4 Milestone Road

City

Rye Brook

State

NY

Zip Code

10573-1081

FEC ID number of contributing
federal political committee.

C

Name of Employer
GuardianOccupation
Fiancial Advisor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : A-CF33029

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

David Zadvinskis

C.

Mailing Address 7155 Deacon Court

City

Dublin

State

OH

Zip Code

43017-7078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside RadiologyOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : A-CF33107

Amount of Each Receipt this Period

300

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

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

1600.00

22150.00

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 20 OF 47

☐ 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. American College of Radiology Association PAC

Mailing Address 1891 Preston White Drive

City State Zip Code
Reston VA 20191-4326

FEC ID number of contributing
federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

9000

Date of Receipt

M M / D D / Y Y Y Y
04 16 2014

Transaction ID : A-CF33108

Amount of Each Receipt this Period

4000

Full Name (Last, First, Middle Initial)

B. Bloomin Brands Inc. PAC

Mailing Address 2202 N West Shore Boulevard

City State Zip Code
Tampa FL 33607-5747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
04 14 2014

Transaction ID : A-CF33055

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. Carpenters' Legislative Improvement Committee

Mailing Address 101 Constitution Avenue NW
Floor 10

City State Zip Code
Washington DC 20001-2153

FEC ID number of contributing
federal political committee.

C C00001016

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000

Date of Receipt

M M / D D / Y Y Y Y
04 01 2014

Transaction ID : A-CF33034

Amount of Each Receipt this Period

5000

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

10000.00

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 Page

FOR LINE NUMBER:

PAGE 21 OF 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
Chickasaw Nation

Mailing Address 520 Arlington Street

City State Zip Code
Ada OK 74820-2204

FEC ID number of contributing federal political committee. **C** C90007923

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : A-CF33118

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Employees Of Northrop Grumman Corporation PAC

Mailing Address 2980 Fairview Park Drive

City State Zip Code
Falls Church VA 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		14		2014

Transaction ID : A-CF33116

Amount of Each Receipt this Period

2500

C. Full Name (Last, First, Middle Initial)
Guardian Life Insurance Company PAC

Mailing Address 7 Hanover Square
C

City State Zip Code
New York NY 10004-2616

FEC ID number of contributing federal political committee. **C** C00173393

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		04		2014

Transaction ID : A-CF33101

Amount of Each Receipt this Period

1000

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

4500.00

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 22 OF 47

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
KeyCorp Advocates Fund PAC

Mailing Address 127 Public Square

City	State	Zip Code
Cleveland	OH	44114-1217

FEC ID number of contributing federal political committee.

C C00073155

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2014

Transaction ID : A-CF33096

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Metropolitan Life Insurance Co. PAC

Mailing Address 1620 L Street NW
Suite 800

City	State	Zip Code
Washington	DC	20036-5629

FEC ID number of contributing federal political committee.

C C00040923

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : A-CF33037

Amount of Each Receipt this Period

2500

C. Full Name (Last, First, Middle Initial)
National Association of Insurance & Financial Advisors PAC

Mailing Address 2901 Telestar Court

City	State	Zip Code
Falls Church	VA	22042-1260

FEC ID number of contributing federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2014

Transaction ID : A-CF33098

Amount of Each Receipt this Period

1000

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

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

6000.00

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

PAGE 23 OF 47

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial) NiSource Inc. PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		08		2014
M M	/	D D	/	Y Y Y Y									
04		08		2014									
Mailing Address 200 Civic Center Drive		Transaction ID : A-CF33090											
City Columbus	State OH	Zip Code 43215-4138	Amount of Each Receipt this Period <table border="1"> <tr> <td>700</td> </tr> </table>	700									
700													
FEC ID number of contributing federal political committee. C C00051979													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5700</td> </tr> </table>		5700										
5700													
B. Full Name (Last, First, Middle Initial) NiSource Inc. PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		08		2014
M M	/	D D	/	Y Y Y Y									
04		08		2014									
Mailing Address 200 Civic Center Drive		Transaction ID : A-CF33091											
City Columbus	State OH	Zip Code 43215-4138	Amount of Each Receipt this Period <table border="1"> <tr> <td>1800</td> </tr> </table>	1800									
1800													
FEC ID number of contributing federal political committee. C C00051979													
Name of Employer	Occupation												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5700</td> </tr> </table>		5700										
5700													
C. Full Name (Last, First, Middle Initial) PNC Bank PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>12</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		12		2014
M M	/	D D	/	Y Y Y Y									
04		12		2014									
Mailing Address 249 5th Avenue Floor 21		Transaction ID : A-CF33050											
City Pittsburgh	State PA	Zip Code 15222-2707	Amount of Each Receipt this Period <table border="1"> <tr> <td>1000</td> </tr> </table>	1000									
1000													
FEC ID number of contributing federal political committee. C C00186064													
Name of Employer	Occupation												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>3500</td> </tr> </table>		3500										
3500													
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td>3500.00</td> </tr> </table>		3500.00									
3500.00													
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td></td> </tr> </table>											

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

A. Full Name (Last, First, Middle Initial)
Principal Life Insurance Company PAC

Mailing Address 711 High Street

City	State	Zip Code
Des Moines	IA	50392-0001

FEC ID number of contributing federal political committee.

C C00128918

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : A-CF33097

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
RetailPAC

Mailing Address 325 7th Street NW
Suite 1100

City	State	Zip Code
Washington	DC	20004-2825

FEC ID number of contributing federal political committee.

C C00040329

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : A-CF33036

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Tuesday Group PAC

Mailing Address 209 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1107

FEC ID number of contributing federal political committee.

C C00433060

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : A-CF33119

Amount of Each Receipt this Period

2500

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

4500.00

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

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

PAGE 25 OF 47

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial) Viacom PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1501 M Street NW Suite 1100		Transaction ID : A-CF33099
City Washington	State DC	
Zip Code 20005-1729		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00167759	Name of Employer Occupation 	3500
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 	

Full Name (Last, First, Middle Initial) Vorys Sater Seymour and Pease Fed PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 52 E Gay Street		Transaction ID : A-CF33054
City Columbus	State OH	
Zip Code 43215-3108		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C C00220764	Name of Employer Occupation 	5000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 	

Full Name (Last, First, Middle Initial) Walt Disney Company PAC		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 425 3rd Street SW Suite 1100		Transaction ID : A-CF33038
City Washington	State DC	
Zip Code 20024-3227		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00197749	Name of Employer Occupation 	2500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	33000.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 47

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Ohio Bureau of Worker's Compensation

Mailing Address 30 W Spring Street

City	State	Zip Code
Columbus	OH	43215-2216

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

147.88

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2014

Transaction ID : A-MF33033

Amount of Each Receipt this Period

14.28

Refund of Premium Overpayment

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

14.28

14.28

**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 27 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. A&S Italian Food Store

Mailing Address 1107 Valley Road

City	State	Zip Code
Stirling	NJ	07980-1546

Purpose of Disbursement
Catering for Fundraiser

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

3444

Transaction ID : B-E-33079

B. American Council of Life Insurers

Mailing Address 101 Constitution Avenue NW

City	State	Zip Code
Washington	DC	20001-2133

Purpose of Disbursement
Room Rental Fee and Staff Time

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

675

Transaction ID : B-E-33064

C. Aqua Falls Bottled Water

Mailing Address PO Box 98

City	State	Zip Code
Enon	OH	45323-0098

Purpose of Disbursement
Bottled Water Service

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

14.2

Transaction ID : B-E-33073

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

4133.20

**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 29 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2014

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Credit Card Processing Fee

003

Amount of Each Disbursement this Period

85

Transaction ID : B-E-33056

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address Bill Payment Center

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2014

City	State	Zip Code
Saginaw	MI	48663-0001

Purpose of Disbursement
Phone and Internet Service

001

Amount of Each Disbursement this Period

275.81

Transaction ID : B-E-33069

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Baker and Hostetler LLP

Mailing Address PO Box 37515

Date of Disbursement

M M	D D	Y Y Y Y
04	02	2014

City	State	Zip Code
Washington	DC	20013-7515

Purpose of Disbursement
Legal Fees

001

Amount of Each Disbursement this Period

487.5

Transaction ID : B-E-33065

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

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

848.31

**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 30 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Bogart Associates Inc.

Mailing Address 1200 Trinity Drive

City	State	Zip Code
Alexandria	VA	22314-4724

Purpose of Disbursement
Shipping Reimbursement

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

107.6

Transaction ID : B-E-33076

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Fed Ex/ Kinkos

Mailing Address PO Box 1140

City	State	Zip Code
Memphis	TN	38101-1140

Purpose of Disbursement
Shipping

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

107.6

Transaction ID : B-S-2667

[MEMO ITEM]

Subitemization of Bogart Associates Inc.(04/14/14)

c. Capitol Contender

Mailing Address 274 S 3rd Street

City	State	Zip Code
Columbus	OH	43215-5112

Purpose of Disbursement
Fundraising Software

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

150

Transaction ID : B-E-33077

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

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

257.60

**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 31 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Food and Drink

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

84.81

Transaction ID : B-E-33070

B. ERoots Consulting

Mailing Address 274 S 3rd Street

City	State	Zip Code
Columbus	OH	43215-5112

Purpose of Disbursement
IT Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

96.75

Transaction ID : B-E-33078

C. Federal City Caterers

Mailing Address 1119 12th Street NW

City	State	Zip Code
Washington	DC	20005-4632

Purpose of Disbursement
Catering for Fundraiser

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

2102.5

Transaction ID : B-E-33081

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

2284.06

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 32 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

219.69

Transaction ID : B-E-33057

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Tony's

Mailing Address 16 W Beck Street

City	State	Zip Code
Columbus	OH	43215-5609

Purpose of Disbursement
Food and Drink

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

37.81

Transaction ID : B-S-2637

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

c. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

7780.66

Transaction ID : B-E-33058

Original vendors exceeding reporting threshold itemized as memo transactions.

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

8000.35

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

PAGE 33 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 153 Kearny Street

City	State	Zip Code
San Francisco	CA	94108-4817

Purpose of Disbursement
Online Data Storage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

9.99

Transaction ID : B-S-2638

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

B. Rackspace

Mailing Address 1 Fanatical Place

City	State	Zip Code
San Antonio	TX	78218-2179

Purpose of Disbursement
Email Hosting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

84

Transaction ID : B-S-2639

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

C. SunocoMailing Address 1735 Market Street
Suite LL

City	State	Zip Code
Philadelphia	PA	19103-7528

Purpose of Disbursement
Gas

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

53.09

Transaction ID : B-S-2641

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

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

0.00

--

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

PAGE 34 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Donatos

Mailing Address 935 Taylor Station Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Columbus	OH	43230-6657

Amount of Each Disbursement this Period

102.99

Purpose of Disbursement
Food for Volunteers

001

Transaction ID : B-S-2645

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

Full Name (Last, First, Middle Initial)

B. The Ohio State UniversityMailing Address 555 Borror Drive
Room 1010

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Columbus	OH	43210-1187

Amount of Each Disbursement this Period

3025

Purpose of Disbursement
Football Tickets

001

Transaction ID : B-S-2646

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

Full Name (Last, First, Middle Initial)

c. The UPS Store

Mailing Address 2783 Martin Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Dublin	OH	43017-2096

Amount of Each Disbursement this Period

48.88

Purpose of Disbursement
Shipping

001

Transaction ID : B-S-2647

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

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

0.00

--

**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 35 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address PO Box 9020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

226.76

Transaction ID : B-S-2648

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

B. United States Postal Service

Mailing Address 770 Twin Rivers Drive

City	State	Zip Code
Columbus	OH	43215-1127

Purpose of Disbursement
Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

3676.85

Transaction ID : B-S-2651

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

c. Staples

Mailing Address PO Box 9020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

130.85

Transaction ID : B-S-2652

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

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

0.00

--

**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 36 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Donatos

Mailing Address 935 Taylor Station Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Columbus	OH	43230-6657

Amount of Each Disbursement this Period

121.12

Purpose of Disbursement
Food for Meeting

001

Transaction ID : B-S-2653

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address PO Box 9020

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Des Moines	IA	50368-9020

Amount of Each Disbursement this Period

96.45

Purpose of Disbursement
Office Supplies

001

Transaction ID : B-S-2654

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

Full Name (Last, First, Middle Initial)

c. Staples

Mailing Address PO Box 9020

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Des Moines	IA	50368-9020

Amount of Each Disbursement this Period

-111.76

Purpose of Disbursement
Credit Voucher

001

Transaction ID : B-S-2655

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

State:

District:

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

0.00

--

**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 37 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

189

Transaction ID : B-E-33059

B. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

894.22

Transaction ID : B-E-33061

Original vendors exceeding reporting threshold itemized as memo transactions.

C. Dell Computers

Mailing Address 1 Dell Way

City	State	Zip Code
Round Rock	TX	78682-7000

Purpose of Disbursement
Computer

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

872.73

Transaction ID : B-S-2661

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

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

1083.22

**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 38 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address PO Box 9020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

21.49

Transaction ID : B-S-2662

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

B. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

3117.24

Transaction ID : B-E-33062

Original vendors exceeding reporting threshold itemized as memo transactions.

C. Duke and Duchess

Mailing Address 447 James Parkway

City	State	Zip Code
Heath	OH	43056-6099

Purpose of Disbursement
Gas

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

56.73

Transaction ID : B-S-2663

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

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

3117.24

**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 39 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Campaign Management Software

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

575

Transaction ID : B-S-2664

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

B. Monte Carlo Italian Kitchen

Mailing Address 610 W Schrock Road

City	State	Zip Code
Westerville	OH	43081-8996

Purpose of Disbursement
Food and Drink

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

35.51

Transaction ID : B-S-2665

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

C. United States Postal Service

Mailing Address 770 Twin Rivers Drive

City	State	Zip Code
Columbus	OH	43215-1127

Purpose of Disbursement
Postage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

2450

Transaction ID : B-S-2666

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/02/14)

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

0.00

**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 40 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Insight Bank Visa

Mailing Address PO Box 30131

City	State	Zip Code
Tampa	FL	33630-3131

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

6085.34

Transaction ID : B-E-33060

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Bobby Vans Grille

Mailing Address 1201 New York Avenue NW

City	State	Zip Code
Washington	DC	20005-6191

Purpose of Disbursement
Catering for Fundraiser

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

2525.58

Transaction ID : B-S-2656

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/15/14)

c. Alexandria Pastry Shop

Mailing Address 3690 King Street

City	State	Zip Code
Alexandria	VA	22302-1921

Purpose of Disbursement
Catering for Fundraiser

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

480.93

Transaction ID : B-S-2657

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/15/14)

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

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

6085.34

**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 41 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Unwined

Mailing Address 3690J King Street

City	State	Zip Code
Alexandria	VA	22302-1921

Purpose of Disbursement
Catering for Fundraiser

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

930.85

Transaction ID : B-S-2658

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/15/14)

B. Acqua AI 2 DC

Mailing Address 212 7th Street SE

City	State	Zip Code
Washington	DC	20003-4311

Purpose of Disbursement
Catering for Fundraiser

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

1840

Transaction ID : B-S-2659

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/15/14)

c. Summer Beach Resort

Mailing Address 5456 First Coast Highway

City	State	Zip Code
Amelia Island	FL	32034-1802

Purpose of Disbursement
Lodging for Conference

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

496.98

Transaction ID : B-S-2660

[MEMO ITEM]

Subitemization of Insight Bank Visa(04/15/14)

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

0.00

--

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 42 OF 47

☒ 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)
Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. MILVETS

Mailing Address PO Box 311

Date of Disbursement

M M / D D / Y Y Y Y
04 / 14 / 2014

City State Zip Code
Worthington OH 43085-0311

Amount of Each Disbursement this Period

350

Purpose of Disbursement
Tickets for Event

001

Transaction ID : B-E-33074

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. New Century Solutions

Mailing Address 5466 Cedarbush Road

Date of Disbursement

M M / D D / Y Y Y Y
04 / 04 / 2014

City State Zip Code
Columbus OH 43229-3806

Amount of Each Disbursement this Period

4000

Purpose of Disbursement
Fundraising Consulting

003

Transaction ID : B-E-33066

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. New Century Solutions

Mailing Address 5466 Cedarbush Road

Date of Disbursement

M M / D D / Y Y Y Y
04 / 14 / 2014

City State Zip Code
Columbus OH 43229-3806

Amount of Each Disbursement this Period

5000

Purpose of Disbursement
Fundraising Consulting

003

Transaction ID : B-E-33068

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

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

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

9350.00

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

PAGE 43 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. PIP PrintingMailing Address 3560 Millikin Court
Suite A

City Columbus State OH Zip Code 43228-9765

Purpose of Disbursement
Envelope Printing

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

397.6

Transaction ID : B-E-33075

B. PIP PrintingMailing Address 3560 Millikin Court
Suite A

City Columbus State OH Zip Code 43228-9765

Purpose of Disbursement
Printing

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

29.82

Transaction ID : B-E-33085

c. Reno's Floral & Fine Gifts

Mailing Address 588 W Schrock Road

City Westerville State OH Zip Code 43081-8996

Purpose of Disbursement
Floral Arrangements

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

52.68

Transaction ID : B-E-33071

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

480.10

**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 44 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Richland County Republican Party

Mailing Address PO Box 1770

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

City	State	Zip Code
Mansfield	OH	44901-1770

Amount of Each Disbursement this Period

8

Purpose of Disbursement
Luncheon ticket

001

Transaction ID : B-E-33023

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Ricoh USA, Inc.

Mailing Address PO Box 740541

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

City	State	Zip Code
Atlanta	GA	30374-0541

Amount of Each Disbursement this Period

304.63

Purpose of Disbursement
Copier Lease Payment

001

Transaction ID : B-E-33072

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Kelli Briggs

Mailing Address 1044B N Daniel Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

City	State	Zip Code
Arlington	VA	22201-2838

Amount of Each Disbursement this Period

300

Purpose of Disbursement
General Political Consulting

001

Transaction ID : B-E-33067

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

612.63

**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 45 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Danielle Vandegriff

Mailing Address 248 E 3rd Avenue

City	State	Zip Code
Columbus	OH	43201-3665

Purpose of Disbursement
Mileage Reimbursement

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

166.25

Transaction ID : B-E-33063

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

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
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

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
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

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

166.25

36685.80

**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 46 OF 47

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. French for JusticeMailing Address 21 W Broad Street
Suite 700

City Columbus State OH Zip Code 43215-4127

Purpose of Disbursement
Contribution for General Election

011

Category/
Type

Candidate Name

French for Justice

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

6700

Transaction ID : B-E-33109

B. Friends of Lewis

Mailing Address 9726 Lake Of The Woods Drive

City Galena State OH Zip Code 43021-9622

Purpose of Disbursement
In-kind Contribution for Postage for Fundraising Invitations

011

Category/
Type

Candidate Name

Barbara Lewis

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

1960

Transaction ID : B-I-33030

[MEMO ITEM]

Inkind Donation Made

c. Friends of Lewis

Mailing Address 9726 Lake Of The Woods Drive

City Galena State OH Zip Code 43021-9622

Purpose of Disbursement
In-kind Contribution for Labels for Fundraising Invitations

011

Category/
Type

Candidate Name

Friends of Lewis

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

57.98

Transaction ID : B-I-33082

[MEMO ITEM]

Inkind Donation Made

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

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

6700.00

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 47 OF 47

☐ 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)

Tiberi for Congress

Full Name (Last, First, Middle Initial)

A. Friends of Lewis

Mailing Address 9726 Lake Of The Woods Drive

City Galena State OH Zip Code 43021-9622

Purpose of Disbursement
In-kind Contribution for Copies of Fundraising Invitations

Candidate Name

Friends of Lewis

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

259.2

Transaction ID : B-I-33083

[MEMO ITEM]

Inkind Donation Made

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:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

0.00

6700.00