

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Ron Leach for Congress Campaign Committee

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8475.38	17176.67
(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)).....	8475.38	17176.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14530.74	36191.59
(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)).....	14530.74	36191.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2635.08	
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).....	23600.00	

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

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).....	450.00	5768.72
(ii) Unitemized.....	1180.00	3040.00
(iii) TOTAL of contributions from individuals ▶	1630.00	8808.72
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	6845.38	8367.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8475.38	17176.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	2000.00	21600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	2000.00	21600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	50.00	50.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10525.38	38826.67

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14530.74	36191.59
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) ►	14530.74	36191.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6640.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10525.38
25. SUBTOTAL (add Line 23 and Line 24).....	17165.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14530.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2635.08

**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 22
	<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)
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: 350.00

Date of Receipt: 07 / 12 / 2013

Transaction ID : VN8P9AC9RD7

Amount of Each Receipt this Period: 100.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: C C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 900.00

Date of Receipt: 07 / 18 / 2013

Transaction ID : VN8P9AC9RD7E

Amount of Each Receipt this Period: 100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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: UPS Occupation: Aircraft Mechanic

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 09 / 30 / 2013

Transaction ID : VN8P9B42DJ8

Amount of Each Receipt this Period: 100.00

* Earmarked Contribution: See Below

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
	<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 **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

Transaction ID : VN8P9B42DJ8E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Charles Leach

Mailing Address **3324 Panhandle Rd**

City **Lynchburg** State **OH** Zip Code **45142-9361**

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 _____
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 12 / 2013

Transaction ID : VN8P9AC9RF2

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2013

Transaction ID : VN8P9AC9RF2E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

250.00

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 09 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44KF0
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 1600.00
Name of Employer Retired	Occupation Retired	* In-Kind: Website Management
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3122.57	

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 19 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44FN8
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	* In-Kind: Ticket Fee: KY Labor Conference
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3372.57	

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44CV1
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 213.58
Name of Employer Retired	Occupation Retired	* In-Kind: Stationery
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3586.15	

SUBTOTAL of Receipts This Page (optional).....	2063.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
	<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)
Ron Leach

Mailing Address 62 Merion Ct

City State Zip Code
Brandenburg KY 40108-7102

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5589.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2013

Transaction ID : VN8P9B44FB3

Amount of Each Receipt this Period
1600.00

* In-Kind: Website Management

B. Full Name (Last, First, Middle Initial)
Ron Leach

Mailing Address 62 Merion Ct

City State Zip Code
Brandenburg KY 40108-7102

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5589.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2013

Transaction ID : VN8P9B44FQ4

Amount of Each Receipt this Period
93.26

* In-Kind: Office Supplies

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

Mailing Address 62 Merion Ct

City State Zip Code
Brandenburg KY 40108-7102

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5589.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2013

Transaction ID : VN8P9B44G05

Amount of Each Receipt this Period
310.14

* In-Kind: Lodging: KY Labor Conference

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

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

2003.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<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

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44F98
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 25.33
Name of Employer Retired	Occupation Retired	* In-Kind: Online Advertising
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5614.88	

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44CG5
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 2733.50
Name of Employer Retired	Occupation Retired	* In-Kind: Mileage Expenses
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8367.95	

Full Name (Last, First, Middle Initial) Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B44F80
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 19.57
Name of Employer Retired	Occupation Retired	* In-Kind: Online Advertising
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8367.95	

SUBTOTAL of Receipts This Page (optional).....	2778.40
TOTAL This Period (last page this line number only).....	6845.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<input type="checkbox"/> 11a 12 <input checked="" 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. Ron Leach		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 16 / 2013
Mailing Address 62 Merion Ct		Transaction ID : VN8P9B42BQ2
City State Zip Code Brandenburg KY 40108-7102	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C H4KY02089	Name of Employer Occupation Retired Retired	Amount of Each Receipt this Period 21600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 21600.00	

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

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	Amount of Each Receipt this Period
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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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 11 OF 22	
	<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. American Legion Post 9		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 118 W Veterans Blvd		Amount of Each Disbursement this Period 200.00 Transaction ID : VN7Q19M9HR5
City Owensboro State KY Zip Code 42303-4103	Purpose of Disbursement Facility Rental Fee	
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. Lacey Connelly		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 6675 Brandenburg Rd Apt 4		Amount of Each Disbursement this Period 1600.00 Transaction ID : VN7Q19M9HZ0
City Ekron State KY Zip Code 40117-8530	Purpose of Disbursement Reimbursement of Operating Expenditures: See Memos	
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. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1600.00 Transaction ID : VN7Q19M9J58
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database	
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).....	1800.00
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 12 OF 22	
	<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. Lacey Connelly		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2013
Mailing Address 6675 Brandenburg Rd Apt 4		Amount of Each Disbursement this Period 294.48 Transaction ID : VN7Q19M9JG5
City Ekron State KY Zip Code 40117-8530	Purpose of Disbursement Reimbursement of Operating Expenditures: See Memos	
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. Lacey Connelly		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2013
Mailing Address 6675 Brandenburg Rd Apt 4		Amount of Each Disbursement this Period 1750.00 Transaction ID : VN7Q19M9JM6
City Ekron State KY Zip Code 40117-8530	Purpose of Disbursement Campaign Management Fee	
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. Theresa Drake		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2013
Mailing Address PO Box 443		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7Q19M9JP2
City Vine Grove State KY Zip Code 40175-0443	Purpose of Disbursement Treasurer Contract Fee	
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).....	2544.48
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 13 OF 22	
	<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 07 / 30 / 2013
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 199.89 Transaction ID : VN7Q19M9JC3
City Louisville State KY Zip Code 40203-3319	Purpose of Disbursement Remit Envelopes	
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. Farley Printing		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2013
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 215.41 Transaction ID : VN7Q19M9JD1
City Louisville State KY Zip Code 40203-3319	Purpose of Disbursement Campaign Promotional Materials	
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. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 1600.00 Transaction ID : VN8P9B44KF01
City Brandenburg State KY Zip Code 40108-7102	Purpose of Disbursement Website Management	
Candidate Name Mr. Ron Leach	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)	* In-Kind Received
State: KY District: 02		

SUBTOTAL of Disbursements This Page (optional).....	2015.30
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 14 OF 22	
	<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. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 250.00 Transaction ID : VN8P9B44FN8I
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Ticket Fee: KY Labor Conference	* In-Kind Received
Candidate Name Mr. Ron Leach	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. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 213.58 Transaction ID : VN8P9B44CV1I
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Stationery	* In-Kind Received
Candidate Name Mr. Ron Leach	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) c. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 1600.00 Transaction ID : VN8P9B44FB3I
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Website Management	* In-Kind Received
Candidate Name Mr. Ron Leach	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	

SUBTOTAL of Disbursements This Page (optional).....	2063.58
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 15 OF 22			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 93.26
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Office Supplies	Transaction ID : VN8P9B44FQ4I
Candidate Name Mr. Ron Leach	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)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) B. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 310.14
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Lodging: KY Labor Conference	Transaction ID : VN8P9B44G05I
Candidate Name Mr. Ron Leach	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)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) c. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 25.33
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Online Advertising	Transaction ID : VN8P9B44F98I
Candidate Name Mr. Ron Leach	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)	* In-Kind Received
State: KY	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	428.73
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 16 OF 22			
	<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. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 2733.50 Transaction ID : VN8P9B44CG5I
City Brandenburg	State KY	
Purpose of Disbursement Mileage Expenses		Category/ Type
Candidate Name Mr. Ron Leach		
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)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) B. Ron Leach		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 19.57 Transaction ID : VN8P9B44F80I
City Brandenburg	State KY	
Purpose of Disbursement Online Advertising		Category/ Type
Candidate Name Mr. Ron Leach		
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)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2013
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 450.00 Transaction ID : VN7Q19M9J74
City Washington	State DC	
Purpose of Disbursement Database		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).....	3203.07
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 17 OF 22			
	<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. Splash Digital		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 455 S 4th St		Amount of Each Disbursement this Period 1600.00 Transaction ID : VN7Q19M9JR8
City Louisville	State KY	
Zip Code 40202-2593	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:	

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 636 High St		Amount of Each Disbursement this Period 65.00 Transaction ID : VN7Q19M9J99
City Brandenburg	State KY	
Zip Code 40108-9998	Purpose of Disbursement Postage	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. Veterans of Foreign War Post 10281		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 299 Briggs Ln		Amount of Each Disbursement this Period 375.00 Transaction ID : VN7Q19M9HA5
City Vine Grove	State KY	
Zip Code 40175-9418	Purpose of Disbursement Facility Rental 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:	

SUBTOTAL of Disbursements This Page (optional).....	2040.00
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 18 OF 22	
	<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. Veterans of Foreign War Post 1298		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 1965 Kentucky 185		Amount of Each Disbursement this Period 250.00
City State Zip Code Bowling Green KY 42101	Purpose of Disbursement Facility Rental Fee	
Candidate Name	Category/Type	Transaction ID : VN7Q19M9HG2
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.		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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) 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: <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:		

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	14345.16

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ron Leach for Congress Campaign Committee** Transaction ID : VN8P9A2X2Y8L

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
Ron Leach Primary
 Mailing Address 62 Merion Ct General
 Other (specify) ▼

City State ZIP Code
 Brandenburg KY 40108-7102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M 04 / D 01 / Y 2013 M M / D D / Y none % (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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 100.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ron Leach for Congress Campaign Committee** Transaction ID : VN8P9A2X2Z6L

LOAN SOURCE Full Name (Last, First, Middle Initial) Ron Leach	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 62 Merion Ct		

City	State	ZIP Code
Brandenburg	KY	40108-7102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
19500.00	0.00	19500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 20 / Y 2013 Y	M M / D D / Y none Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	19500.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ron Leach for Congress Campaign Committee** Transaction ID : VN8P9B42BQ2L

LOAN SOURCE Full Name (Last, First, Middle Initial) Ron Leach	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 62 Merion Ct		

City	State	ZIP Code
Brandenburg	KY	40108-7102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 16 / 2013	none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	2000.00
TOTALS This Period (last page in this line only).....	21600.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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 Lacey Connelly	Nature of Debt (Purpose): Campaign Management Fee
Mailing Address 6675 Brandenburg Rd Apt 4	
City State Zip Code Ekron KY 40117-8530	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : VN5RH9H67F4
Amount Incurred This Period <input style="width:100%;" type="text" value="1750.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1750.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Theresa Drake	Nature of Debt (Purpose): Treasurer Contract Fee
Mailing Address PO Box 443	
City State Zip Code Vine Grove KY 40175-0443	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : VN5RH9H67G2
Amount Incurred This Period <input style="width:100%;" type="text" value="250.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="250.00"/>	

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 <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="2000.00"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text" value="2000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="21600.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="23600.00"/>