

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
Ron Leach for Congress Campaign Committee

ADDRESS (number and street) P.O. Box 647
 Check if different than previously reported. (ACC) Brandenburg KY 40108

2. **FEC IDENTIFICATION NUMBER** C00543538 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT
KY 02

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms Theresa Drake

Signature of Treasurer Ms Theresa Drake *[Electronically Filed]* Date M M / D D / Y Y Y Y
07 / 31 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Ron Leach for Congress Campaign Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	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))....	17367.40	17367.40
(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)).....	17367.40	17367.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8232.78	8232.78
(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)).....	8232.78	8232.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11696.37	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	8329.63	

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

Ron Leach for Congress Campaign Committee

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8119.17	8119.17
(ii) Unitemized.....	2640.00	2640.00
(iii) TOTAL of contributions from individuals ▶	10759.17	10759.17
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	6608.23	6608.23
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17367.40	17367.40
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17367.40	17367.40

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8232.78	8232.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8232.78	8232.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2561.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17367.40
25. SUBTOTAL (add Line 23 and Line 24).....	19929.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8232.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11696.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 01 / 12 / 2014

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 01 / 20 / 2014

Transaction ID : SA11AI.4414

Amount of Each Receipt this Period: 200.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 01 / 20 / 2014

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

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

0.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4397

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4414

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4439

Note: Above Contribution earmarked through this organization.

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 8 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 01 / 20 / 2014

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 01 / 26 / 2014

Transaction ID : SA11AI.4436

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 09 / 2014

Transaction ID : SA11AI.4424

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

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

0.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4451

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4436

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4424

Note: Above Contribution earmarked through this organization.

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 11 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 09 / 2014

Transaction ID : SA11AI.4427

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 09 / 2014

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 17 / 2014

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

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

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`#H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4427

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4460

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4399

Note: Above Contribution earmarked through this organization.

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: PAGE 14 OF 60
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

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 Y
 02 / 17 / 2014

Transaction ID : SA11AI.4406

Amount of Each Receipt this Period
 100.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

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 Y
 02 / 17 / 2014

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

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 Y
 02 / 17 / 2014

Transaction ID : SA11AI.4421

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]

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

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

0.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4406

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4409

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4421

Note: Above Contribution earmarked through this organization.

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 17 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 17 / 2014

Transaction ID : SA11AI.4457

Amount of Each Receipt this Period: 500.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 23 / 2014

Transaction ID : SA11AI.4454

Amount of Each Receipt this Period: 500.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 03 / 16 / 2014

Transaction ID : SA11AI.4401

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

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

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4457

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4454

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4401

Note: Above Contribution earmarked through this organization.

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 20 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 03 / 16 / 2014

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI.4403

Amount of Each Receipt this Period: 50.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI.4416

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]

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

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

0.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4448

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4403

Note: Above Contribution earmarked through this organization.

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4416

Note: Above Contribution earmarked through this organization.

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 23 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

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
 03 / 31 / 2014

Transaction ID : SA11AI.4442

Amount of Each Receipt this Period
 100.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Craig Astor

Mailing Address 5167 N L And N Turnpike Rd

City Hodgenville State KY Zip Code 42748-9232

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

Name of Employer Occupation
 UPS Aircraft Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : SA11AI.4395

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Craig Astor

Mailing Address 5167 N L And N Turnpike Rd

City Hodgenville State KY Zip Code 42748-9232

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

Name of Employer Occupation
 UPS Aircraft Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.4398

Amount of Each Receipt this Period
 250.00

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

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

500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4442

Note: Above Contribution earmarked through this organization.

Form/Schedule: SA11AI

Transaction ID: SA11AI.4395

* Earmarked Contribution: See Below

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4398

* Earmarked Contribution: See Below

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 26 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
Craig Astor

Mailing Address 5167 N L And N Turnpike Rd

City: Hodgenville State: KY Zip Code: 42748-9232

FEC ID number of contributing federal political committee: C

Name of Employer: UPS Occupation: Aircraft Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 03 / 11 / 2014

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Craig Astor

Mailing Address 5167 N L And N Turnpike Rd

City: Hodgenville State: KY Zip Code: 42748-9232

FEC ID number of contributing federal political committee: C

Name of Employer: UPS Occupation: Aircraft Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 800.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : SA11AI.4402

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Richard W Baldy

Mailing Address 25 Oak Dr

City: Chico State: CA Zip Code: 95926-1806

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 13 / 2014

Transaction ID : SA11AI.4408

Amount of Each Receipt this Period: 250.00

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

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

550.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4400

* Earmarked Contribution: See Below

Form/Schedule: SA11AI

Transaction ID: SA11AI.4402

* Earmarked Contribution: See Below

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4408

* Earmarked Contribution: See Below

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: PAGE 29 OF 60
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
Boilermakers-Blacksmiths Legislative Education Action Program

Mailing Address 753 State Ave
Ste 565

City Kansas City State KS Zip Code 66101-2511

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

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
 03 / 04 / 2014

Transaction ID : SA11AI.4411

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
George Brun

Mailing Address 3474 River Gardens Cir

City Pensacola State FL Zip Code 32514-8112

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

Name of Employer Occupation
N/A Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Yancy Clark

Mailing Address 4545 Lebanon Rd

City Danville State KY Zip Code 40422-9689

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4418

Amount of Each Receipt this Period
 500.00

Contribution by Check

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

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

1250.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4415

* Earmarked Contribution: See Below

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 31 OF 60
	<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)
Ron Leach for Congress Campaign Committee

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

Mailing Address 6005 Maple Hill Way

City State Zip Code
Crestwood KY 40014-8819

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

Name of Employer Occupation
Self-Employed Travel Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.4420

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Catherine Catherine Conway

Mailing Address 1 Bayberry Rd

City State Zip Code
Islip NY 11751-4915

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
250.00

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

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Keith Davis

Mailing Address 1701 Sanctuary

City State Zip Code
Owensboro KY 42303-9209

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

Name of Employer Occupation
University of Louisville Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4426

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4420

* Earmarked Contribution: See Below

Form/Schedule: SA11AI

Transaction ID: SA11AI.4423

* Earmarked Contribution: See Below

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4426

* Earmarked Contribution: See Below

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 34 OF 60
	<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)
Ron Leach for Congress Campaign Committee

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

Mailing Address 2 Wolf Pen Ln

City Prospect State KY Zip Code 40059-9699

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

Name of Employer Andrew Elliot Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period
 500.00

Contribution by Check

B. Full Name (Last, First, Middle Initial)
Allen Holbrook

Mailing Address 1844 Griffith Ave

City Owensboro State KY Zip Code 42301-3509

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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period
 250.00

Contribution by Check

C. Full Name (Last, First, Middle Initial)
John F Keithline

Mailing Address 205 Kenyon Ave

City East Greenwich State RI Zip Code 02818-2809

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

Name of Employer Empire Loan of Rhode Island Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11AI.4433

Amount of Each Receipt this Period
 500.00

Contribution by Check

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

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

1250.00

**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 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
Beverly Kohn

Mailing Address 6697 Warren Woods Rd

City Three Oaks State MI Zip Code 49128-8513

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 21 / 2014

Transaction ID : SA11AI.4435

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Sarah-Ann Kramarsky

Mailing Address 33 E 70th St Apt 7F

City New York State NY Zip Code 10021-4985

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11AI.4438

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Kelly Longenecker

Mailing Address 62 Merion Ct

City Brandenburg State KY Zip Code 40108-7102

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

Name of Employer US Army Occupation Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 05 / 2014

Transaction ID : SA11AI.4444

Amount of Each Receipt this Period
 869.17

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

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

1369.17

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4435

* Earmarked Contribution: See Below

Form/Schedule: SA11AI

Transaction ID: SA11AI.4438

* Earmarked Contribution: See Below

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4444

* In-Kind: Office Materials

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 38 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
Kelly Longenecker

Mailing Address 62 Merion Ct

City State Zip Code
Brandenburg KY 40108-7102

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

Name of Employer Occupation
US Army Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1069.17

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.4445

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Herbert Massey

Mailing Address 2133 Taborlake Cir

City State Zip Code
Lexington KY 40502-3076

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

Name of Employer Occupation
N/A Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joyanne B Mills

Mailing Address 14338 N Green Meadow Ln

City State Zip Code
Oro Valley AZ 85755-7120

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

Name of Employer Occupation
N/A 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
 01 / 14 / 2014

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period
250.00

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

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

700.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4445

* In-Kind: Event Tickets

Form/Schedule: SA11AI

Transaction ID: SA11AI.4447

* Earmarked Contribution: See Below

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4450

* Earmarked Contribution: See Below

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 41 OF 60
	<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)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
Steve Moulds

Mailing Address 995 Vintage Ave
Ste 204

City Saint Helena State CA Zip Code 94574-1409

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
John M. Parchem

Mailing Address 10219 Richwood Ave NW

City Seattle State WA Zip Code 98177-5442

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

Name of Employer Microsoft Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 15 / 2014

Transaction ID : SA11AI.4456

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ronald Sugarman

Mailing Address 870 United Nations Plz
Apt 7A

City New York State NY Zip Code 10017-1818

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.4459

Amount of Each Receipt this Period
 250.00

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

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

1250.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4453

* Earmarked Contribution: See Below

Form/Schedule: SA11AI

Transaction ID: SA11AI.4456

* Earmarked Contribution: See Below

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4459

* Earmarked Contribution: See Below

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 44 OF 60
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. Julia R. Swords		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 27 / 2014
Mailing Address 2596 Iron Works Rd		Transaction ID : SA11AI.4462
City Georgetown	State KY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Writer	Contribution by Check
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Paul Vissman		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2014
Mailing Address 2541 Ransdell Ave		Transaction ID : SA11AI.4464
City Louisville	State KY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	Contribution by Check
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	8119.17

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

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NAME OF COMMITTEE (In Full)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
RONALD ALLEN LEACH

Mailing Address 62 MERION COURT

City: BRANDENBURG State: KY Zip Code: 40108

FEC ID number of contributing federal political committee: **C H4KY02089**

Name of Employer: U.S. ARMY Occupation: P.A. CIVILIAN CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 01 / 06 / 2014

Transaction ID : SA11D.4466

Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
RONALD ALLEN LEACH

Mailing Address 62 MERION COURT

City: BRANDENBURG State: KY Zip Code: 40108

FEC ID number of contributing federal political committee: **C H4KY02089**

Name of Employer: U.S. ARMY Occupation: P.A. CIVILIAN CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4500.00

Date of Receipt: 02 / 04 / 2014

Transaction ID : SA11D.4467

Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
RONALD ALLEN LEACH

Mailing Address 62 MERION COURT

City: BRANDENBURG State: KY Zip Code: 40108

FEC ID number of contributing federal political committee: **C H4KY02089**

Name of Employer: U.S. ARMY Occupation: P.A. CIVILIAN CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4550.00

Date of Receipt: 02 / 05 / 2014

Transaction ID : SA11D.4468

Amount of Each Receipt this Period: 50.00

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

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

4550.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4466

* In-Kind: In Kind Contribution -- See Memo'd Disbursements

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

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NAME OF COMMITTEE (In Full)
Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial)
RONALD ALLEN LEACH

Mailing Address **62 MERION COURT**

City **BRANDENBURG** State **KY** Zip Code **40108**

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer **U.S. ARMY** Occupation **P.A. CIVILIAN CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5300.00

Date of Receipt
03 / 14 / 2014

Transaction ID : SA11D.4469

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
RONALD ALLEN LEACH

Mailing Address **62 MERION COURT**

City **BRANDENBURG** State **KY** Zip Code **40108**

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer **U.S. ARMY** Occupation **P.A. CIVILIAN CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6608.23

Date of Receipt
03 / 31 / 2014

Transaction ID : SA11D.4470

Amount of Each Receipt this Period
1308.23

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

2058.23

6608.23

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

Form/Schedule: SA11D

Transaction ID : SA11D.4470

* In-Kind: Mileage

Form/Schedule:

Transaction ID:

**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 49 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 70.92
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 22.32
City Cambridge	State MA	
Zip Code 02238-2110		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	112.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 5.34 Transaction ID : SB17.4479
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

Full Name (Last, First, Middle Initial) B. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 23.13 Transaction ID : SB17.4480
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 4.74 Transaction ID : SB17.4481
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name Ron Leach for Congress Campaign Committee		
Office Sought: <input checked="" 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: KY	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	33.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 60	
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 26.25
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : SB17.4482
Candidate Name Ron Leach for Congress Campaign Committee	Category/Type	
Office Sought: <input checked="" 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: KY District: 02		

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2014
Mailing Address 2050 N Dixie Hwy		Amount of Each Disbursement this Period 869.17
City Elizabethtown	State KY	
Zip Code 42701-9495	Purpose of Disbursement Office Materials -- See In Kind Contribution from Kelly Longenecker on 01/05/2014	Transaction ID : SB17.4484
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Campaign Finance Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 33 R St NW		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20001-1119	Purpose of Disbursement Finance Consultant Fee - See In Kind Contribution from Candidate on 1/06/2014	Transaction ID : SB17.4486
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	26.25
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.4484

*

Form/Schedule: SB17

Transaction ID: SB17.4486

*

**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 53 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. Ms Theresa Drake		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address P.O. Box 443		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4487
City Vine Grove	State KY	
Purpose of Disbursement Treasurer Contract Fee		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. Farley Printing		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 434.96 Transaction ID : SB17.4489
City Louisville	State KY	
Purpose of Disbursement Campaign Promotional Materials		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) c. Farley Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 565.50 Transaction ID : SB17.4490
City Louisville	State KY	
Purpose of Disbursement Campaign Promotional Materials		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: _____	

SUBTOTAL of Disbursements This Page (optional).....	1250.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. Farley Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 258.66
City Louisville	State KY	
Zip Code 40203-3319	Purpose of Disbursement Remit Envelopes	Transaction ID : SB17.4491
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. Jennifer Leach		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 115 Rolling Trail		Amount of Each Disbursement this Period 416.00
City Brandenburg	State KY	
Zip Code 40108	Purpose of Disbursement Administrative Fees	Transaction ID : SB17.4492
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jennifer Leach		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 115 Rolling Trail		Amount of Each Disbursement this Period 276.00
City Brandenburg	State KY	
Zip Code 40108	Purpose of Disbursement Administrative Fees	Transaction ID : SB17.4493
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	950.66
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. Jennifer Leach		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 115 Rolling Trail		Amount of Each Disbursement this Period 218.53 Transaction ID : SB17.4494
City Brandenburg	State KY	
Purpose of Disbursement Administrative Fees		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. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4495
City Brandenburg	State KY	
Purpose of Disbursement In Kind Contribution -- See Memo'd Disbursements		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) c. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 1308.23 Transaction ID : SB17.4496
City Brandenburg	State KY	
Purpose of Disbursement Mileage		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: _____	

SUBTOTAL of Disbursements This Page (optional).....	4026.76
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4495

* In-Kind Received

Form/Schedule: SB17

Transaction ID: SB17.4496

* In-Kind Received

**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 57 OF 60			
	<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)
Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial) A. Kelly Longenecker		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2014
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 869.17 Transaction ID : SB17.4497
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Office Materials	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. Kelly Longenecker		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4498
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Event Tickets	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) c. Splash Digital		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 455 S 4th St. Ste 444		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4499
City Louisville	State KY	
Zip Code 40202	Purpose of Disbursement Website Management	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:	

SUBTOTAL of Disbursements This Page (optional).....	1669.17
TOTAL This Period (last page this line number only).....	8069.50

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4497

* In-Kind Received

Form/Schedule: SB17

Transaction ID: SB17.4498

* In-Kind Received

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 59 OF 60
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Finance Group, Inc.	Nature of Debt (Purpose): Finance Consultant Fee
Mailing Address 33 R. St., NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4617	
Amount Incurred This Period 4329.63	Payment This Period 0.00	Outstanding Balance at Close of This Period 4329.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Finance Group, Inc.	Nature of Debt (Purpose): Finance Consultant Fee
Mailing Address 33 R. St., NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4619	
Amount Incurred This Period 3500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ms Theresa Drake	Nature of Debt (Purpose): Treasurer Fee
Mailing Address P.O. Box 443	
City State Zip Code Vine Grove KY 40175	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4621	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

1) SUBTOTALS This Period This Page (optional)	8079.63
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Ron Leach for Congress Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ms Theresa Drake

Mailing Address P.O. Box 443

City State Zip Code
Vine Grove KY 40175

Nature of Debt (Purpose):
Treasurer Fee

Outstanding Balance Beginning This Period **Transaction ID : SD10.4623**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="250.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="8329.63"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="8329.63"/>