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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL						
Leibham for Congress						
ADDRESS (number and street) PO Box 941						
CITY, STATE, and ZIP CODE						
Sheboygan	WI	530	82-0941			
2. NAME OF CANDIDATE Joe Leibham		3. OFFICE SOUGHT (State and District)   House WI 06			4. FEC IDENTIFICATION NUMBER C00562496	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name o	f Employer			Date (month,	Amount
Thomas Hollfelder	Retired				day, year)	
N7889 Lakeside Park Rd.					08/09/2014	2600.00
	Transa	ction ID : 6	DBFB80D	564E34ED		
Elkhart Lake WI 53020-		Occupation				
	Retired	l			<b>.</b>	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name o	f Employer			Date (month, day, year)	Amount
Bea Hollfelder	Retired					
N7889 Lakeside Park Rd.					08/09/2014	2600.00
	Transa	ction ID : 68	32E27C0E	62D1402C	2	
Filthert Lebe	Occupat	ion			-	
Elkhart Lake WI 53020-7	Retired	1				
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		f Employer			Date (month, day, year)	Amount
PROPERTY CASUALTY INSURERS ASSOCIATION AMERICA POLITICAL ACTION COMMITTEE (PCIPA					08/09/2014	1500.00
8700 WEST BRYN MAWR						
SUITE 1200S		ction ID : 6	-8973CB7	3D804548		
CHICAGO IL 60631	Occupat	ion				
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name o	f Employer			Date (month, day, year)	Amount
		Occupation			-	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer			Date (month, day, year)	Amount
					-	
SIGNATURE (optional)			DATE		<b>F</b>	
Ken Leibham	[Electron	Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		

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