

**LEIBHAM FOR CONGRESS**

3618 River Ridge Drive  
Sheboygan, WI 53083

RECEIVED  
FEC MAIL CENTER

2015 APR 20 AM 7:53

April 13, 2015

Federal Election Commission  
Reports Analysis Division  
999 E Street, NW  
Washington, DC 20463

RE: C00562496- "Leibham for Congress"


To whom it may concern,

Please accept this letter as notice that I intend to terminate the above referenced campaign committee upon the Commission's approval of the enclosed Termination Report. Even though this committee was required to file electronically for calendar year 2014, I ask that the Commission accept this paper filing because I believe this Committee now meets the following requisite criteria for paper filing: 1) had less than \$50,000 in net debts outstanding as of January 1, 2015; 2) is terminating prior to the next election year; 3) supports a candidate who has not qualified for the next election and does not intend to become a candidate in the next election.

Pursuant to Commission regulations, I will continue to file quarterly reports until receiving notice that this request for termination has been accepted.

Please also accept this letter as notice that I forgive the balance of the loan of my personal funds made to the Leibham for Congress Committee. I hereby forgive \$4,845.91, which is the outstanding balance of the loan as of this termination report.

Sincerely,



**Joe Leibham**

920-627-2760

UNRECORDED COPY

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED  
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2015 APR 20 AM 7:53  
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)

3618 RIVER RIDGE DRIVE

Check if different than previously reported. (ACC)

SHEBOYGAN WI 53083-2649

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00562496

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

STATE ▼ DISTRICT

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 MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period

01/01/2015 through 03/31/2015

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*

Date 04/13/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

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

SUMMARY PAGE  
of Receipts and Disbursements

Write or Type Committee Name

LEIBHAM FOR CONGRESS

Report Covering the Period: From:

01 / 01 / 2015

To:

03 / 31 / 2015

	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)) ....	0.00	2,000.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0.00	1,800.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	651.00	1,554.58
(b) Total Offsets to Operating Expenditures (from Line 14) .....	744.00	744.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	93.00	810.58
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	0.00	
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) .....	4,845.91	

For further information contact:

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3/8

Write or Type Committee Name

**LEIBHAM FOR CONGRESS**

Report Covering the Period: From:

01 / 01 / 2015

To:

03 / 31 / 2015

**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).....

0.00

0.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

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

0.00

2,000.00

(d) The Candidate.....

0.00

0.00

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

0.00

2,000.00

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.).....

744.00

744.00

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)..... ▶

744.00

2,744.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4/8

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	651.00	1,554.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	1,154.09	5,154.09
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	1,154.09	5,154.09
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(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	200.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1,805.09	6,908.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1,061.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	744.00
25. SUBTOTAL (add Line 23 and Line 24).....	1,805.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1,805.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 **5** OF **8**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LEIBHAM FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SOCIETY INSURANCE**

Mailing Address  
**PO BOX 1237**

City **FOND DU LAC** State **WI** Zip Code **54936-1237**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**744.00**

Date of Receipt  
**02 / 25 / 2015**

Amount of Each Receipt this Period  
**744.00**

**REBATE OF UNUSED  
WORKER'S COMPENSATION  
INSURANCE**

**B.** 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

**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).....

**744.00**

**744.00**

**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)			
	<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)

**A. COMMUNITY BANK + TRUST**

Date of Disbursement: **01 / 01 / 2015**

Mailing Address: **PO BOX 1409**

City: **SHEBOYGAN** State: **WI** Zip Code: **53082-1409**

Purpose of Disbursement: **BANKING FEE** Category/Type: **001**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: **2014**  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: **1.00**

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement: **01 / 31 / 2015**

Mailing Address: **205 PENNSYLVANIA AVE SE**

City: **WASHINGTON** State: **DC** Zip Code: **20003-1164**

Purpose of Disbursement: **COMPUTER SOFTWARE** Category/Type: **001**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: **2014**  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: **650.00**

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_ Category/Type: \_\_\_\_\_

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: \_\_\_\_\_  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional) ..... **651.00**

**TOTAL** This Period (last page this line number only) ..... **651.00**

LAWRENCE

**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 7 OF 8

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LEIBHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JOE LEIBHAM**

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2015

Mailing Address **3618 RIVER RIDGE DR.**

Amount of Each Disbursement this Period

1,154.09
----------

City **SHEBOYGAN**

State **WI**

Zip Code **53083-2649**

Purpose of Disbursement

**LOAN REPAYMENT - PERSONAL LOAN**

**0.09**

Candidate Name

**JOE LEIBHAM**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: **2014**  
 Primary  General  
 Other (specify)

State: **WI** District: **06**

Full Name (Last, First, Middle Initial)

**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

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C.**

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

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

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

1,154.09
----------

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

1,154.09
----------



**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE **8** OF **8**

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
**LEIBHAM FOR CONGRESS**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**JOE LEIBHAM [PERSONAL FUNDS]**

Election: **2014**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**3618 RIVER RIDGE DR.**

City State ZIP Code  
**SHEBOYGAN WI 53083-2649**

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
**10,000.00 5,154.09 4,845.91**

TERMS Date Incurred Date Due Interest Rate Secured:  
**06 / 30 / 2014 M M / D D / NONE 0.00 % (apr)  Yes  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 type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)..... ▶ **4,845.91**

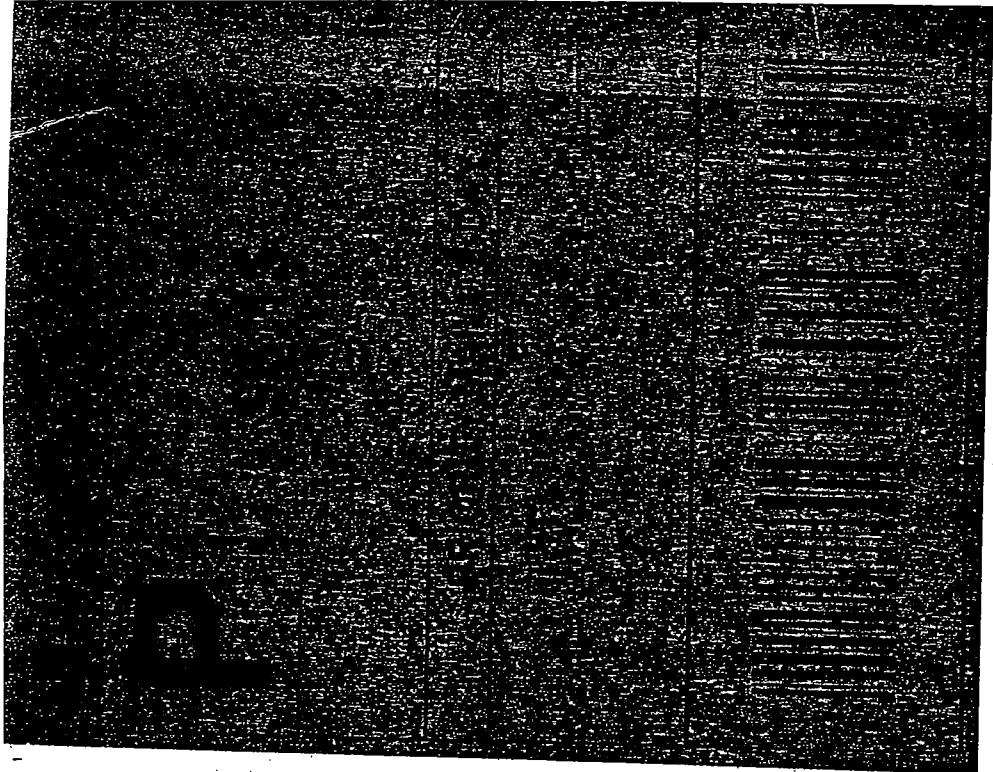
**TOTALS** This Period (last page in this line only)..... ▶ **4,845.91**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FROM: 12/11/11 10:00 AM

100 Bridge Drive  
New York, NY 10033

100-241-4250-4



RECEIVED  
FEC MAIL CENTER  
2015 APR 20 AM 7:53

Federal Election Commission  
999 ~~Mass~~ E. STREET, NW  
WASHINGTON DC, 20463

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
4/14/15

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JB  
 PREPARER

4/20/15  
 DATE PREPARED

1100011410015