

# 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

Gibbs for Congress

ADDRESS (number and street)

13871 TR 473

Check if different than previously reported. (ACC)

Lakeville

OH

44638

2. FEC IDENTIFICATION NUMBER ▼

C C00466516

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

07

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

05

06

2014

in the State of

OH

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2014

through

04

16

2014

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

Type or Print Name of Treasurer Jody Gibbs

Signature of Treasurer Jody Gibbs

[Electronically Filed]

Date

04

21

2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

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

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	1000.00	758475.06
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	12500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1000.00	745975.06
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	8147.50	356980.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	109.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8147.50	356871.13
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	691287.70	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	10000.00	

**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

**Gibbs 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).....	0.00	239750.00
(ii) Unitemized.....	0.00	19654.65
(iii) TOTAL of contributions from individuals ▶	0.00	259404.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	499070.41
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1000.00	758475.06
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	38672.69
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	109.78
<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>	1000.00	797257.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8147.50	356980.91
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	7500.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	7500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	12500.00
(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	12500.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8147.50	376980.91

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	698435.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1000.00
25. SUBTOTAL (add Line 23 and Line 24).....	699435.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8147.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	691287.70

**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 11
	<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	

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)  
**Gibbs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Snake River Sugar Company PAC**

Mailing Address 1951 S Saturn Way, Suite 100

City Boise State ID Zip Code 83709

FEC ID number of contributing federal political committee. **C** C00326389

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 Y Y  
 04 / 16 / 2014

**Transaction ID : 0001836**

Amount of Each Receipt this Period  
1000.00

**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  
 M M / D D / Y Y Y Y Y Y

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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**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 6 OF 11			
	<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)  
**Gibbs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bogart and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014		
Mailing Address 217 3rd St. SE			Amount of Each Disbursement this Period 3000.00		
City Washington	State DC	Zip Code 20003	Transaction ID : 0001840		
Purpose of Disbursement Consulting - Fundraising		003 Category/ Type			
Candidate Name					
Office Sought:	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. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014		
Mailing Address 777 Big Timber Road			Amount of Each Disbursement this Period 342.95		
City Elgin	State IL	Zip Code 60123	Transaction ID : 0001837		
Purpose of Disbursement Internet/Phone Services		001 Category/ Type			
Candidate Name					
Office Sought:	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. Bogart and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014		
Mailing Address 217 3rd St. SE			Amount of Each Disbursement this Period 215.21		
City Washington	State DC	Zip Code 20003	Transaction ID : 0001838		
Purpose of Disbursement Reimbursement		001 Category/ Type			
Candidate Name					
Office Sought:	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) .....	3558.16
<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 7 OF 11			
	<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)  
**Gibbs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bogart and Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 217 3rd St. SE			Amount of Each Disbursement this Period 664.00
City Washington	State DC	Zip Code 20003	Transaction ID : 0001839
Purpose of Disbursement Reimbursement		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. Stoneridge Group</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 4400 N Point Pkwy # 190			Amount of Each Disbursement this Period 19.95
City Alpharetta	State GA	Zip Code 30022	Transaction ID : 0001841
Purpose of Disbursement Website Related		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. Friends of Dave Joyce</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 320 Kenarden Drive			Amount of Each Disbursement this Period 2000.00
City Richmond Heights	State OH	Zip Code 44143	Transaction ID : 0001848
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name <b>Friends of Dave Joyce</b>			
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).....	2683.95
<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 8 OF 11			
	<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)  
**Gibbs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lorain County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 457 1/2 Griswold Rd		Amount of Each Disbursement this Period 105.00
City Elyria	State OH	Zip Code 44035
Purpose of Disbursement Lincoln Day Tickets	Category/Type 001	
Candidate Name	Transaction ID : 0001842	
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. Robert B Gibbs</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 13871 Tr 473		Amount of Each Disbursement this Period 146.69
City Lakeville	State OH	Zip Code 44638
Purpose of Disbursement Reimbursement	Category/Type 001	
Candidate Name	Transaction ID : 0001849	
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:	ITEMIZATION BELOW	

Full Name (Last, First, Middle Initial) <b>c. Wall Street Journal</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 1211 Avenue of the Americas		Amount of Each Disbursement this Period 22.99
City New York	State NY	Zip Code 10036
Purpose of Disbursement Subscription Fee	Category/Type 001	
Candidate Name	Transaction ID : 0001849-0001	
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:	[MEMO ITEM] MEMO	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	251.69
<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 9 OF 11
	<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)  
**Gibbs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert B Gibbs</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 13871 Tr 473		Amount of Each Disbursement this Period 256.50 <b>Transaction ID : 0001843</b>
City Lakeville	State OH	
Zip Code 44638	Purpose of Disbursement Reimbursement - Federal Mileage	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. Bogart and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 217 3rd St. SE		Amount of Each Disbursement this Period 34.60 <b>Transaction ID : 0001844</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement 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. TransFirst</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 3131 S. Vaughn Way Suite 350		Amount of Each Disbursement this Period 332.60 <b>Transaction ID : 0001845</b>
City Aurora	State CO	
Zip Code 80014	Purpose of Disbursement Banking Expenses	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).....	623.70
<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 10 OF 11
	<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)  
**Gibbs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shanna E Schlabach</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 10375 Private Road 275		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 0001846</b>
City Millersburg	State OH	
Zip Code 44654	Purpose of Disbursement Consulting	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. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : 0001847</b>
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Website Related	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.</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).....	1030.00
<b>TOTAL</b> This Period (last page this line number only).....	8147.50

**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)

**Gibbs for Congress**

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

Ohio Political Network

Nature of Debt (Purpose):

Consulting - Media Strategy

Mailing Address PO Box 21383

City State

Zip Code

Columbus

OH

43221

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 6500-

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

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) .....

10000.00

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

10000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

10000.00