

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Leadership That Listens PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="644.25"/>	<input type="text" value="644.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4336.19"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9000.00"/>	<input type="text" value="64179.67"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="13336.19"/>	<input type="text" value="64823.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2649.00"/>	<input type="text" value="54136.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10687.19"/>	<input type="text" value="10687.19"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

Leadership That Listens PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	30500.00
(ii) Unitemized	0.00	1179.67
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2000.00	31679.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	32500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9000.00	64179.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	9000.00	64179.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9000.00	64179.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2649.00	6636.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2649.00	6636.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	1000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	46500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2649.00	54136.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2649.00	54136.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9000.00	64179.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9000.00	64179.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2649.00	6636.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2649.00	6636.73

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 10
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Leadership That Listens PAC

Full Name (Last, First, Middle Initial) A. Mr. Michael Kieschnick		Date of Receipt MM / DD / YYYY 09 / 03 / 2012 Transaction ID : SA11AI.5167
Mailing Address 1467 Hamilton		Amount of Each Receipt this Period 1000.00 campaign contribution
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1000.00	
Name of Employer Credo Mobile	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Michael Kieschnick		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : SA11AI.5170
Mailing Address 1467 Hamilton		Amount of Each Receipt this Period 1000.00 Campaign Contribution
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 2000.00	
Name of Employer Credo Mobile	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Leadership That Listens PAC

A. BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1370 ONTARIO STREET
 City CLEVELAND State OH Zip Code 44113
 FEC ID number of contributing federal political committee. **C** C70004908
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 25 / 2012
Transaction ID : SA11C.5163
 Amount of Each Receipt this Period 1000.00
 PAC Contribution

B. CWA - COPE PCC
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 3rd Street NW
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2012
Transaction ID : SA11C.5165
 Amount of Each Receipt this Period 1000.00
 PAC Contribution

C. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 M STREET, NW SUITE 540
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00130773
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 11 / 2012
Transaction ID : SA11C.5162
 Amount of Each Receipt this Period 2500.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 10
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Leadership That Listens PAC

A. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 1850 M STREET, NW
SUITE 540
City WASHINGTON State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00130773
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2012
Transaction ID : SA11C.5160
Amount of Each Receipt this Period
2500.00
PAC Contribution

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) ▼
Aggregate Year-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) ▼
Aggregate Year-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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	7000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. Box 382110

City Cambridge State ME Zip Code 02238-2110

Purpose of Disbursement fundraising expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 03 / 2012

Transaction ID : SB21B.5168

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address P.O. Box 382110

City Cambridge State ME Zip Code 02238-2110

Purpose of Disbursement Fundraising Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.5171

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Mr. Jeremiah B Pope

Mailing Address 10503 Sweetbriar Parkway

City Silver Spring State MD Zip Code 20903

Purpose of Disbursement Consulting Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2012

Transaction ID : SB21B.5156

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jeremiah B Pope

Mailing Address 10503 Sweetbriar Parkway

City Silver Spring State MD Zip Code 20903

Purpose of Disbursement
Consulting Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5158

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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