

# 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

Leibham for Congress

ADDRESS (number and street)

PO Box 941

Check if different than previously reported. (ACC)

Sheboygan

WI

53082-0941

2. FEC IDENTIFICATION NUMBER ▼

C C00562496

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

WI

06

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  /  /  in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Ken Leibham

Signature of Treasurer Ken Leibham

[Electronically Filed]

Date

/  /

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Leibham for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	89197.32	458448.84
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	89197.32	458448.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	233039.62	440927.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	233039.62	440927.41
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27521.43	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	14130.86	

**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)

Write or Type Committee Name

**Leibham for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42697.32	378797.80
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	42697.32	378797.80
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	46500.00	76499.00
(d) The Candidate.....	0.00	3152.04
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	89197.32	458448.84
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	89197.32	468448.84

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	233039.62	440927.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	233039.62	440927.41

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	171363.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	89197.32
25. SUBTOTAL (add Line 23 and Line 24).....	260561.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	233039.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	27521.43

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Amended report discloses a previously overlooked outstanding debt to Larry's Market for \$819.78.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Kenyon**

Mailing Address **PO Box 205**

City **Oakfield** State **WI** Zip Code **53065-0205**

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 **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AAA24DE249DE3438A993**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ann Schneider**

Mailing Address **3711 Limestone Ct.**

City **Sheboygan** State **WI** Zip Code **53083-2666**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A1DD460F67AF547AD961**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Marjorie Klunck**

Mailing Address **3011 N 27th Street**

City **Sheboygan** State **WI** Zip Code **53083-2756**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : AEAFCB7DA180E4CB6B71**

Amount of Each Receipt this Period  
**25.00**

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

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

**100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Warren Heckmann**

Mailing Address 13207 Pioneer Rd.

City State Zip Code  
Newton WI 53063-9726

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
38.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A318BE27717A0452DBBA**

Amount of Each Receipt this Period  
38.00

**B.** Full Name (Last, First, Middle Initial)  
**Korry Ardell**

Mailing Address W4032 HWY 32

City State Zip Code  
Elkhart Lake WI 53020-1745

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A6865E9DC39E447F6A0A**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Verla Peichl**

Mailing Address N6844 Rangeline Rd.

City State Zip Code  
Sheboygan WI 53083-2373

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

Name of Employer Information Requested Occupation Information Requested  
Wisconsin Newspress/Peichl Farms Press Correspondent/Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AF2D91CE33ECB46C8B68**

Amount of Each Receipt this Period  
250.00

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

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

313.00

**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 8 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Onnink**

Mailing Address 836 Wisconsin Ave.

City Oostburg State WI Zip Code 53070-1224

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

Name of Employer Self Occupation Landscape Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A7FC3A6B1032A4FC6908**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**William McCoshen**

Mailing Address 2980 Cassidy Ct.

City Fitchburg State WI Zip Code 53711-5847

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

Name of Employer Capitol Consultants Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A1D0CB9F4DDBE4C7AA65**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Rosalie Homan**

Mailing Address 736 Tulip Lane

City Waupun State WI Zip Code 53963-1033

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **180.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A6D9C39403EC44AD7AFA**

Amount of Each Receipt this Period  
**180.00**

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

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

**1280.00**



**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 9 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Cagle**

Mailing Address 14 Selma St.

City Plymouth State WI Zip Code 53073-2414

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A94A0F83E129A4373949**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**William Carpenter**

Mailing Address 8775 Fox Ln

City Omro State WI Zip Code 54963-9755

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : AF1C45D7C38CE4E2CBB5**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joyce Haile**

Mailing Address 3712 Briarwood

City Manitowoc State WI Zip Code 54220-1642

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AC0F692DE059F423C973**

Amount of Each Receipt this Period  
**25.00**

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

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

**75.00**

**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 10 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roman Draba**

Mailing Address S59 W22597 Glengarry Rd.

City Waukesha State WI Zip Code 53189-9676

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  
1575.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AC386A75F34734D72852**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**William Herman**

Mailing Address PO Box 124

City Two Rivers State WI Zip Code 54241-0124

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
65.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A25DFDD15282C4610BDB**

Amount of Each Receipt this Period  
15.00

**C.** Full Name (Last, First, Middle Initial)  
**John Casper**

Mailing Address 2785 Leila Mae Lane

City Oshkosh State WI Zip Code 54904-8484

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : AEC40ED8074614F04982**

Amount of Each Receipt this Period  
50.00

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 11 OF 142  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lorraine Hermann**

Mailing Address 6 Willowood Dr.

City Sheboygan State WI Zip Code 53081-7873

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **45.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : AEC4351C876524B879DF**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Kramer**

Mailing Address 2725 Whispering Winds Drive

City Sheboygan State WI Zip Code 53081-9005

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 25 / 2014**

**Transaction ID : A2660AB6EFEA6471CBDA**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lori Feyen**

Mailing Address 962 Churchill Lane

City Fond Du Lac State WI Zip Code 54935-6396

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : AFCC4E84B7A1C4240898**

Amount of Each Receipt this Period  
**100.00**

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

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

**220.00**

**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 12 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Wagner**

Mailing Address 1016 Norstad Road

City State Zip Code  
Manitowoc WI 54220-9769

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : AAD524A91A3784AD784C**

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
**Sandra Wusterbarth**

Mailing Address 814 2nd St.

City State Zip Code  
Kiel WI 53042-1126

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
190.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AE64B09ECE9924CB8BCA**

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
**Cynthia Faller**

Mailing Address 860 Eagles Way

City State Zip Code  
Plymouth WI 53073-2465

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A4A4EBE1196C64D45876**

Amount of Each Receipt this Period  
15.00

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

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

65.00

**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 13 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Wirtz**

Mailing Address 47 Winnebago Pl.

City Sheboygan State WI Zip Code 53081-7025

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : AE15B9BDD225243C498E**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gerry Bangen**

Mailing Address 2546 Cross Creek Dr.  
Apt B

City Sheboygan State WI Zip Code 53081-7469

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **60.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 12 / 2014**

**Transaction ID : A84F131A855DD48E0BB3**

Amount of Each Receipt this Period  
**30.00**

**C.** Full Name (Last, First, Middle Initial)  
**Cora Wilfinger**

Mailing Address 1720 Horseshoe Dr.

City Manitowoc State WI Zip Code 54220-1400

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 03 / 2014**

**Transaction ID : AC6E27563EFB748CBA77**

Amount of Each Receipt this Period  
**25.00**

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

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

**80.00**

**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 14 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elisabeth Grabenhofer**

Mailing Address 1797 Cypress Drive

City State Zip Code  
Grafton WI 53024-2112

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : A6DC36B0BB1954FD991C**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5.00

\_\_\_\_\_ 5.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Botana**

Mailing Address 132 Gebhart Ave

City State Zip Code  
Kiel WI 53042-1460

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AB54FCDA4C0D4F2EBBD**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

\_\_\_\_\_ 25.00

**C.** Full Name (Last, First, Middle Initial)  
**Gail Terry**

Mailing Address 1720 Kellner St.

City State Zip Code  
Manitowoc WI 54220-1543

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

Name of Employer Information Requested Occupation Information Requested  
Holy Family Memorial Hospital Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A32D29A39A71549E8AF3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

\_\_\_\_\_ 50.00

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

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

\_\_\_\_\_ 80.00

\_\_\_\_\_

**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 15 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Langan**

Mailing Address 1223 Riverview Dr.

City Sheboygan	State WI	Zip Code 53083-3002
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FEC ID number of contributing federal political committee. **C**

Name of Employer BMO Harris Bank	Occupation Banker
-------------------------------------	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A53B522BC002C422EAAA**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Sue Garski**

Mailing Address 3621 Bonnie Ct.

City Sheboygan	State WI	Zip Code 53083-3554
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A1A3134311AAF4430880**

Amount of Each Receipt this Period  
15.00

**C.** Full Name (Last, First, Middle Initial)  
**Catherine Weatherford**

Mailing Address 3625 10th Street N  
Unit 505

City Arlington	State VA	Zip Code 22201-4459
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FEC ID number of contributing federal political committee. **C**

Name of Employer Insured Retirement Institute	Occupation President & CEO
--	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A277210EB328241D68ED**

Amount of Each Receipt this Period  
250.00

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

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

365.00

**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 16 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Riemersma**

Mailing Address 3234 E West Meadow Court

City Sheboygan State WI Zip Code 53081

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **85.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AB84357D8CC7748EDB6F**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Beaudry**

Mailing Address 5212 Playbird Rd.

City Sheboygan State WI Zip Code 53083-1973

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A6BD2B10BC8CA4E33BC6**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**Wilfred Basler**

Mailing Address 304 Beechwood Street

City Cleveland State WI Zip Code 53015-1408

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A67B57DB7A2614AF4F4**

Amount of Each Receipt this Period  
**25.00**

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

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

**210.00**



**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 142  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Cagle**

Mailing Address 14 Selma St.

City State Zip Code  
Plymouth WI 53073-2414

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 09 2014

**Transaction ID : AFA1A6611CAD940F0BF2**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Gale Klappa**

Mailing Address 1522 N Prospect Ave.  
#1102

City State Zip Code  
Milwaukee WI 53202-6522

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

Name of Employer Occupation Information Requested  
Wisconsin Energy Corporation Chairman & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 07 2014

**Transaction ID : A35AA0620019945F2AD8**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine Kowalewski**

Mailing Address N4448 State Rd. 32

City State Zip Code  
Sheboygan Falls WI 53085-2709

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 07 2014

**Transaction ID : ACB06D66B3C9C4AB7B1E**

Amount of Each Receipt this Period  
15.00

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

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

540.00

**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 18 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pao Xiong**

Mailing Address 1447 S 14th St.

City Sheboygan State WI Zip Code 53081-5253

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : AEA4DEBDDA8F6415991E**

Amount of Each Receipt this Period  
 40.00

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Curry**

Mailing Address 2113 Monroe St.

City New Holstein State WI Zip Code 53061-1103

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

Name of Employer Information Requested Occupation Information Requested  
 New Holstein School District Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A6393026E4F5D4F73815**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Stan Johnson**

Mailing Address 1750 Countryside Ct.

City Cato State WI Zip Code 54230-8445

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A6D775631EAAE40E78CB**

Amount of Each Receipt this Period  
 100.00

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

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

390.00

**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 19 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Jeanne Censky**

Mailing Address 1526 S 18th St.

City Manitowoc	State WI	Zip Code 54220
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A24D9DCC4933A46EABDF**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Tim Petzold**

Mailing Address N7568 Royal and Ancient Dr.

City Elkhart Lake	State WI	Zip Code 53020-1958
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
110.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A93A629FAED8F4E6C9BB**

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
**Verlyn Thomack**

Mailing Address 625 Ashland Ave.

City Sheboygan	State WI	Zip Code 53081-6053
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
125.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : A63F54039F88344B893E**

Amount of Each Receipt this Period  
25.00

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

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

160.00

**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 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sydney Klaetsch**

Mailing Address 1107 Duke Estates

City Kiel State WI Zip Code 53042-9522

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AB6057AD328814BD589E**

Amount of Each Receipt this Period  
 10.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Roehl**

Mailing Address 8315 Trout Dr.

City Marshfield State WI Zip Code 54449-9101

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

Name of Employer Information Requested  
Roehl Transport  
Occupation Information Requested  
Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : ADA9E090F5D0A4C9E9D5**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Chris LaRowe**

Mailing Address 502 Aztalan Drive

City Madison State WI Zip Code 53718-3205

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

Name of Employer Information Requested  
Wisconsin Public Service Corporation  
Occupation Information Requested  
Director-Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AA5270DACAC434738AC7**

Amount of Each Receipt this Period  
 100.00

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

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

610.00

**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 21 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>David Blong Lee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2014
Mailing Address 4925 Stonefield Rd.		<b>Transaction ID : A3C18E91C6FC0425EBB1</b>
City Sheboygan	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer David Blong Lee DDS	Occupation Dentist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) <b>Tom Wiese</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2014
Mailing Address PO Box 41		<b>Transaction ID : A6946984B2BDD4949A9E</b>
City Elkhart Lake	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) <b>Rodney Kreunen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 305 Yosemite Trl.		<b>Transaction ID : A6C4FDA6507534699A4B</b>
City Madison	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> 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: (check only one)	PAGE 22 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Stellpflug**

Mailing Address N2798 Honeymoon Hill Rd.

City New Holstein	State WI	Zip Code 53061-9727
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AE5AD936940FE4C0DB42**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Betty Thompson**

Mailing Address 620 Wilson Ave

City Sheboygan	State WI	Zip Code 53081-6904
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AA9E6564618984CD6AE2**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Mike Crowley, Jr.**

Mailing Address 9731 North Lamplighter Ln.  
32 W

City Mequon	State WI	Zip Code 53092-5322
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Retired	Occupation Information Requested Retired
---	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : A8DD41B47F1B94452BD8**

Amount of Each Receipt this Period  
500.00

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

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

625.00

**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 23 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Carbin**

Mailing Address 3630 Kennedy Circle

City Sheboygan State WI Zip Code 53083-2651

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **70.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A949C25E2CDFE4186B34**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jerome Kellner**

Mailing Address 1527 Nutmeg Ct.

City Sheboygan State WI Zip Code 53081-1508

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AF42FEA7E214E4B6890C**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Madson**

Mailing Address 4442 White Oak Lane

City Sheboygan State WI Zip Code 53083-2179

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : AA613103D217840F8BD4**

Amount of Each Receipt this Period  
**25.00**

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

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

**85.00**

**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 24 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lorna Bussie**

Mailing Address 4208 Clover Street

City Two Rivers State WI Zip Code 54241-1244

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AF2AFA4FBBC5B416F950**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ber Lee**

Mailing Address 4411 County Rd. Y

City Sheboygan State WI Zip Code 53083-1636

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A997B9770EB834BABA92**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dale Hanke**

Mailing Address 1320 Bentwood Lane

City Manitowoc State WI Zip Code 54220-1659

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

Name of Employer Red Arrow Products Company, LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : ABF4C252A940C40F78C1**

Amount of Each Receipt this Period  
**500.00**

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

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

**575.00**



**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 25 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tong Seng Lee**

Mailing Address 434 Ontario Ave

City Sheboygan State WI Zip Code 53081-4136

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A876372366D3043F8961**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Christee Girdaukas**

Mailing Address N6415 Woodland Rd

City Sheboygan State WI Zip Code 53083-3272

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A72D54DB48BB8444B9A3**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Allan Risseeuw**

Mailing Address PO Box 162

City Cedar Grove State WI Zip Code 53013-0162

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AADD218EBEC4149F498A**

Amount of Each Receipt this Period  
 20.00

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

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

620.00

**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 26 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Thomason**

Mailing Address **PO Box 5332**

City **Johnson City** State **TN** Zip Code **37602-5332**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**35.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : AC4788CF73DF34AAF97E**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Christopher Donlon**

Mailing Address **N8443 Glacial Court**

City **Elkhart Lake** State **WI** Zip Code **53020-1950**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : AC0F49A9A5AEF4A0CB4D**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jo Anne Burris**

Mailing Address **80 River View Rd**

City **Kiel** State **WI** Zip Code **53042-1771**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : AF573850946F8425A8DF**

Amount of Each Receipt this Period  
**100.00**

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

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

**210.00**

**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 27 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Ledeboer**

Mailing Address 2011 N 27th Place

City Sheboygan State WI Zip Code 53081-2026

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **35.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AE0962006F88C40DCB5E**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Amy Mullens**

Mailing Address 534 Euclid Ave.

City Sheboygan State WI Zip Code 53083-5058

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **20.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : A0A5AE68F9BAC411FA1C**

Amount of Each Receipt this Period  
**10.00**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Stayer-Suprick**

Mailing Address 1429 N 2nd Street

City Sheboygan State WI Zip Code 53081-3529

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

Name of Employer Information Requested Occupation Information Requested  
**Johnsonville Sausage President-International**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : A73CE4D63CFFF4588812**

Amount of Each Receipt this Period  
**500.00**

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

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

**520.00**

**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 28 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Bushman**

Mailing Address 2114 33rd St.

City Two Rivers State WI Zip Code 54241-1608

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AB62B1A066C1B431CA1A**

Amount of Each Receipt this Period  
**15.00**

**B.** Full Name (Last, First, Middle Initial)  
**Christine Smith**

Mailing Address 649 Richardson Ave.

City Sheboygan Falls State WI Zip Code 53085-1056

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AC649E277219043E2BA9**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Carol Berge**

Mailing Address 3713 Limestone Ct.

City Sheboygan State WI Zip Code 53083-2666

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A89CCEBA6DDB8489381B**

Amount of Each Receipt this Period  
**10.00**

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

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

**125.00**

**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 29 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ann O'Rourke**

Mailing Address 2122 W Quincy Ct.

City Mequon	State WI	Zip Code 53092-5415
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A61ABC56BD7344068A33**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Kennedy**

Mailing Address PO Box 1779

City Janesville	State WI	Zip Code 53547-1779
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FEC ID number of contributing federal political committee. **C**

Name of Employer Rock Road Companies	Occupation Vice President
---	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A468A41F0567E4913BB5**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eunice Berg**

Mailing Address 2119 Saemann Ave

City Sheboygan	State WI	Zip Code 53081-2257
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A32326371EEB94A3FBC5**

Amount of Each Receipt this Period  
15.00

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

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

565.00

**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 30 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Seehafer**

Mailing Address 1211 Tanglewood Rd.

City Manitowoc	State WI	Zip Code 54220-2330
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A7BFB39E3C1A84170B24**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Sally Miller**

Mailing Address 5042 Borst Lane

City Harshaw	State WI	Zip Code 54529-9594
-----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A66B3EF684A3247A8AF2**

Amount of Each Receipt this Period  
15.00

**C.** Full Name (Last, First, Middle Initial)  
**Marvel Harrison**

Mailing Address 3029 Erik Lane

City Sheboygan	State WI	Zip Code 53083-2514
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A472F276C300647C9A6C**

Amount of Each Receipt this Period  
50.00

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

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

115.00

**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 31 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Wallrich**

Mailing Address 1776 Briarwood Rd.

City Sheboygan	State WI	Zip Code 53083-2152
-------------------	-------------	------------------------

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

Name of Employer Pine Hills Country Club	Occupation Office Assistant
---	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A39A4EE1705964658800**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Hollfelder**

Mailing Address N7889 Lakeside Park Rd.

City Elkhart Lake	State WI	Zip Code 53020-1811
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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  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : ADBFB80D564E34EDEB93**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Randall Mays**

Mailing Address 12525 N La Belle Ct.

City Mequon	State WI	Zip Code 53092-2319
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : ABB7A0572EC6A466FA1A**

Amount of Each Receipt this Period  
100.00

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

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

2800.00

**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 32 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Homan**

Mailing Address 181 Harmsen Ave.

City Waupun	State WI	Zip Code 53963-1049
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A642E4879DEC34764BA9**

Amount of Each Receipt this Period  
180.00

**B.** Full Name (Last, First, Middle Initial)  
**Maria Townsend**

Mailing Address 297 Roosevelt St.

City Fond Du Lac	State WI	Zip Code 54935-2572
---------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A65406F78EEC943DABF1**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Larry Schuh**

Mailing Address PO Box 1297

City Osprey	State FL	Zip Code 34229-1297
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : A7A39331144F74FB39E5**

Amount of Each Receipt this Period  
50.00

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

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

280.00



**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 33 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Herrmann**

Mailing Address 315 Stafford St.

City Plymouth State WI Zip Code 53073-1242

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A3FE74D12B45D40E1A27**

Amount of Each Receipt this Period  
 25.00

Amount of Each Receipt this Period  
 75.00

**B.** Full Name (Last, First, Middle Initial)  
**Jill Daun**

Mailing Address 210 E Barrett St.

City Glenbeulah State WI Zip Code 53023-1169

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : A7CFF381A18F449C98F7**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Keane**

Mailing Address 6609 Bestwicke Road

City Burke State VA Zip Code 22015-4465

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

Name of Employer Information Requested Occupation Information Requested  
 American Beverage Association Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : ABB29B228726A4AF7986**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

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

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

375.00

**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 34 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Brown**

Mailing Address 2523 W Norway Dr.

City Thiensville State WI Zip Code 53092-4940

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : AA2E4848B2F6340FF8C3**

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
**James Pawlak**

Mailing Address 13018 Centerville Rd.

City Cleveland State WI Zip Code 53015-1306

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
199.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A31F17AD6C90C4B9C9CC**

Amount of Each Receipt this Period  
199.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Ryan**

Mailing Address 1914 S 26th St.

City Sheboygan State WI Zip Code 53081-5415

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
65.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : AF6979DF092374236930**

Amount of Each Receipt this Period  
20.00

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

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

249.00

**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 35 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Tomlinson**

Mailing Address 123 River Oaks Dr.

City Sheboygan Falls State WI Zip Code 53085-1092

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A049E6032E7AD4E6EAA6**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Nawikas**

Mailing Address 1330 S. 21st St.

City Sheboygan State WI Zip Code 53081-5056

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AAA3CCC7D69E049069CA**

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine Kornely**

Mailing Address PO Box 32

City Manitowoc State WI Zip Code 54221-0032

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A07010FA011164C02BC4**

Amount of Each Receipt this Period  
100.00

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

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

145.00

**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 36 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Bouche**

Mailing Address 1111 Partridge Run

City Sheboygan Falls State WI Zip Code 53085-1846

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A18CF1AAE5FFD4E79AD4**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Georgianna Hoem**

Mailing Address 6532 South Business Dr.

City Sheboygan State WI Zip Code 53081-8988

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A60ED6AFD112A4BB59A6**

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
**Pat Hruby**

Mailing Address 13725 Willmas Rd

City Newton State WI Zip Code 53063-9723

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A3B281089E8394C26806**

Amount of Each Receipt this Period  
 12.50

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

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

132.50

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

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

FOR LINE NUMBER: PAGE 37 OF 142  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Homan**

Mailing Address 187 Harmsen Ave

City State Zip Code  
Waupun WI 53963-1049

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
175.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 31 2014

**Transaction ID : A92FBE40E81BA494C905**

Amount of Each Receipt this Period  
175.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Nelesen**

Mailing Address W3095 Hickory Hills Rd.

City State Zip Code  
Chilton WI 53014-9767

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 06 2014

**Transaction ID : AB7982D48E7994F48A9F**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Jennifer Madson**

Mailing Address 4442 White Oak Lane

City State Zip Code  
Sheboygan WI 53083-2179

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 07 2014

**Transaction ID : A79AF225F8E974327A23**

Amount of Each Receipt this Period  
25.00

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

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

250.00

**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 38 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Nicholson**

Mailing Address **W5866 Pheasant Lane**

City **Plymouth** State **WI** Zip Code **53073-3350**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AF91C484F6DC0428DB2C**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kevin Hoffman**

Mailing Address **3502 Dennett Dr.  
Apt. 402**

City **Madison** State **WI** Zip Code **53714-2854**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : A6D60F3D907EA484F8CB**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nicole McEvoy**

Mailing Address **311 Frederick St.**

City **Plymouth** State **WI** Zip Code **53073-2115**

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

Name of Employer Information Requested  
**Homemaker**  
Occupation Information Requested  
**Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 05 / 2014**

**Transaction ID : A95DEFA0742B54B41B83**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1125.00**

**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 39 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roman Draba**

Mailing Address S59 W22597 Glengarry Rd.

City State Zip Code  
Waukesha WI 53189-9676

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : A495138246463405E85D**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joe Raflik**

Mailing Address 2001 S 25th St.

City State Zip Code  
Sheboygan WI 53081-5407

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
85.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 08 / 2014

**Transaction ID : A7CE9855F4E7C4408A29**

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
**Kermit Ellefson**

Mailing Address N7131 Melody Ln.

City State Zip Code  
Sheboygan Falls WI 53085-2016

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

Name of Employer Occupation  
Schcnk, SC CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 08 / 2014

**Transaction ID : AD2BBB0DFDB034EDFBEL**

Amount of Each Receipt this Period  
200.00

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

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

480.00

**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 40 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ruth Ruege**

Mailing Address 1050 Ulao Pkwy

City Grafton State WI Zip Code 53024-9763

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : AE3C306A6B93D45DABF9**

Amount of Each Receipt this Period  
**15.00**

**B.** Full Name (Last, First, Middle Initial)  
**Cynthia Olson**

Mailing Address N9798 Highland Park Rd.

City Malone State WI Zip Code 53049-1408

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A80EC803B2C0349A393B**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jacqueline Wegner**

Mailing Address 1216 Kristel Heights

City Kiel State WI Zip Code 53042-1289

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A82EB6962FE5B447BBA0**

Amount of Each Receipt this Period  
**25.00**

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

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

**240.00**



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

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

FOR LINE NUMBER: PAGE 41 OF 142  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Reinl**

Mailing Address 903 N 27th St.

City Sheboygan State WI Zip Code 53081-3607

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 105.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : AFDFEFA25BAC24E9A952**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 35.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Klingeisen**

Mailing Address 15 S. County Road J

City Reedsville State WI Zip Code 54230-8329

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A918546B0C6484A43910**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

**C.** Full Name (Last, First, Middle Initial)  
**Barbara Gumm**

Mailing Address 139 Market Street

City Kohler State WI Zip Code 53044-1537

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : AA65F04A3C4C54E92B24**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

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

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

\_\_\_\_\_ 85.00

\_\_\_\_\_

**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 42 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Braun**

Mailing Address 14375 Woodmount Dr.

City	State	Zip Code
Brookfield	WI	53005-2393

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

Name of Employer	Occupation
Lunda Construction Company	Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A98501C10DBCE451AA94**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Del Carriveau**

Mailing Address 2814 S 17th St.

City	State	Zip Code
Sheboygan	WI	53081

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
55.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A4E0E8FAA519146D0A53**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerome Krueger**

Mailing Address 1861 Michigan Ave

City	State	Zip Code
Manitowoc	WI	54220-3139

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AEF849031BD904151B2D**

Amount of Each Receipt this Period  
25.00

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

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

300.00

**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 43 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Thompson**

Mailing Address 620 Wilson Ave

City Sheboygan State WI Zip Code 53081-6904

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **35.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : AC6DD04B273C7435DB0E**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Thomson**

Mailing Address N8168 Dairyland Dr.

City Sheboygan State WI Zip Code 53083-5113

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : A852788629BC74A32BBD**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Tom Witt**

Mailing Address 1725 Pheasant St.

City Sheboygan State WI Zip Code 53081-7724

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : A15A5BB15F19442579AB**

Amount of Each Receipt this Period  
**5.00**

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

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

**55.00**

**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 44 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ellen Leonhard**

Mailing Address 1429 N 6th St.

City Sheboygan State WI Zip Code 53081-3519

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **70.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : AF53FE8F8FC8F4D798F6**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Norbert Prange**

Mailing Address 707 Armstrong Ave.

City Sheboygan State WI Zip Code 53083-1156

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **90.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A219BFAD75D12446F946**

Amount of Each Receipt this Period  
**20.00**

**C.** Full Name (Last, First, Middle Initial)  
**Rose Marie Derks**

Mailing Address 800 Stoney Brook Dr.

City Manitowoc State WI Zip Code 54220-9038

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **40.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A9595454E2E814206A84**

Amount of Each Receipt this Period  
**40.00**

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

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

**85.00**

**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 45 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Guy Webster**

Mailing Address 1222 27th St.

City Two Rivers State WI Zip Code 54241-2117

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : ACDB5EA36BB8040C9BD2**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Braun**

Mailing Address 3321 Chasm Ln.

City Manitowoc State WI Zip Code 54220-2301

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A2C54E0BBAA1642AB9ED**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Helen Mallmann**

Mailing Address 2722 N 10th St.  
Apt. 103

City Sheboygan State WI Zip Code 53083-4059

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : A900ED2DE044A46CF9CB**

Amount of Each Receipt this Period  
 25.00

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

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

175.00

**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 46 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tim Terp**

Mailing Address 3404 Chasm Ln.

City State Zip Code  
Manitowoc WI 54220-2304

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A66B2B01CC46E4303A12**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Chesley Erwin**

Mailing Address 712 Woodridge Dr.

City State Zip Code  
Manitowoc WI 54220-8982

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A0560636EF69B42C7B42**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**James Herrick**

Mailing Address N6499 County Rd. UU

City State Zip Code  
Fond Du Lac WI 54937-7317

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : AC45BA6425CCF429AACE**

Amount of Each Receipt this Period  
100.00

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

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

200.00

**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 47 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Denis Schmideler**

Mailing Address 3506 N 6th St.

City Sheboygan State WI Zip Code 53083-3105

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : AA6B03FA7AF1949AB916**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lillian Nolan**

Mailing Address 78 Martin Place

City Fond Du Lac State WI Zip Code 54935-6203

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A9B7497476EB147869E1**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kenlyn Gretz**

Mailing Address 3118 Sunray Lane

City Green Bay State WI Zip Code 54313-7281

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

Name of Employer Information Requested Occupation Information Requested  
 Americollect CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AB03480F15FC34ACF863**

Amount of Each Receipt this Period  
**300.00**

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

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

**350.00**

**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 48 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Kapellen**

Mailing Address **W5261 County Road J**

City **Plymouth** State **WI** Zip Code **53073-3308**

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

Name of Employer Information Requested  
**Information Requested**

Occupation Information Requested  
**Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : ABD48C0D24D89437EA76**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Lee**

Mailing Address **W2128 Pebble Beach Rd.**

City **Cedar Grove** State **WI** Zip Code **53013-1495**

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

Name of Employer Information Requested  
**Wisconsin Home Health Care, LLC**

Occupation Information Requested  
**Owner/Administrator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : A226026EE7E284018897**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Verlyn Thomack**

Mailing Address **625 Ashland Ave.**

City **Sheboygan** State **WI** Zip Code **53081-6053**

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

Name of Employer Information Requested  
**Information Requested**

Occupation Information Requested  
**Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A7CB6FFDC39FA419FB55**

Amount of Each Receipt this Period  
**25.00**

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

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

**1075.00**



**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 49 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Gregory**

Mailing Address 18022 W Hillcrest Rd.

City Reedsville	State WI	Zip Code 54230-9008
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AB171D9C5B5FD4220AAA**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Robin Richter**

Mailing Address 663 W One Wood Place

City Green Valley	State AZ	Zip Code 85614-6109
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A2CF48BF555E142FF993**

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
**Laura DeGolier**

Mailing Address 114 S. Main St. PMB 301

City Fond Du Lac	State WI	Zip Code 54935-4229
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FEC ID number of contributing federal political committee. **C**

Name of Employer DeGolier Insurance Services, LLC	Occupation Insurance Agent
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AD30BAD01A7854DB4B7E**

Amount of Each Receipt this Period  
100.00

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

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

145.00

**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 50 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Hatch**

Mailing Address N5432 Dondor Drive

City State Zip Code  
Fond Du Lac WI 54937-7359

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A5CDA3CDD686A465194B**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Brock Brownrigg**

Mailing Address N7897 County Rd. E

City State Zip Code  
Elkhart Lake WI 53020-2004

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AE0DE9C939DA246B4B2A**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Orabelle Fisher**

Mailing Address PO Box 333

City State Zip Code  
Valders WI 54245-0333

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : AA612EED131C0414E8D5**

Amount of Each Receipt this Period  
10.00

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

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

210.00

**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 51 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Liz Julka**

Mailing Address 963 Churchill Ln.

City State Zip Code  
Fond Du Lac WI 54935-6397

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**125.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : A5F93EB973A6446A3B60**

Amount of Each Receipt this Period  
**75.00**

**B.** Full Name (Last, First, Middle Initial)  
**Roger Woodke**

Mailing Address W2789 State Road 28

City State Zip Code  
Sheboygan Falls WI 53085-2703

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A7CEEA5515EDB41EBAA4**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**M. Lee Beckermann**

Mailing Address 435 North Ave.

City State Zip Code  
Sheboygan WI 53083-5067

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 05 / 2014**

**Transaction ID : AC82F4F54687C4E788FE**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

**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 52 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Drew Hake**

Mailing Address 993 River Meadows Drive

City Sheboygan Falls State WI Zip Code 53085-1883

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A76A59F1B918F4D7D95C**

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Vandersteen**

Mailing Address 3816 Highcliff Ct.

City Sheboygan State WI Zip Code 53083-3019

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : AAC3B1936A88F40FDA64**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Marilyn Price**

Mailing Address W2456 Holland Lima Rd.

City Oostburg State WI Zip Code 53070-1846

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : A9DA3FD2AF054453BBB0**

Amount of Each Receipt this Period  
 50.00

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

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

200.00

**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 53 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen Kirst**

Mailing Address N6184 Woodland Meadows Dr.

City Sheboygan State WI Zip Code 53083-3351

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **75.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A8FE1C3695C2440B2B75**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**James DeWein**

Mailing Address 1241 S 21st Street

City Manitowoc State WI Zip Code 54220-4918

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A196F7F2F34AA43B390A**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Laura DeGolier**

Mailing Address 114 S. Main St. PMB 301

City Fond Du Lac State WI Zip Code 54935-4229

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

Name of Employer Information Requested Occupation Information Requested  
 DeGolier Insurance Services, LLC Insurance Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : ACFC585AFBFD1466B8EB**

Amount of Each Receipt this Period  
**100.00**

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

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

**150.00**

**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 54 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lue Yang**

Mailing Address 2212 N 24th St.

City Sheboygan	State WI	Zip Code 53083-4435
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A346EE8DC2A9447DAAF3**

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
**Margy Horneck**

Mailing Address 415 School Street

City Kohler	State WI	Zip Code 53044-1425
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A7F44EA90C34C4F46A15**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**William Krueger**

Mailing Address 623 Miller Court

City Kiel	State WI	Zip Code 53042-1761
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A122CBC4D25624BE382A**

Amount of Each Receipt this Period  
15.00

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

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

85.00

**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 55 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anonymous Cash Contribution</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address None		<b>Transaction ID : AAE7357BF9629479BA38</b>
City State Zip Code None	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 307.00
Name of Employer Information Requested Occupation Information Requested	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	307.00	

Full Name (Last, First, Middle Initial) <b>B. Michael Hartmann</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 17023 CTH F		<b>Transaction ID : A6956E6D173E247FA862</b>
City State Zip Code Kiel WI 53042	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer Information Requested Occupation Information Requested	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	50.00	

Full Name (Last, First, Middle Initial) <b>C. Christiane Endres</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 7255 N River Road		<b>Transaction ID : A51551A3815954C7EB45</b>
City State Zip Code River Hills WI 53217-3318	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Information Requested Occupation Information Requested	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	135.00

**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 56 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carla Behling**

Mailing Address 122 Menominee Dr.

City Sheboygan Falls State WI Zip Code 53085-1829

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A3346C0FE75594E3F98F**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**George Helpap, Jr.**

Mailing Address 201 Clark St.

City Glenbeulah State WI Zip Code 53023-1147

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A55FEB02BC6E42A3AE3**

Amount of Each Receipt this Period  
 75.00

**C.** Full Name (Last, First, Middle Initial)  
**James Denzin**

Mailing Address 732 Shelly Dr.

City Sheboygan Falls State WI Zip Code 53085-1770

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A96E537EB39964BDD83D**

Amount of Each Receipt this Period  
 20.00

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

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

195.00



**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 57 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Moyle**

Mailing Address 12621 W Park Ave

City State Zip Code  
New Berlin WI 53151-2664

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AD76CF27A46C94241A96**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Sorenson**

Mailing Address 732 N 37th St.

City State Zip Code  
Sheboygan WI 53081-3640

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : AA7D4F32B7C0F47388CC**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**James Maples**

Mailing Address 1248 Fleetwood Dr.

City State Zip Code  
Manitowoc WI 54220-2316

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : A5F244D8492744755ACE**

Amount of Each Receipt this Period  
50.00

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark McCabe**

Mailing Address 705 River Oaks

City Sheboygan Falls State WI Zip Code 53085-1045

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

Name of Employer McClone Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A6E19B3D66AE74E97B59**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joy Faulk**

Mailing Address 950 William St.

City Menasha State WI Zip Code 54952-1941

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : AD013937138F34C45BA5**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Foster**

Mailing Address 10726 Morgan Rd.

City Cato State WI Zip Code 54230-8418

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : A20F72BE7F94F4794A47**

Amount of Each Receipt this Period  
**100.00**

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

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

**225.00**

**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 59 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Klug**

Mailing Address 11136 N Lake Shore Dr.

City Mequon State WI Zip Code 53092-5811

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A55DAB1878FF74A13A12**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Marilyn VanDerPuy**

Mailing Address 3312 River Bluff Dr.

City Sheboygan State WI Zip Code 53083-2641

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : AB1978726401F42EAA4E**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenn Gaterman**

Mailing Address 1005 Memorial Dr.

City Manitowoc State WI Zip Code 54220-2242

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A867F3CC5F54248D6824**

Amount of Each Receipt this Period  
10.00

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

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

110.00

**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 60 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

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

Mailing Address 860 N 5th St.

City Manitowoc State WI Zip Code 54220-3363

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A82185E5EF9CA460EA36**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Terry Martin**

Mailing Address 3220 Greenview Dr.

City Sheboygan State WI Zip Code 53083-2516

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : AA0B5B486D2724CB08A3**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**David Forbes**

Mailing Address 3003 Greenview Dr.

City Sheboygan State WI Zip Code 53083-2519

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

Name of Employer Information Requested Occupation Information Requested  
**Forbes Evans Corporation Secretary**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : A57FE6FD19D0F41BC95C**

Amount of Each Receipt this Period  
**100.00**

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

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

**225.00**

**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 61 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sue Ann Wisse**

Mailing Address 2420 S 18th St.  
Apt 107

City Sheboygan State WI Zip Code 53081-6149

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : AEBFF08A7C8AE4153A95**

Amount of Each Receipt this Period  
 15.00

**B.** Full Name (Last, First, Middle Initial)  
**Tommy Thompson**

Mailing Address 1313 Manassas Trail

City Madison State WI Zip Code 53718-8243

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

Name of Employer Information Requested Occupation Information Requested  
 Thompson Family Holdings CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : ACC230E0A58634548996**

Amount of Each Receipt this Period  
 350.00

**C.** Full Name (Last, First, Middle Initial)  
**Mae Jean Messner**

Mailing Address 718 Pine St.

City Sheboygan Falls State WI Zip Code 53085-1533

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A280311E9B0044D58BE2**

Amount of Each Receipt this Period  
 25.00

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

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

390.00

**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 62 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Heidemann**

Mailing Address 1601 S 8th St.

City Sheboygan State WI Zip Code 53081-5832

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : ABCD59DFAEF924A95A4F**

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
**Matthew Shiners**

Mailing Address N3347 Cortland Lane

City Antigo State WI Zip Code 54409-9561

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

Name of Employer Information Requested Occupation Information Requested  
 Antigo Construction, Inc. Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A4F07DF1E72384980A47**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**James Cummings**

Mailing Address 1000 Eden Dr.

City Neenah State WI Zip Code 54956-4228

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : AD1226888275F482B8F8**

Amount of Each Receipt this Period  
 50.00

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

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

1075.00

**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 63 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Farrow**

Mailing Address W262 N2402 Deer Haven Dr.

City Pewaukee	State WI	Zip Code 53072-4572
------------------	-------------	------------------------

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A0DAC057AD2EA4F0D929**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jean Schmidt**

Mailing Address 710 S 27th St.

City Sheboygan	State WI	Zip Code 53081-4230
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A2377253C43AE4ED1A14**

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
**Georgiana Staff**

Mailing Address 1247 Parkwood Blvd.

City Sheboygan	State WI	Zip Code 53081-7270
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A869A31DEBBCF44B28B9**

Amount of Each Receipt this Period  
25.00

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

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

285.00

**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 64 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A. Patricia Walter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7215 W Mequon Square Dr  
 City Mequon State WI Zip Code 53092-8526  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014  
**Transaction ID : AFDCB1B84D1B04E56950**  
 Amount of Each Receipt this Period  
 25.00

**B. Matthew Swift**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 343 West 16th Street  
 City New York State NY Zip Code 10011-5954  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Information Requested Occupation Information Requested  
 Concord 51 PAC Chairman  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014  
**Transaction ID : AE515E6E2E1684CF7A7D**  
 Amount of Each Receipt this Period  
 800.00

**C. Melissa Dickrell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W7628 County Rd. H  
 City Elkhart Lake State WI Zip Code 53020-1411  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Information Requested Occupation Information Requested  
 Masters Gallery Foods Line Attendant  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014  
**Transaction ID : A6247A9FD92B34CB9B7D**  
 Amount of Each Receipt this Period  
 100.00

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

925.00



**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 65 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Kay Evans**

Mailing Address 334 Plaza Lane

City Plymouth State WI Zip Code 53073-4288

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

Name of Employer Sun Graphics Occupation Co-Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AE8D1B7F21146401F833**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jamie Lee**

Mailing Address 905 North 40th Street

City Manitowoc State WI Zip Code 54220-3001

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A458D6B2B8E194AD798A**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Chesley Erwin**

Mailing Address 712 Woodridge Dr.

City Manitowoc State WI Zip Code 54220-8982

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A32323B69A2A34B2CB81**

Amount of Each Receipt this Period  
75.00

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

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

425.00

**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 66 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Kennedy**

Mailing Address **PO Box 813**

City **Janesville** State **WI** Zip Code **53547-0813**

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

Name of Employer **Rock Road Companies** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A6C087945BB3F4E7DB9F**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jerold Korinek**

Mailing Address **12935 County Road K**

City **Reedsville** State **WI** Zip Code **54230-8075**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AF3D75977E1F64C45AAE**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Donald Krajnik**

Mailing Address **PO Box 73**

City **Mishicot** State **WI** Zip Code **54228-0073**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A36E9D60C102547AA965**

Amount of Each Receipt this Period  
**25.00**

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

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

**1050.00**

**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 67 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Allen Leverett**

Mailing Address 3631 North Hackett Ave.

City Shorewood State WI Zip Code 53211-2640

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

Name of Employer Wisconsin Energy Corporation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : AADC565B82156490C85B**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Barry Emmer**

Mailing Address 11315 Grimms Rd.

City Reedsville State WI Zip Code 54230-9791

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A1C6C8D2CE1B647C8A7F**

Amount of Each Receipt this Period  
 5.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Daniels**

Mailing Address 2204 N 26th St.

City Sheboygan State WI Zip Code 53083-4423

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : ACA663F60E0D241B0A4A**

Amount of Each Receipt this Period  
 25.00

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

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

530.00

**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 68 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Irish**

Mailing Address 4229 S. 16th St.

City Sheboygan State WI Zip Code 53081-7759

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

Name of Employer Owner Occupation Irish Roofing Company

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A2CE1A334F0EA4FCE9A6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Craig Hruby**

Mailing Address 13725 Willmas Rd.

City Newton State WI Zip Code 53063-9723

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A2418624BB993452B933**

Amount of Each Receipt this Period  
**12.50**

**C.** Full Name (Last, First, Middle Initial)  
**Anne Parks**

Mailing Address 114 Westridge Drive

City Sheboygan Falls State WI Zip Code 53085-1839

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : A449C76D6F0334DAA973**

Amount of Each Receipt this Period  
**50.00**

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

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

**162.50**

**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 69 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Brill**

Mailing Address **PO Box 700241**

City **Oostburg** State **WI** Zip Code **53070-0241**

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 **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : ACB3DD75CF50443F2B9E**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Vue Yang**

Mailing Address **1744 Greenfield Ave.**

City **Sheboygan** State **WI** Zip Code **53081-7149**

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

Name of Employer **Union Oriental Market of Sheboygan** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 05 / 2014**

**Transaction ID : AFB77028E23B540A6A23**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Robert Garvin**

Mailing Address **1860 Carriage Hills Dr.**

City **Delafield** State **WI** Zip Code **53018-1245**

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

Name of Employer **Wisconsin Energy Corporation** Occupation **Senior VP- External Affairs**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : AF38DCD3FD9A342E0AD1**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1300.00**

**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 70 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>Harold Just</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2014
Mailing Address 4704 Broadway St.		<b>Transaction ID : AC2DDFD3B5DE843F5A8F</b>
City Manitowoc	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 25.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Tom Kurtz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 04 / 2014
Mailing Address 306 Fenway Terrace		<b>Transaction ID : A4A4F8EE5F42343F4A61</b>
City Manitowoc	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 50.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dennis Ladwig</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2014
Mailing Address 1553 Golf View Dr. E		<b>Transaction ID : AB6C90C5C3C0A4794848</b>
City Sheboygan	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Information Requested	Occupation Information Requested	Election Cycle-to-Date 145.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> 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: (check only one)	PAGE 71 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Danielsen**

Mailing Address 2221 N 26th St.

City Sheboygan State WI Zip Code 53083-4424

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 **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A4724373F393B4B2AA65**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Linda Wendt**

Mailing Address W6389 Lincoln Road

City Van Dyne State WI Zip Code 54979-9704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : AA58E589911CE4900A44**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**LaVonne Kelling**

Mailing Address W8205 S HWY A

City Adell State WI Zip Code 53001-1463

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A0163D8D55B804C0A9DE**

Amount of Each Receipt this Period  
**25.00**

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

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

**225.00**

**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 72 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Schmidt**

Mailing Address 9407 South Shore Dr

City Valders State WI Zip Code 54245-9513

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : AFE332EDA38AA46EF918**

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Taybee Pauly**

Mailing Address 1321 Memorial Dr.

City Manitowoc State WI Zip Code 54220-6705

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A30FA8D9FAE774048BDF**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Philip Nass**

Mailing Address 3008 Lambert Ln.

City Manitowoc State WI Zip Code 54220-9720

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

Name of Employer Information Requested Occupation Information Requested  
 Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : A1ABA5D12103B47BCA88**

Amount of Each Receipt this Period  
 200.00

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

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

300.00



**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 73 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Don Davis, Jr.**

Mailing Address 4780 N Lake Dr.

City Milwaukee	State WI	Zip Code 53211-1256
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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  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : A3D1701D1BE3A486DB09**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Marion Ruesink**

Mailing Address 2028 N 3rd St.

City Sheboygan	State WI	Zip Code 53081-2814
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 15 / 2014

**Transaction ID : A0D86B8152C7045AC9EA**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Sohn**

Mailing Address N5764 County Rd. TT  
PO Box 118

City Sheboygan Falls	State WI	Zip Code 53085-2330
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FEC ID number of contributing federal political committee. **C**

Name of Employer JSM Communications	Occupation Owner
--	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
575.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : ABB3D8187060F4FFB83A**

Amount of Each Receipt this Period  
25.00

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

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

1050.00

**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 74 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Jacoby**

Mailing Address 906 Krumrey St.

City Plymouth State WI Zip Code 53073-1002

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **45.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A25E47EF4FEF74EF990B**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Judy Simenz**

Mailing Address 2146 Waverly Ct.

City Sheboygan State WI Zip Code 53083-2192

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

Name of Employer Information Requested Occupation Information Requested  
 Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **395.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : A16FD4B0614B044E5849**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kris McKinney**

Mailing Address 422 Park Crest Drive

City Thiensville State WI Zip Code 53092-1404

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : AA0095671F26440F5B4C**

Amount of Each Receipt this Period  
**100.00**

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

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

**160.00**

**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 75 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Gottsacker**

Mailing Address 915 Hawthorne Ct.

City Manitowoc	State WI	Zip Code 54220-2963
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A718EFC73D7894912871**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Morton**

Mailing Address 416 Cambridge Ct.

City Neenah	State WI	Zip Code 54956-4607
----------------	-------------	------------------------

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

Name of Employer Information Requested Morton Drug Company, Inc.	Occupation Information Requested CEO
---	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AF233403A482C4153AA7**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Bruins**

Mailing Address N2899 State HWY 49

City Waupun	State WI	Zip Code 53963
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A20A7E1AF6FE546EC826**

Amount of Each Receipt this Period  
50.00

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

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

400.00

**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 76 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Milbrath**

Mailing Address 4152 Glenway St.

City: Wauwatosa State: WI Zip Code: 53222-1116

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

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **75.00**

Date of Receipt: 08 / 09 / 2014

Transaction ID : **A2FA1E639E0C146C1AA1**

Amount of Each Receipt this Period: **25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Blamey**

Mailing Address 7603 Four Mile Creek Rd.

City: Three Lakes State: WI Zip Code: 54562-9318

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

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **150.00**

Date of Receipt: 08 / 11 / 2014

Transaction ID : **ACFE13DC139844AFC9E4**

Amount of Each Receipt this Period: **25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mary Limoni**

Mailing Address 1130 Westwood Ln.

City: Manitowoc State: WI Zip Code: 54220-2333

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

Name of Employer Information Requested: Occupation Information Requested:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **25.00**

Date of Receipt: 08 / 04 / 2014

Transaction ID : **A8E010C32DE604E70BA4**

Amount of Each Receipt this Period: **25.00**

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

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

**75.00**

**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 77 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sherry Baalke**

Mailing Address 6511 Cloverleaf Ct.

City Sheboygan State WI Zip Code 53081-9118

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A7FE77EBE41AA431DB8D**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Shua Yang**

Mailing Address 4407 S 18th St.

City Sheboygan State WI Zip Code 53081-7733

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : AF178EA4369C640BCBE8**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Geoffrey Liban**

Mailing Address 1378 Birch Cove Ct.

City Reedsville State WI Zip Code 54230-8439

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A65A73502863F4DB1A83**

Amount of Each Receipt this Period  
**200.00**

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

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

**500.00**

**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 78 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Holler**

Mailing Address 2212 S 11th St.

City Sheboygan	State WI	Zip Code 53081-5909
-------------------	-------------	------------------------

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  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A5AE5302EDF04432B85D**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Moudry**

Mailing Address 512 Michigan Ave

City Sheboygan	State WI	Zip Code 53081-3526
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A1313D13C9DA34F91850**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Orv Langohr**

Mailing Address 14230 Pigeon River Rd.

City Cleveland	State WI	Zip Code 53015-1100
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : A8BC552DFDD94776A15**

Amount of Each Receipt this Period  
50.00

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

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

125.00

**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 79 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter O'Reilly**

Mailing Address 104 Redtail Dr.  
#10

City Sheboygan Falls State WI Zip Code 53085-3357

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A78EB29547F4A4DCEBEB**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark McCabe**

Mailing Address 705 River Oaks

City Sheboygan Falls State WI Zip Code 53085-1045

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

Name of Employer Information Requested Occupation Information Requested  
McClone Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A9650A21F120340D282C**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**William Buelter**

Mailing Address 209 Beth Circle

City Plymouth State WI Zip Code 53073-2647

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AB1DE22A4D79B4B248DA**

Amount of Each Receipt this Period  
25.00

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

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

175.00

**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 80 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Clemons**

Mailing Address N88 W5268 Covington Sq.

City Cedarburg State WI Zip Code 53012-1520

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 **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A82C7F47C221847C2891**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Peter Roehrig**

Mailing Address N6510 County Road K

City Fond Du Lac State WI Zip Code 54937-8124

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AB7CF5A3198294CC089A**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Roman Draughon**

Mailing Address 1702 Alexander Ct.

City Sheboygan State WI Zip Code 53081-2349

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AD75C7FD0AE4945F6B5E**

Amount of Each Receipt this Period  
**10.00**

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

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

**160.00**



**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 81 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sue Falck**

Mailing Address 4224 Glenwood Ct.

City Sheboygan State WI Zip Code 53081-1756

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **75.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A8E5F98DA7BF64B549FB**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Pearl Turner**

Mailing Address 4217 Sommer Dr.

City Sheboygan State WI Zip Code 53081-7943

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : AB270649EF10A4FB48B3**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Drill**

Mailing Address 1716 Clark St.

City Manitowoc State WI Zip Code 54220-3826

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **45.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : A97D68FB0090A4E7FB79**

Amount of Each Receipt this Period  
**20.00**

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

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

**70.00**

**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 82 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Walter Nielsen**

Mailing Address 1060 W Bradley Rd.

City State Zip Code  
River Hills WI 53217-2508

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A029D13F9B33A4C3A954**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Giora Katz**

Mailing Address 2234 Lakeside Blvd.

City State Zip Code  
Manitowoc WI 54220-6658

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AC52EED210F9D429FAC6**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Warner**

Mailing Address 2006 N 29th St.

City State Zip Code  
Sheboygan WI 53081-1923

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AF0E441928F854464881**

Amount of Each Receipt this Period  
25.00

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

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

225.00

**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 83 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carol DenBoer**

Mailing Address 822 Geele Ave.

City Sheboygan State WI Zip Code 53083-4953

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : AAFC38B2E13764A0798C**

Amount of Each Receipt this Period  
 25.00

Amount of Each Receipt this Period  
 45.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Mahoney**

Mailing Address 19390 Walden Trail

City Wayzata State MN Zip Code 55391-3548

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

Name of Employer Information Requested Occupation Information Requested  
 Willis Insurance Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : A27F9DFFA97874847B33**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Grace Ebert**

Mailing Address W13675 Reeds Corners Rd

City Ripon State WI Zip Code 54971-9512

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A14031FE64089463CB88**

Amount of Each Receipt this Period  
 10.00

Amount of Each Receipt this Period  
 10.00

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

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

1035.00

**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 84 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ruth McKay**

Mailing Address 535 Pennsylvania Ave.  
Unit 201

City Sheboygan State WI Zip Code 53081-4640

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : A1D7F22F0C4DA41B192A**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Charlotte Leist**

Mailing Address 145 Sportsman Lane

City Reedsville State WI Zip Code 54230-9516

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A95D48539E69647DFB33**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Williamson**

Mailing Address 1102 Riverview Dr.

City Plymouth State WI Zip Code 53073-1344

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

Name of Employer Information Requested Occupation Information Requested  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : ADECCA868816549D2B9A**

Amount of Each Receipt this Period  
50.00

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

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

125.00

**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 85 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Parnitzke**

Mailing Address 1528 Nutmeg Court

City Sheboygan State WI Zip Code 53081-1508

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : A0F722B2FB4F94CA2A2D**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Larry Muldoon**

Mailing Address W1071 SW Circle Dr.

City Saint Cloud State WI Zip Code 53079-1341

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : A0409108D0964464185F**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jean Meyer**

Mailing Address 518 Fairview Drive

City Plymouth State WI Zip Code 53073-1305

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AB7DE0F35FC9E4C05A32**

Amount of Each Receipt this Period  
**25.00**

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

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

**125.00**

**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 86 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kristin Schroeder-Wilcox**

Mailing Address 5404 Woodland Rd.

City Sheboygan State WI Zip Code 53081-8521

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : AC9EACC3C899D4D77805**

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
**Howard Stern**

Mailing Address 706 E Lexington Blvd.

City Milwaukee State WI Zip Code 53217-5338

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

Name of Employer Information Requested Occupation Information Requested

Northwestern Mutual Insurance Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A3FE4FCF3B5B243A1B51**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Bea Hollfelder**

Mailing Address N7889 Lakeside Park Rd.

City Elkhart Lake State WI Zip Code 53020-1811

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

Name of Employer Information Requested Occupation Information Requested

Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : A82E27C0E62D1402C93C**

Amount of Each Receipt this Period  
 2600.00

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

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

2825.00

**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 87 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roman Draba**

Mailing Address S59 W22597 Glengarry Rd.

City Waukesha	State WI	Zip Code 53189-9676
------------------	-------------	------------------------

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  
1550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : ADFC2B53832A64072AEA**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lynn Borth**

Mailing Address 4819 S 12th St.

City Sheboygan	State WI	Zip Code 53081-8004
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A9965C91A3554400D943**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Larry Weidig**

Mailing Address 3819 S 18th St.

City Sheboygan	State WI	Zip Code 53081-7111
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
125.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A8B089F505B2C4E00B6E**

Amount of Each Receipt this Period  
25.00

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

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

300.00

**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 88 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rev. Randal Schoemann**

Mailing Address **W5388 County Rd. SS**

City **Random Lake** State **WI** Zip Code **53075-1236**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AF2FB0B83773A415CBFD**

Amount of Each Receipt this Period  
**5.00**

**B.** Full Name (Last, First, Middle Initial)  
**Laurie Mueller**

Mailing Address **417 Upper Road**

City **Kohler** State **WI** Zip Code **53044-1436**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **40.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AB20B0BB70D414208B95**

Amount of Each Receipt this Period  
**20.00**

**C.** Full Name (Last, First, Middle Initial)  
**Debra Knox**

Mailing Address **1222 S Alverno Road**

City **Manitowoc** State **WI** Zip Code **54220-9784**

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : A03AFEC75CD1340BB90D**

Amount of Each Receipt this Period  
**50.00**

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

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

**75.00**



**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 89 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Plocar**

Mailing Address N8214 Rangeline Road

City Sheboygan State WI Zip Code 53083-5201

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : ACA4C0F3B3D8F4F39B51**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Rhatican**

Mailing Address 502 Ozark Trail

City Madison State WI Zip Code 53705-2539

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : A16995B540B834FE8884**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Hamann**

Mailing Address N7885 County Road Y

City Sheboygan State WI Zip Code 53083-5524

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A27E70E70C2FA48C7A02**

Amount of Each Receipt this Period  
25.00

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan De Graaf**

Mailing Address 1112 Center Ave.

City	State	Zip Code
Oostburg	WI	53070-1349

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>10.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**08 / 10 / 2014**

**Transaction ID : AC35EDA71DC1640E8A53**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Reitz**

Mailing Address 312 Adams St.

City	State	Zip Code
Sheboygan Falls	WI	53085-1462

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>50.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AA19C3082560549988B9**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Polly Beal**

Mailing Address 1080 W Dean Rd.

City	State	Zip Code
Milwaukee	WI	53217-2531

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>100.00</b>

Date of Receipt  
M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : A0C3D785D96814FFE9D2**

Amount of Each Receipt this Period  
**100.00**

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

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

**135.00**

**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 91 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Sohn**

Mailing Address N5764 County Rd. TT  
PO Box 118

City Sheboygan Falls State WI Zip Code 53085-2330

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

Name of Employer JSM Communications Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A9093B541EC0A4F7BA14**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Darnell DeMasters**

Mailing Address 10776 Crest Street

City Fairfax State VA Zip Code 22030-5169

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

Name of Employer Wisconsin Energy Corporation Occupation Vice President- Federal Policy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A4CE7FFD63F6C497E830**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Heidi Garvin**

Mailing Address 1860 Carriage Hills Dr.

City Delafield State WI Zip Code 53018-1245

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : ABFD588B11544453382E**

Amount of Each Receipt this Period  
1000.00

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

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

2100.00

**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 92 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Bradley**

Mailing Address 4827 Madison Rd.

City State Zip Code  
Whitelaw WI 54247

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

Name of Employer Occupation  
St. Nicholas Hospital Administrative Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : A6DC03A5E5E054FBCB0C**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Raymond Zirk**

Mailing Address 536 S 32nd St

City State Zip Code  
Manitowoc WI 54220-3615

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

Name of Employer Occupation  
Federal Mogul Machine Operator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A9DDE1684F9304D668D0**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Deborah Van Alstine**

Mailing Address 413 Van Buren Rd.

City State Zip Code  
Howards Grove WI 53083-1030

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AE708137841264FEFABD**

Amount of Each Receipt this Period  
40.00

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

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

340.00

**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 93 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Kennedy**

Mailing Address 439 Winnebago Dr.

City Janesville	State WI	Zip Code 53545-4353
--------------------	-------------	------------------------

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

Name of Employer Rock Road Companies	Occupation Vice President
---	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : AA9F8130D561E43DFB77**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sigmund Chikowski**

Mailing Address 172 S State St.

City Berlin	State WI	Zip Code 54923-2133
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : A29C23B32CF6E4B1495E**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Cliff Acheson**

Mailing Address 78-7070 Alii Drive  
E203

City Kailua Kona	State HI	Zip Code 96740-2562
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : ACEA6DBD90CBB451BBCI**

Amount of Each Receipt this Period  
25.00

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

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

550.00

**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 94 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Wojcik**

Mailing Address N8580 Town Hall Rd.

City Eldorado	State WI	Zip Code 54932-9626
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : AB097B55C3DB94EE3BBD**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 4007 Greenwood Ct.

City Sheboygan	State WI	Zip Code 53081-7428
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
35.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A7FB12A68DB1E4297AD7**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel McKeithan, Jr.**

Mailing Address 777 East Wisconsin Ave.  
Suite 3020

City Milwaukee	State WI	Zip Code 53202-5302
-------------------	-------------	------------------------

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

Name of Employer Information Requested Tamarack Petroleum Company, Inc.	Occupation Information Requested Chairman
--	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : A137C7688758C4AF29C3**

Amount of Each Receipt this Period  
1600.00

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

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

1650.00

**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 95 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Di Raimondo, MD**

Mailing Address 1636 Miriam Rd.

City Manitowoc	State WI	Zip Code 54220-1843
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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  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : A929BE2BD86F24B7FB12**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven Peterson**

Mailing Address N6776 West Cardinal Dr.

City Sheboygan	State WI	Zip Code 53083-8400
-------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : AEC3507C038B24AE9861**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Keith Steiger**

Mailing Address 1225 Longfellow Ave

City Howards Grove	State WI	Zip Code 53083-1355
-----------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A5CC49FF160AD4CD1B15**

Amount of Each Receipt this Period  
50.00

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

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

650.00

**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 96 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Steinert**

Mailing Address 2932 Witzel Ave

City Oshkosh State WI Zip Code 54904-6537

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A6890B061088F480D821**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Valerie Schneider**

Mailing Address 525 Pennsylvania Ave.  
Unit 202

City Sheboygan State WI Zip Code 53081-4666

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
60.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A43716F53D4FA4D6EB5B**

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Kiel**

Mailing Address 7403 Cty Rd O

City Two Rivers State WI Zip Code 54241-9037

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A1148691E7EA6426AB3E**

Amount of Each Receipt this Period  
100.00

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

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

170.00



**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 97 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Burdette Schuldt**

Mailing Address 3623 N 48th St.

City Sheboygan State WI Zip Code 53083-2568

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 **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A72BB9EDDB3494B18819**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ed Evanoff**

Mailing Address 554 Lynwood Drive

City Sheboygan Falls State WI Zip Code 53085-1718

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A5AC11DC5A07D48FD8BC**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Megan Decker**

Mailing Address 5051 Tonyawatha Trail

City Monona State WI Zip Code 53716-2501

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

Name of Employer Mega Rentals, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AF60C7324B39F494CAB7**

Amount of Each Receipt this Period  
**250.00**

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

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

**350.00**

**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 98 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin Hermening**

Mailing Address 2245 County Rd. KK

City Mosinee	State WI	Zip Code 54455-9759
-----------------	-------------	------------------------

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

Name of Employer Hermening Financial Group, LLC	Occupation Financial Planner
--	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : A52A5CD5259AA4CB098E**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth Glewen**

Mailing Address 385 Fond du Lac St.

City Waupun	State WI	Zip Code 53963-1554
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : AE22E9A8F334E4E7BA6F**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Kelli Vroom**

Mailing Address 630 Treehouse Pkwy.

City Kohler	State WI	Zip Code 53044-1113
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : A39E7048932E046D9A61**

Amount of Each Receipt this Period  
50.00

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

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

450.00

**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 99 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>Betty Conner</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 2000 Johnston Dr #203		<b>Transaction ID : A0A13C3CDCBA5432D891</b>
City Manitowoc	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00	

Full Name (Last, First, Middle Initial) <b>Mary Stitt</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1478 Noridge Trail		<b>Transaction ID : A670AEF6C62AF42A4B1E</b>
City Port Washington	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested	Occupation Information Requested	In-kind:Valet Service for Fundraiser
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) <b>Carl Amundsen</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 1708 Plainwood Drive		<b>Transaction ID : AF7631724884A48BE84D</b>
City Sheboygan	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Priority Sign, Inc.	Occupation Chairman & Founder	In-kind:Partial Offset of Office Rent
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	575.00
<b>TOTAL</b> 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: (check only one)	PAGE 100 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Leibham**

Mailing Address 3625 Kennedy Circle

City Sheboygan State WI Zip Code 53083-2652

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 **653.44**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : A5EBE09C3C51246F79F7**

Amount of Each Receipt this Period  
**378.44**

In-kind:Newspaper Ads

**B.** Full Name (Last, First, Middle Initial)  
**Carl Amundsen**

Mailing Address 1708 Plainwood Drive

City Sheboygan State WI Zip Code 53081-7727

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

Name of Employer Priority Sign, Inc. Occupation Chairman & Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : ADBD3949823F5428D882**

Amount of Each Receipt this Period  
**450.00**

In-kind:Partial Offset of Office Rent

**C.** Full Name (Last, First, Middle Initial)  
**Christine Jensema**

Mailing Address N3459 Whitetail Road

City Sheboygan Falls State WI Zip Code 53085-2912

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

Name of Employer HSHS-Eastern Wisconsin Division Occupation Chief People Officer EWD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : A5B0680FD58494DB8861**

Amount of Each Receipt this Period  
**500.00**

Earmarked through Wisconsin Hospitals Conduit.

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

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

**1328.44**

**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 101 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wisconsin Hospitals Conduit**

Mailing Address 5510 Research Park Drive  
PO Box 259038

City Fitchburg State WI Zip Code 53711-5377

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2330.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : AE62150240889409D93B**

Amount of Each Receipt this Period  
500.00

Total earmarked through this conduit. PAC limit not affected.  
**[MEMO ITEM]**  
 Conduit Memo

**B.** Full Name (Last, First, Middle Initial)  
**Nate Leibham**

Mailing Address 1811 Grams Court

City Sheboygan State WI Zip Code 53081-5621

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

Name of Employer Occupation  
The American Club Front Desk Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : AF7A17264E8DB45F0872**

Amount of Each Receipt this Period  
500.00

In-kind:Parade Float Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Jon Rost**

Mailing Address N7377 County HWY CJ

City Plymouth State WI Zip Code 53073-2844

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

Name of Employer Occupation  
Innovation Applied Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : AA0F408B0EAA44D4DA71**

Amount of Each Receipt this Period  
400.00

In-kind:Lodging for Staff

**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: (check only one)	PAGE 102 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sridhar Vasudevan**

Mailing Address 5200 Upper Lakeview Ridge Rd.

City Belgium	State WI	Zip Code 53004-9001
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FEC ID number of contributing federal political committee. **C**

Name of Employer Froedtert & Medical College of Wiscons	Occupation Physician
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AA5EA1FB0029C414B9D8**

Amount of Each Receipt this Period  
100.00

Earmarked through WisMedDirect

**B.** Full Name (Last, First, Middle Initial)  
**WisMedDirectPAC**

Mailing Address 330 E Lakeside Street

City Madison	State WI	Zip Code 53715-2074
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A91560859094C405CBE1**

Amount of Each Receipt this Period  
100.00

Total earmarked through this conduit. PAC limit not affected.  
**[MEMO ITEM]**  
 Conduit Memo

**C.** Full Name (Last, First, Middle Initial)  
**Jay Risch**

Mailing Address 3053 Trenton Drive

City Sun Prairie	State WI	Zip Code 53590-4268
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A39E720575F3740FEA20**

Amount of Each Receipt this Period  
50.00

Earmarked through Alliance of Bankers for Wisconsin

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

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

150.00

**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 103 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alliance of Bankers for Wisconsin**

Mailing Address 4721 South Biltmore Lane

City Madison State WI Zip Code 53718-2107

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A13B8D5A7B3F4406E838**

Amount of Each Receipt this Period  
200.00

Total earmarked through this conduit. PAC limit not affected.  
**[MEMO ITEM]**  
 Conduit Memo

**B.** Full Name (Last, First, Middle Initial)  
**Corey Hoze**

Mailing Address 11021 W Sanctuary Dr.

City Milwaukee State WI Zip Code 53224-5049

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : AB990D171B877453FA6A**

Amount of Each Receipt this Period  
50.00

Earmarked through Alliance of Bankers for Wisconsin

**C.** Full Name (Last, First, Middle Initial)  
**Alliance of Bankers for Wisconsin**

Mailing Address 4721 South Biltmore Lane

City Madison State WI Zip Code 53718-2107

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : AAE37E5513C9E4FA3BD5**

Amount of Each Receipt this Period  
200.00

Total earmarked through this conduit. PAC limit not affected.  
**[MEMO ITEM]**  
 Conduit Memo

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

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

50.00

**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 104 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mike Semmann**

Mailing Address 1119 Zingg Drive

City State Zip Code  
Verona WI 53593-2129

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : AE11B2A3905214FD0B18**

Amount of Each Receipt this Period  
100.00

Earmarked through Alliance of Bankers for Wisconsin

**B.** Full Name (Last, First, Middle Initial)  
**Alliance of Bankers for Wisconsin**

Mailing Address 4721 South Biltmore Lane

City State Zip Code  
Madison WI 53718-2107

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2014

**Transaction ID : AA2E6041AD01D44D8A96**

Amount of Each Receipt this Period  
200.00

Total earmarked through this conduit. PAC limit not affected.  
**[MEMO ITEM]**  
Conduit Memo

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence Wiley**

Mailing Address 108 N Green Bay Rd.

City State Zip Code  
Appleton WI 54911-5625

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

Name of Employer Occupation  
Akin Gump Strauss Hauer & Feld LLP Attorney at Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1211.88

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 06 / 2014

**Transaction ID : A2DB0FA2590EF42BE829**

Amount of Each Receipt this Period  
211.88

In-kind:Meet & Greet Food and Drink

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

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

311.88

42697.32



**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 105 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION - POLITICAL ACTION CMTE (ASLRRRA-PAC)

Mailing Address 50 F STREET NW  
SUITE 7020

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00298190

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A976DC247FF574251ABD**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTIUTION AVENUE, NW  
10TH FLOOR WEST

City WASHINGTON State DC Zip Code 20001

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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : A08A9793BBA4B48F2A5A**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A93049E8E37164D4984D**

Amount of Each Receipt this Period  
 5000.00

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

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

11000.00

**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 106 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WISCONSIN ENERGY POLITICAL ACTION COMMITTEE**

Mailing Address **231 WEST MICHIGAN STREET**

City **MILWAUKEE** State **WI** Zip Code **53203**

FEC ID number of contributing federal political committee. **C C00099945**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : AF66F3D3725B0451FA9E**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **14600 TRINITY BLVD  
SUITE 500**

City **FORT WORTH** State **TX** Zip Code **76155**

FEC ID number of contributing federal political committee. **C C00267849**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : A352EA7B3D91943AE86B**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)**

Mailing Address **8700 WEST BRYN MAWR  
SUITE 1200S**

City **CHICAGO** State **IL** Zip Code **60631**

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : AF8973CB73D804548949**

Amount of Each Receipt this Period  
**1500.00**

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

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

**3000.00**

**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 107 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TAVERN LEAGUE OF WISCONSIN INC FEDERAL PAC (WIS TAV PAC)**

Mailing Address 2817 FISH HATCHERY ROAD

City MADISON State WI Zip Code 53713

FEC ID number of contributing federal political committee. **C** C00429159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : A9DA591FFF5B4449CAA8**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : AE31009EB6EFF4361BC5**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A4A17AA59FB4B4312A90**

Amount of Each Receipt this Period  
 5000.00

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

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

7500.00

**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 108 OF 142	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**

Mailing Address 1015 15TH ST. NW  
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 04 / 2014

**Transaction ID : A60DE8AE2FDA644B8953**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 29 / 2014

**Transaction ID : A21F19E4D03174D8CBA2**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 04 / 2014

**Transaction ID : A8A367E5142A34F3D847**

Amount of Each Receipt this Period  
3000.00

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

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

10000.00

**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 109 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address **C/O G&W 2201 WISCONSIN AVE., NW**  
**SUITE 320**

City **WASHINGTON** State **DC** Zip Code **20007**

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AE5E05A32AC0C4B1E9E3**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

\_\_\_\_\_ **5000.00**

**B. Full Name (Last, First, Middle Initial)**  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address **1061 AMERICAN LANE**

City **SCHAUMBURG** State **IL** Zip Code **60173**

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 12 / 2014**

**Transaction ID : AF0BE7FF4E24D4389B2B**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

\_\_\_\_\_ **5000.00**

**C. Full Name (Last, First, Middle Initial)**  
**MANITOWOC COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **2400 SOUTH 44TH STREET**  
**PO BOX 66**

City **MANITOWOC** State **WI** Zip Code **54221**

FEC ID number of contributing federal political committee. **C C00287847**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : AC2B28ED202AE4EEB876**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

\_\_\_\_\_ **5000.00**

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

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

\_\_\_\_\_ **15000.00**

\_\_\_\_\_ **46500.00**

**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 110 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 522 N 9th St.		Amount of Each Disbursement this Period 49.49 <b>Transaction ID : B055D248B006542B494B</b>
City Sheboygan State WI Zip Code 53081-4440	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name	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>B. Zimmerman Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 3418 Washington Ave PO Box 931		Amount of Each Disbursement this Period 105.00 <b>Transaction ID : B556C43BC6F064F7083F</b>
City Sheboygan State WI Zip Code 53081-6405	Purpose of Disbursement Envelopes 001 Category/Type	
Candidate Name	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>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 522 N 9th St.		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : B6722BC2E62084402966</b>
City Sheboygan State WI Zip Code 53081-4440	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	203.49
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. OfficeMax</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 3424 Kohler Memorial Dr.		Amount of Each Disbursement this Period 47.24 <b>Transaction ID : BF422C13F213B4C6392C</b>
City Sheboygan State WI Zip Code 53081-8300	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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>B. Shoppes at Mill Road, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 837 Riverfront Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B291633BAA82F4888AF3</b>
City Sheboygan State WI Zip Code 53081-4670	Purpose of Disbursement Office Rent Candidate Name Category/Type 001	
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>c. Strategic Media Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1911 North Ft. Myer Drive Suite 400		Amount of Each Disbursement this Period 54766.28 <b>Transaction ID : B1FA6D73972CB4516A75</b>
City Arlington State VA Zip Code 22209-1617	Purpose of Disbursement Media-TV & Radio Candidate Name Category/Type 004	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	55113.52
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B0E92614480AB4B3BA65</b>
City Sheboygan State WI Zip Code 53082-1409	Purpose of Disbursement Banking Fee Candidate Name 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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO Box 2981		Amount of Each Disbursement this Period 125.13 <b>Transaction ID : B9FE7CF7E1389426D8E2</b>
City Milwaukee State WI Zip Code 53201-2981	Purpose of Disbursement Phone/Internet Service Candidate Name 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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. EZ Contribution, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address PO Box 5511341		Amount of Each Disbursement this Period 116.40 <b>Transaction ID : B3312404143774170938</b>
City New Berlin State WI Zip Code 53151	Purpose of Disbursement Credit Card Transaction Fees Candidate Name 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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	266.53
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 142			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 522 N 9th St.		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : B52DA2C4047104E8DBAC</b>
City Sheboygan	State WI	
Zip Code 53081-4440	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	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>B. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 4185.00 <b>Transaction ID : BEDCCB117EEAF48CD867</b>
City Salt Lake City	State UT	
Zip Code 84104-5102	Purpose of Disbursement Campaign Literature	Category/ Type 006
Candidate Name	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>C. OfficeMax</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3424 Kohler Memorial Dr.		Amount of Each Disbursement this Period 76.94 <b>Transaction ID : B00766FD34BFB46A6849</b>
City Sheboygan	State WI	
Zip Code 53081-8300	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4359.94
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B91B4607A81F34FFDB82</b>
City Sheboygan State WI Zip Code 53082-1409	Purpose of Disbursement Banking Fee Candidate Name Category/Type 001	
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>B. Strategic Media Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1911 North Ft. Myer Drive Suite 400		Amount of Each Disbursement this Period 56823.68 <b>Transaction ID : B4FE1F16E37354396BA2</b>
City Arlington State VA Zip Code 22209-1617	Purpose of Disbursement Media-TV & Radio Candidate Name Category/Type 004	
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>c. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B7A09417738DA4519B8B</b>
City Sheboygan State WI Zip Code 53082-1409	Purpose of Disbursement Banking Fee Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56873.68
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sean McCort</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 4037 Landfall Dr.		Amount of Each Disbursement this Period 1990.56 <b>Transaction ID : B83E5ACAE004E4C18890</b>
City Pensacola	State FL	
Zip Code 32507-9296	Purpose of Disbursement Staff Salary	Category/ Type 001
Candidate Name	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>B. Allison Cramer</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 27 Whispering Springs Court		Amount of Each Disbursement this Period 1586.82 <b>Transaction ID : B5B9BA3C1EC834056A58</b>
City Fond Du Lac	State WI	
Zip Code 54937-6912	Purpose of Disbursement Staff Salary	Category/ Type 001
Candidate Name	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>C. Kris Wheeler</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1233 South 20th St.		Amount of Each Disbursement this Period 1341.40 <b>Transaction ID : BA2DE3A65A4BA4E40963</b>
City Sheboygan	State WI	
Zip Code 53081-5141	Purpose of Disbursement Staff Salary	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4918.78
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mattias Gugel</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1642 S 23rd Street		Amount of Each Disbursement this Period 1990.56 <b>Transaction ID : BE16001A796974D3782D</b>
City Sheboygan State WI Zip Code 53081-5018	Purpose of Disbursement Staff Salary Category/Type 001	
Candidate Name	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>B. Lucas Moench</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 20 N Blair St. Apt. 318		Amount of Each Disbursement this Period 1990.56 <b>Transaction ID : B26CEDA368EA7418DBCE</b>
City Madison State WI Zip Code 53703-2463	Purpose of Disbursement Staff Salary Category/Type 001	
Candidate Name	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>c. United States Post Office</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 522 N 9th St.		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : B295B6C2800BB4A34AF9</b>
City Sheboygan State WI Zip Code 53081-4440	Purpose of Disbursement Postage Category/Type 001	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4079.12
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 1.00
City Sheboygan	State WI	
Zip Code 53082-1409	Purpose of Disbursement Banking Fee	Transaction ID : BC8E553F28F624664A23
Candidate Name	Category/Type 001	
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>B. OfficeMax</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 3424 Kohler Memorial Dr.		Amount of Each Disbursement this Period 47.24
City Sheboygan	State WI	
Zip Code 53081-8300	Purpose of Disbursement Office Supplies	Transaction ID : B4802EFA4FBEB48979D5
Candidate Name	Category/Type 001	
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>c. EZ Contribution, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 5511341		Amount of Each Disbursement this Period 64.80
City New Berlin	State WI	
Zip Code 53151	Purpose of Disbursement Credit Card Transaction Fees	Transaction ID : B1CB80E92EE6E408496B
Candidate Name	Category/Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	113.04
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carole Goeas</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1707 Prince Street #5		Amount of Each Disbursement this Period 60.38 <b>Transaction ID : B6F912EB5A91747569CB</b>
City Alexandria	State VA Zip Code 22314-2804	
Purpose of Disbursement Travel Reimbursement	Category/Type 002	
Candidate Name		
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>B. Mary Stitt</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 1478 Noridge Trail		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : BBD0DC565959C4898B4E</b>
City Port Washington	State WI Zip Code 53074-1371	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
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>c. OfficeMax</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 3424 Kohler Memorial Dr.		Amount of Each Disbursement this Period 47.24 <b>Transaction ID : B5C34F66690F044DEA68</b>
City Sheboygan	State WI Zip Code 53081-8300	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3607.62
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 142			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Zimmerman Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 3418 Washington Ave PO Box 931		Amount of Each Disbursement this Period 99.75 <b>Transaction ID : BF7AE020C1CED4B98848</b>
City Sheboygan State WI Zip Code 53081-6405	Purpose of Disbursement Letterhead Candidate Name 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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 10313.00 <b>Transaction ID : B61E4BB0C7DC94D4B8AD</b>
City Salt Lake City State UT Zip Code 84104-5102	Purpose of Disbursement Direct Mail Candidate Name 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:	Category/Type 006	

Full Name (Last, First, Middle Initial) <b>c. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 10097.00 <b>Transaction ID : B56CC40E8B2E74D28BBB</b>
City Salt Lake City State UT Zip Code 84104-5102	Purpose of Disbursement Direct Mail Candidate Name 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:	Category/Type 006	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20509.75
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 10097.00 <b>Transaction ID : BB7D666BD6FA9459283C</b>
City Salt Lake City	State UT	
Zip Code 84104-5102	Purpose of Disbursement Direct Mail	Category/ Type 006
Candidate Name	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>B. FP1 Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address PO Box 16504		Amount of Each Disbursement this Period 1161.29 <b>Transaction ID : BE535B24B646F4153974</b>
City Alexandria	State VA	
Zip Code 22302-0154	Purpose of Disbursement Digital Consulting	Category/ Type 004
Candidate Name	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>C. New River Research Institute, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 2150 Country Club Road Suite 221		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B3A4F62C7C6F1425E8A2</b>
City Winston Salem	State NC	
Zip Code 27104-4241	Purpose of Disbursement Canvassing Software	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12758.29
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 142			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1950.00 <b>Transaction ID : B4B402789B8204431AA8</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Computer Software 001 Category/Type	
Candidate Name	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>B. Schenck, SC</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 712 Riverfront Dr #301		Amount of Each Disbursement this Period 501.00 <b>Transaction ID : BAD607054EB6E42D69C6</b>
City Sheboygan State WI Zip Code 53081-4665	Purpose of Disbursement Accounting Services 001 Category/Type	
Candidate Name	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>c. OfficeMax</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 3424 Kohler Memorial Dr.		Amount of Each Disbursement this Period 62.99 <b>Transaction ID : B1957255759F1407AA78</b>
City Sheboygan State WI Zip Code 53081-8300	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2513.99
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 142		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kwik Kopy Printing</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 135 W. Wells Street		Amount of Each Disbursement this Period 566.03 <b>Transaction ID : B756ED3105039416EAAB</b>
City Milwaukee	State WI	
Zip Code 53203-1830	Purpose of Disbursement Fundraiser Invitation Printing	Category/ Type 003
Candidate Name	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>B. Walmart</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 4433 Vanguard Drive		Amount of Each Disbursement this Period 6.96 <b>Transaction ID : B2ABF0366203140A6B3C</b>
City Sheboygan	State WI	
Zip Code 53083-6067	Purpose of Disbursement Water for Volunteers	Category/ Type 001
Candidate Name	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>c. Shoppes at Mill Road, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 837 Riverfront Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : BEA8F527E6DA744DCA99</b>
City Sheboygan	State WI	
Zip Code 53081-4670	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	872.99
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. FP1 Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address PO Box 16504		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : BC332745A00584069B77</b>
City Alexandria	State VA	
Zip Code 22302-0154	Purpose of Disbursement Production-Radio	Category/ Type 004
Candidate Name	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>B. EZ Contribution, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address PO Box 5511341		Amount of Each Disbursement this Period 100.60 <b>Transaction ID : B095B9B51295642FD873</b>
City New Berlin	State WI	
Zip Code 53151	Purpose of Disbursement Credit Card Transaction Fees	Category/ Type 001
Candidate Name	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>c. StreamSend Email Marketing</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 1107 9th Street Suite 340		Amount of Each Disbursement this Period 99.90 <b>Transaction ID : B5EC9EBB0F9874EA1BC7</b>
City Sacramento	State CA	
Zip Code 95814-3614	Purpose of Disbursement Email Fundraising	Category/ Type 003
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2200.50
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. FP1 Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 13 / 2014</b>
Mailing Address <b>PO Box 16504</b>		Amount of Each Disbursement this Period <b>8615.50</b> Transaction ID : <b>BD5514BD2F05641429A2</b>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22302-0154</b>	Purpose of Disbursement <b>Online Advertising</b> Category/Type <b>004</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SCM Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 15 / 2014</b>
Mailing Address <b>1283 Main Street PO Box 254</b>		Amount of Each Disbursement this Period <b>2325.28</b> Transaction ID : <b>B7E2CA67931D14759B4E</b>
City <b>Dublin</b> State <b>NH</b> Zip Code <b>03444-8242</b>	Purpose of Disbursement <b>Fundraising Direct Mail</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Advantage Direct</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 15 / 2014</b>
Mailing Address <b>2300 Clarendon Blvd. Suite 303</b>		Amount of Each Disbursement this Period <b>1156.64</b> Transaction ID : <b>B2C672C91E30642E6B19</b>
City <b>Arlington</b> State <b>VA</b> Zip Code <b>22201-3367</b>	Purpose of Disbursement <b>Robocalls</b> Category/Type <b>004</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12097.42</b>
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 75.00
City Atlanta	State GA Zip Code 30318-5788	
Purpose of Disbursement Internet Mailing Service	Category/Type 003	<b>Transaction ID : B89D75A71130F43FD80A</b>
Candidate Name		
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>B. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 560.17
City Salt Lake City	State UT Zip Code 84104-5102	
Purpose of Disbursement Lapel Stickers	Category/Type 006	<b>Transaction ID : B7208B18B94C547B2A4D</b>
Candidate Name		
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>c. EZ Contribution, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 5511341		Amount of Each Disbursement this Period 69.00
City New Berlin	State WI Zip Code 53151	
Purpose of Disbursement Credit Card Transaction Fees	Category/Type 001	<b>Transaction ID : BEBD78790B82C4BDE81A</b>
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	704.17
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. SCM Associates Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 1283 Main Street PO Box 254		Amount of Each Disbursement this Period 683.63 <b>Transaction ID : B21A6A72CB02F49458FE</b>
City Dublin	State NH	
Zip Code 03444-8242	Purpose of Disbursement Fundraising Direct Mail	Category/ Type 003
Candidate Name	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>B. Sean McCort</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 4037 Landfall Dr.		Amount of Each Disbursement this Period 578.51 <b>Transaction ID : BE649B31AAC5F4B6C84F</b>
City Pensacola	State FL	
Zip Code 32507-9296	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	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>C. Luke Petrovich</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 2617 E. Washington Ave Apt. 1		Amount of Each Disbursement this Period 60.72 <b>Transaction ID : B10BA411E0D6440B58E3</b>
City Madison	State WI	
Zip Code 53704-5025	Purpose of Disbursement Volunteer Meals Reimbursement	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1322.86
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mattias Gugel</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 1642 S 23rd Street		Amount of Each Disbursement this Period 196.18 <b>Transaction ID : BE9275C1DF06A42CF8E6</b>
City Sheboygan State WI Zip Code 53081-5018	Purpose of Disbursement Mileage Reimbursement Candidate Name Category/Type 001	
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>B. Allison Cramer</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 27 Whispering Springs Court		Amount of Each Disbursement this Period 478.35 <b>Transaction ID : BC0CDAF17A18A48ECAF6</b>
City Fond Du Lac State WI Zip Code 54937-6912	Purpose of Disbursement Mileage Reimbursement Candidate Name Category/Type 001	
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>c. American Family Insurance, Gene Kopp Agency</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 2109 Erie Ave Ste 101		Amount of Each Disbursement this Period 850.00 <b>Transaction ID : BAA6525ED6A33463B95F</b>
City Sheboygan State WI Zip Code 53081-3778	Purpose of Disbursement Worker's Compensation Insurance Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1524.53
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. FP1 Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address PO Box 16504		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : B77236C6BA2444A85B96</b>
City Alexandria	State VA	
Purpose of Disbursement Digital Consulting		Category/ Type 004
Candidate Name		
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>B. FP1 Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address PO Box 16504		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : B117F7C7189434749A2E</b>
City Alexandria	State VA	
Purpose of Disbursement Digital Consulting		Category/ Type 004
Candidate Name		
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>c. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B8E4E484989EE4292A35</b>
City Sheboygan	State WI	
Purpose of Disbursement Banking Fee		Category/ Type 001
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6025.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Community Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 604 N Eight St. PO Box 1409		Amount of Each Disbursement this Period 1.00 <b>Transaction ID : B88A33E101CE64B73912</b>
City Sheboygan State WI Zip Code 53082-1409	Purpose of Disbursement Banking Fee Candidate Name Category/Type 001	
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>B. Sheboygan Town Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address W1945 County Highway J		Amount of Each Disbursement this Period 1706.10 <b>Transaction ID : BD6696A99D29745BC9AC</b>
City Sheboygan State WI Zip Code 53083-1606	Purpose of Disbursement Election Night Party Food & Drink Candidate Name Category/Type 007	
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>C. Allison Cramer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 27 Whispering Springs Court		Amount of Each Disbursement this Period 414.39 <b>Transaction ID : BA5EACEB9C941439F844</b>
City Fond Du Lac State WI Zip Code 54937-6912	Purpose of Disbursement Mileage Reimbursement Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2121.49
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mattias Gugel</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1642 S 23rd Street		Amount of Each Disbursement this Period 1763.66 <b>Transaction ID : B3CFD3AD14F724E8E90D</b>
City Sheboygan State WI Zip Code 53081-5018	Purpose of Disbursement Staff Salary Candidate Name Category/Type 001	
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>B. Lucas Moench</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 20 N Blair St. Apt. 318		Amount of Each Disbursement this Period 1421.03 <b>Transaction ID : B304CEA08AEFC4C96A40</b>
City Madison State WI Zip Code 53703-2463	Purpose of Disbursement Staff Salary Candidate Name Category/Type 001	
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>C. Kris Wheeler</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1233 South 20th St.		Amount of Each Disbursement this Period 1184.15 <b>Transaction ID : BDFED53DC6E08462EB7C</b>
City Sheboygan State WI Zip Code 53081-5141	Purpose of Disbursement Staff Salary Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4368.84
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allison Cramer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 27 Whispering Springs Court		Amount of Each Disbursement this Period 982.47 <b>Transaction ID : BFA917E43E477491790F</b>
City Fond Du Lac	State WI	
Zip Code 54937-6912	Purpose of Disbursement Staff Salary	Category/ Type 001
Candidate Name	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>B. Sean McCort</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4037 Landfall Dr.		Amount of Each Disbursement this Period 1421.03 <b>Transaction ID : B5FF4BB1EAE614AD780B</b>
City Pensacola	State FL	
Zip Code 32507-9296	Purpose of Disbursement Staff Salary	Category/ Type 001
Candidate Name	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>c. Sean McCort</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4037 Landfall Dr.		Amount of Each Disbursement this Period 572.96 <b>Transaction ID : B447E120C0D2E4796B2C</b>
City Pensacola	State FL	
Zip Code 32507-9296	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2976.46
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. StreamSend Email Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1107 9th Street Suite 340		Amount of Each Disbursement this Period 99.90 <b>Transaction ID : B2E9715BE3C0E430B80A</b>
City Sacramento State CA Zip Code 95814-3614	Purpose of Disbursement Email Fundraising Candidate Name Category/Type 003	
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>B. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : B1E740DFE3B1D43A7857</b>
City Atlanta State GA Zip Code 30318-5788	Purpose of Disbursement Internet Mailing Service Candidate Name Category/Type 003	
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>c. Mary Stitt</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1478 Noridge Trail		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B670AEF6C62AF42A4B1E</b>
City Port Washington State WI Zip Code 53074-1371	Purpose of Disbursement In-kind:Valet Service for Fundraiser 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	274.90
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carl Amundsen</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 1708 Plainwood Drive		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : BF7631724884A48BE84D</b>
City Sheboygan	State WI Zip Code 53081-7727	
Purpose of Disbursement In-kind: Partial Offset of Office Rent		Category/ Type
Candidate Name		
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>B. SCM Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1283 Main Street PO Box 254		Amount of Each Disbursement this Period 12210.56 <b>Transaction ID : BBC1F5704C8024E8BAE2</b>
City Dublin	State NH Zip Code 03444-8242	
Purpose of Disbursement Debt Repayment: Fundraising Direct Mail		Category/ Type
Candidate Name		
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>c. Ken Leibham</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3625 Kennedy Circle		Amount of Each Disbursement this Period 378.44 <b>Transaction ID : B5EBE09C3C51246F79F7</b>
City Sheboygan	State WI Zip Code 53083-2652	
Purpose of Disbursement In-kind: Newspaper Ads		Category/ Type
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13039.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carl Amundsen</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 1708 Plainwood Drive		Amount of Each Disbursement this Period 450.00 Transaction ID : BDBD3949823F5428D882
City Sheboygan State WI Zip Code 53081-7727	Purpose of Disbursement In-kind: Partial Offset of Office Rent	
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>B. Mountain Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 100 South 10th St.		Amount of Each Disbursement this Period 867.36 Transaction ID : BA998F2FD643142A1B97
City Oostburg State WI Zip Code 53070-1359	Purpose of Disbursement Debt Repayment: T-Shirts	
Candidate Name	Category/Type 006	
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>c. CLS Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address N172 South Park Dr.		Amount of Each Disbursement this Period 4630.50 Transaction ID : BB3020279B9C94043879
City Appleton State WI Zip Code 54914-8404	Purpose of Disbursement Debt Repayment: Yard Signs	
Candidate Name	Category/Type 006	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5947.86
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carole Goeas</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1707 Prince Street #5		Amount of Each Disbursement this Period 616.03 <b>Transaction ID : BA72943FEEF1F4600BDD</b>
City Alexandria	State VA Zip Code 22314-2804	
Purpose of Disbursement Debt Repayment: Reimbursement for Fundraiser Facility Rental & Catering		Category/Type 003
Candidate Name		
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>B. Arena Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1780 Sequoia Vista Circle		Amount of Each Disbursement this Period 4320.00 <b>Transaction ID : BA0829CF6D0EB4435878</b>
City Salt Lake City	State UT Zip Code 84104-5102	
Purpose of Disbursement Debt Repayment: Brochures		Category/Type 006
Candidate Name		
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>c. Nate Leibham</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1811 Grams Court		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : BF7A17264E8DB45F0872</b>
City Sheboygan	State WI Zip Code 53081-5621	
Purpose of Disbursement In-kind:Parade Float Supplies		Category/Type
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5436.03
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kwik Kopy Printing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 25 / 2014</b>
Mailing Address <b>135 W. Wells Street</b>		Amount of Each Disbursement this Period <b>873.45</b> <b>Transaction ID : B76920BC482A046868E9</b>
City <b>Milwaukee</b> State <b>WI</b> Zip Code <b>53203-1830</b>	Purpose of Disbursement <b>Debt Repayment: Fundraiser Invitation Printing</b> Category/Type <b>003</b>	
Candidate Name	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>B. Jon Rost</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 12 / 2014</b>
Mailing Address <b>N7377 County HWY CJ</b>		Amount of Each Disbursement this Period <b>400.00</b> <b>Transaction ID : BA0F408B0EAA44D4DA71</b>
City <b>Plymouth</b> State <b>WI</b> Zip Code <b>53073-2844</b>	Purpose of Disbursement <b>In-kind:Lodging for Staff</b> Category/Type	
Candidate Name	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>c. Wisconsin Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 02 / 2014</b>
Mailing Address <b>PO Box 8902</b>		Amount of Each Disbursement this Period <b>713.23</b> <b>Transaction ID : B728F4E05DAED4AD8A27</b>
City <b>Madison</b> State <b>WI</b> Zip Code <b>53708-8902</b>	Purpose of Disbursement <b>Debt Repayment: State Payroll Taxes</b> Category/Type <b>001</b>	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1986.68</b>
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 142			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wisconsin Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 8902		Amount of Each Disbursement this Period 429.23 <b>Transaction ID : B1175E6DF9F624813B17</b>
City Madison	State WI	
Zip Code 53708-8902	Purpose of Disbursement Debt Repayment: State Payroll Taxes	Category/ Type 001
Candidate Name	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>B. Lawrence Wiley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 108 N Green Bay Rd.		Amount of Each Disbursement this Period 211.88 <b>Transaction ID : B2DB0FA2590EF42BE829</b>
City Appleton	State WI	
Zip Code 54911-5625	Purpose of Disbursement In-kind:Meet & Greet Food and Drink	Category/ Type
Candidate Name	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>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 173788		Amount of Each Disbursement this Period 3669.66 <b>Transaction ID : B0D40E3B50DB34EE08E2</b>
City Denver	State CO	
Zip Code 80217-3788	Purpose of Disbursement Debt Repayment: Payroll Taxes	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4310.77
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 142		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 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)  
**Leibham for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 173788		Amount of Each Disbursement this Period 2512.37 <b>Transaction ID : B8C2C685A25394CA8859</b>
City Denver	State CO Zip Code 80217-3788	
Purpose of Disbursement Debt Repayment: Payroll Taxes		Category/ Type 001
Candidate Name		
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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2512.37
<b>TOTAL</b> This Period (last page this line number only).....	233039.62

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Leibham for Congress** Transaction ID : **C57557715A3CC450EB74**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Joe Leibham</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 941		

City	State	ZIP Code
Sheboygan	WI	53082-0941

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2014	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="10000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="10000.00"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 140 OF 142
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kwik Kopy Printing</b>	Nature of Debt (Purpose): Fundraiser Invitation Printing
Mailing Address 135 W. Wells Street	
City State Zip Code Milwaukee WI 53203-1830	

Outstanding Balance Beginning This Period 873.45	Transaction ID : D033A115A9F114F75B87	
Amount Incurred This Period 0.00	Payment This Period 873.45	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Arena Communications</b>	Nature of Debt (Purpose): Campaign Literature/Brochures
Mailing Address 1780 Sequoia Vista Circle	
City State Zip Code Salt Lake City UT 84104-5102	

Outstanding Balance Beginning This Period 4320.00	Transaction ID : DF8987C7CFBB34740843	
Amount Incurred This Period 0.00	Payment This Period 4320.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SCM Associates Inc</b>	Nature of Debt (Purpose): Fundraising Direct Mail
Mailing Address 1283 Main Street PO Box 254	
City State Zip Code Dublin NH 03444-8242	

Outstanding Balance Beginning This Period 12210.56	Transaction ID : D800D134D5C4645279C1	
Amount Incurred This Period 0.00	Payment This Period 12210.56	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mountain Promotions</b>	Nature of Debt (Purpose): T-Shirts
Mailing Address 100 South 10th St.	
City State Zip Code Oostburg WI 53070-1359	

Outstanding Balance Beginning This Period 867.36	<b>Transaction ID : DE71F15AE8E854367B02</b>	
Amount Incurred This Period 0.00	Payment This Period 867.36	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wisconsin Department of Revenue</b>	Nature of Debt (Purpose): Estimated State Tax Liability
Mailing Address PO Box 8902	
City State Zip Code Madison WI 53708-8902	

Outstanding Balance Beginning This Period 1260.43	<b>Transaction ID : D18A5F9BB57FE4CDC95E</b>	
Amount Incurred This Period 1354.75	Payment This Period 1142.46	Outstanding Balance at Close of This Period 1472.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Internal Revenue Service</b>	Nature of Debt (Purpose): Estimated Federal Tax Liability
Mailing Address PO Box 173788	
City State Zip Code Denver CO 80217-3788	

Outstanding Balance Beginning This Period 3760.86	<b>Transaction ID : D0A85AED66E04467BACB</b>	
Amount Incurred This Period 4259.53	Payment This Period 6182.03	Outstanding Balance at Close of This Period 1838.36

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	3311.08
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Leibham for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CLS Services, Inc.</b>	Nature of Debt (Purpose): Yard Signs
Mailing Address N172 South Park Dr.	
City State Zip Code Appleton WI 54914-8404	

Outstanding Balance Beginning This Period 4630.50	<b>Transaction ID : DF83181F553714AE3866</b>	
Amount Incurred This Period 0.00	Payment This Period 4630.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Carole Goeas</b>	Nature of Debt (Purpose): Fundraiser facility rental & catering. To be reimbursed.
Mailing Address 1707 Prince Street #5	
City State Zip Code Alexandria VA 22314-2804	

Outstanding Balance Beginning This Period 616.03	<b>Transaction ID : D9CFA7C3F1DEE4B0090F</b>	
Amount Incurred This Period 0.00	Payment This Period 616.03	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Larry's Market</b>	Nature of Debt (Purpose): Fundraiser Food & Beverage
Mailing Address 8737 N. Deerwood Dr.	
City State Zip Code Brown Deer WI 53209-1334	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D29635F91EFB74472BDA</b>	
Amount Incurred This Period 819.78	Payment This Period 0.00	Outstanding Balance at Close of This Period 819.78

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	819.78
2) <b>TOTALS</b> This Period (last page this line number only) .....	4130.86
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	10000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	14130.86