

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2012 APR 18 AM 11:17 Office Use Only

FEC MAIL CENTER 12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

Nina Hayden for Congress

ADDRESS (number and street)

2150 1st Ave South

Suite 2

Check if different than previously reported. (ACC)

St. Petersburg

FL

33712-

2. FEC IDENTIFICATION NUMBER

C00514950

3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE STATE DISTRICT

IS THIS REPORT [X] NEW (N) OR [] AMENDED (A)

FL 10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1) [X]
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 2012 through 03 31 2012

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

Nina Hayden

Signature of Treasurer

[Handwritten Signature]

Date

MM/DD/YYYY

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

Table with 10 columns and 1 row for Office Use Only.

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Nina Hayden for Congress

Report Covering the Period: From:

07 01 2012

To:

03 31 2012

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))....
- (b) Total Contribution Refunds (from Line 20(d)).....
- (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....

13,424.00
0
13,424.00

13,424.00
0
13,424.00

7. Net Operating Expenditures

- (a) Total Operating Expenditures (from Line 17).....
- (b) Total Offsets to Operating Expenditures (from Line 14).....
- (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....

509.89
0
509.89

509.89
0
509.89

8. Cash on Hand at Close of Reporting Period (from Line 27).....

13,014.11

9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....

0

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....

100.00

For further information contact:

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

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

12030784261

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Nina Hayden for Congress

Report Covering the Period: From:

01 / **01** / **2012**

To:

03 / **31** / **2012**

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

7633.00
5781.00
13424.00
~~00~~
~~00~~
~~000~~
13424.00

7633.00
5781.00
13414.00
~~00~~
~~00~~
~~00~~
13424.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

~~0~~

~~0~~

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

100.00
~~00~~
100.00

100.00
~~00~~
100.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

~~00~~

~~00~~

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

~~00~~

~~00~~

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

13524.00

13524.00

12030784252

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	509.89	509.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	509.89	509.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13,524.00
25. SUBTOTAL (add Line 23 and Line 24).....	13,524.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	509.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13,014.11

12030784263

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

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

FOR LINE NUMBER: PAGE 1 OF 9

11a 11b 11c 11d
 12 13a 13b 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)

Nina Hayden for Congress

Full Name (Last, First, Middle Initial)

A. Dragonetti, Philip G.

Mailing Address

9412 Tradewinds Ave Sem

City

Seminole

State

FL

Zip Code

33776

FEC ID number of contributing federal political committee.

C

Name of Employer

McFarland Covid, etc...

Occupation

Attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

03 21 2012

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Yeazell & Sweet PA

Mailing Address

1901 Umerton Rd. Suite 435

City

Clearwater

State

FL

Zip Code

33762

FEC ID number of contributing federal political committee.

C

Name of Employer

Yeazell Sweet

Occupation

Lawyer

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 20 2012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Sweet, Lavinie

Mailing Address

1964 Laughing Gull Lane #1321

City

Clearwater

State

FL

Zip Code

33762

FEC ID number of contributing federal political committee.

C

Name of Employer

Yeazell Sweet

Occupation

Lawyer

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

03 30 2012

Amount of Each Receipt this Period

25.00

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

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

475.00

12030784264

**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 2 OF 9	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nina Hayden for Congress

A. Full Name (Last, First, Middle Initial)
Sweet, Lane

Mailing Address
1964 Laughing Gull Lane #1321

City
Clearwater State
FL Zip Code
33762

FEC ID number of contributing federal political committee.
C

Name of Employer
Yeazell Sweet Occupation
Lawyer

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
03 15 2012

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Guetler, Marion

Mailing Address
6300 30th Aven

City
St. Petersburg State
FL Zip Code
33710

FEC ID number of contributing federal political committee.
C

Name of Employer
Bayfront Occupation
Nurse

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
358.60

Date of Receipt
03 17 2012

Amount of Each Receipt this Period
25.00

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

Mailing Address
6300 30th Ave

City
St. Petersburg State
FL Zip Code
33710

FEC ID number of contributing federal political committee.
C

Name of Employer
Bayfront Occupation
Nurse

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
358.00

Date of Receipt
03 23 2012

Amount of Each Receipt this Period
133.00

SUBTOTAL of Receipts This Page (optional).....
358.00

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: PAGE **3** OF **9**
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Nina Hayden for Congress

Full Name (Last, First, Middle Initial)

A. *Guetter, Marion*

Mailing Address

6300 30th Ave N

City

St. Petersburg

State

FL

Zip Code
33710

FEC ID number of contributing federal political committee.

C

Name of Employer

Dayfort

Occupation

Nurse

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

358 00

Date of Receipt

03 25 2017

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. *Nugent, Rafael*

Mailing Address

1401 66th Ave S.

City

St. Petersburg

State

FL

Zip Code
33705

FEC ID number of contributing federal political committee.

C

Name of Employer

self employed

Occupation

designer

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

03 25 2012

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. *Eric Boris*

Mailing Address

2550 25th Ave North

City

St. Petersburg

State

FL

Zip Code
33713

FEC ID number of contributing federal political committee.

C

Name of Employer

self employed

Occupation

Mechanic

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

03 26 2012

Amount of Each Receipt this Period

200.00

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

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

600.00

12030784266

**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 4 OF 9

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

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NAME OF COMMITTEE (In Full)

Nina Hayden for Congress

Full Name (Last, First, Middle Initial)

A. Gerdes, Charles W.

Mailing Address

6459 - 29th Ave N

City

St. Petersburg

State

FL

Zip Code

33710

FEC ID number of contributing federal political committee.

C

Name of Employer

KVRG Law

Occupation

lawyer

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 30 2012

Amount of Each Receipt this Period

250.00

B. Jensen, Julie M

Mailing Address

52 Dolphin Drive

City

Treasure Island

State

FL

Zip Code

33706

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

retired

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 29 2012

Amount of Each Receipt this Period

250.00

C. Westphal, Steve

Mailing Address

300 Beach Drive NE

City

St. Petersburg

State

FL

Zip Code

33701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 30 2012

Amount of Each Receipt this Period

500.00

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

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

1,000.00

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

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

FOR LINE NUMBER: PAGE **5** OF **9**

(check only one)

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

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NAME OF COMMITTEE (In Full)

Nine Hayden for Congress

Full Name (Last, First, Middle Initial)

A. *Atridge, Robert W.*

Mailing Address

PO Box 1908

City

Tybee Island

State

GA

Zip Code

31328

FEC ID number of contributing federal political committee.

C

Name of Employer

Piedmont Co. Public Defender

Occupation

attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 28 2012

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. *Minnetti, Jeffrey J.*

Mailing Address

1130 Eden Isle Dr. NE

City

St. Petersburg

State

FL

Zip Code

33704

FEC ID number of contributing federal political committee.

C

Name of Employer

Stetson University

Occupation

Professor

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

03 09 2012

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. *Stuth, Marianne*

Mailing Address

904 Lake Palms Drive

City

Largo

State

FL

Zip Code

33771

FEC ID number of contributing federal political committee.

C

Name of Employer

Piedmont Co. Public Defender

Occupation

Legal Assistant

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

03 12 2012

Amount of Each Receipt this Period

200.00

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

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

1000.00

12030734253

**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 9		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nina Hayden For Congress

A. Full Name (Last, First, Middle Initial)
Salmon, Pauline A

Mailing Address
2841 - 1st Ave S

City *St. Petersburg* State *FL* Zip Code *33712*

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

Name of Employer _____ Occupation *Principal*

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
200.00

Date of Receipt
03 / 05 / 2012

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Gadmon, Summer

Mailing Address
915 1st Ave N

City *St. Petersburg* State *FL* Zip Code *33705*

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

Name of Employer *Goldman Wetzal, PLLC* Occupation *lawyer*

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
250.00

Date of Receipt
03 / 07 / 2012

Amount of Each Receipt this Period
250.00

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

Mailing Address
4810 Emerson Ave South

City *St. Petersburg* State *FL* Zip Code *33711*

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

Name of Employer *self employed* Occupation *woodmaker*

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
500.00

Date of Receipt
03 / 07 / 2012

Amount of Each Receipt this Period
500.00

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

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

950.00

12030784269

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

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

FOR LINE NUMBER: PAGE **7** OF **9**
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Nina Hayden For Congress

Full Name (Last, First, Middle Initial)

A. *Cay, Theresa Jean Pierre*

Mailing Address

607 W. O. MLK Blvd, #A

City

Tampa

State

FL

Zip Code

33603

FEC ID number of contributing federal political committee.

C

Name of Employer

self employed

Occupation

attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 29 2012

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. *Lauderback, Franklyn*

Mailing Address

450 Carillon Parkway, #120

City

St. Petersburg

State

FL

Zip Code

33716

FEC ID number of contributing federal political committee.

C

Name of Employer

self employed

Occupation

attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 29 2012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. *McNally, Stacy*

Mailing Address

706 W. Friskey St.

City

Tampa

State

FL

Zip Code

33603

FEC ID number of contributing federal political committee.

C

Name of Employer

Public Defender's Office

Occupation

Attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 22 2012

Amount of Each Receipt this Period

250.00

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

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

1000.00

12030784270

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

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

FOR LINE NUMBER: PAGE 8 OF 9
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nina Hayden for Congress

A. Full Name (Last, First, Middle Initial)
Wynn, Anthony

Mailing Address
1937 Rhododendron Circle

City Lorton State VA Zip Code 22079

FEC ID number of contributing federal political committee. C

Name of Employer Loched Martin Occupation Contractor

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 15 2012

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Fujke, Michael

Mailing Address
2451 N. McMullen Booth Rd. St. 200

City Clewator State FL Zip Code 33759

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
03 14 2012

Amount of Each Receipt this Period
200.00

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

Mailing Address
5223 Park Blvd, #101

City Pineles Park State FL Zip Code 33781

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
03 14 2012

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....
1050.00

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

12050784271

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

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

FOR LINE NUMBER:		PAGE 8 OF 9	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nina Hayden For Congress

A. Full Name (Last, First, Middle Initial)
Nauden III, Melwyn

Mailing Address
3500 Olive Branch Dr.

City
Silver Spring State
MD Zip Code
20904

FEC ID number of contributing federal political committee.
C

Name of Employer
Allegheny East Conference Occupation
Minister

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 30 2012

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jaffer, Tazine

Mailing Address
113 S. Valrico Rd.

City
Valrico State
FL Zip Code
33594

FEC ID number of contributing federal political committee.
C

Name of Employer
self employed Occupation
businesswoman

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
03 30 2012

Amount of Each Receipt this Period
200.00

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

Mailing Address
3951 Sunset Lake Drive

City
Lakeland State
FL Zip Code
33810

FEC ID number of contributing federal political committee.
C

Name of Employer
Bush Ross Occupation
Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
03 30 2012

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....
950.00

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

12030784272

**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 9

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

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NAME OF COMMITTEE (In Full)

Nina Hayden For Congress

Full Name (Last, First, Middle Initial)

Brooks, Mark

Mailing Address

6205 2nd St.

City

Chesapeake Bch

State

MD

Zip Code

20732

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

03 / 31 / 2012

Amount of Each Receipt this Period

250.00

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

MM / DD / YYYY

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

MM / DD / YYYY

Amount of Each Receipt this Period

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

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

250.00

7633.00

12030784273

**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 1 OF 3

<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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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)

Nina Hayden For Congress

Full Name (Last, First, Middle Initial)

A. Pay Pal
Mailing Address 2211 N. 1st St
City San Jose State CA Zip Code 95131
Purpose of Disbursement merchant acct fees
Candidate Name Nina Hayden
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)State: _____ District: _____

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

3.20

003
Category/
Type

B. Pay Pal
Mailing Address 2211 N. 1st St
City San Jose State CA Zip Code 95131
Purpose of Disbursement merch acct. fees
Candidate Name Nina Hayden
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)State: _____ District: _____

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

3.20

003
Category/
Type

C. Pay Pal
Mailing Address 2211 N. 1st St
City San Jose State CA Zip Code 95131
Purpose of Disbursement merch. acct fees
Candidate Name Nina Hayden
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)State: _____ District: _____

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

3.20

003
Category/
Type

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

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

9.60

12030784274

**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 2 OF 3

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

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NAME OF COMMITTEE (In Full)

Nina Hayden For Congress

Full Name (Last, First, Middle Initial)

A. Pay Pal

Mailing Address: 2211 N 1st St

City: San Jose State: CA Zip Code: 95131

Purpose of Disbursement: merch. acct. fees

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

3.20

003
Category/
Type

B. Pay Pal

Mailing Address: 2211 N. 1st St

City: San Jose State: CA Zip Code: 95131

Purpose of Disbursement: merch acct. fees

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

7.55

003
Category/
Type

C. Mity Mo Design

Mailing Address: 433 Central Ave Ste 209

City: St Petersburg FL State: FL Zip Code: 33701

Purpose of Disbursement: printing

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

03 / 29 / 2012

Amount of Each Disbursement this Period

160.00

001
Category/
Type

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

170.75

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

12030784275

**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 **3** OF **3**

<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)
Nina Hayden for Congress

A. Full Name (Last, First, Middle Initial)
Guettler, Marion

Date of Disbursement
03 / 25 / 2012

Mailing Address
6300 30th Ave

City
St. Petersburg State **FL** Zip Code **33710**

Purpose of Disbursement
Food for fundraiser

Candidate Name
Nina Hayden Category/Type **007**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period
133.00

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

Date of Disbursement
M M / D D / Y Y Y Y

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name _____ Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period

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

Date of Disbursement
M M / D D / Y Y Y Y

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name _____ Category/Type

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)..... **133.00**

TOTAL This Period (last page this line number only)..... **313.35**

12090784270

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF 1
FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Nina Hayden For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)
Hayden, Nina L.

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
2150 1st Ave S. Ste 2

City State ZIP Code
St. Petersburg FL 33712

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100.00 0 100.00

TERMS Date Incurred Date Due Interest Rate Secured:
03 01 2012 11 06 2012 0 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source *N/A*

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <i>0</i>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <i>0</i>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <i>0</i>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <i>0</i>

SUBTOTALS This Period This Page (optional)..... *100.00*
TOTALS This Period (last page in this line only)..... *100.00*

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

12030784277

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page 4 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <i>Nina Hayden For Congress</i>	FEC IDENTIFICATION NUMBER 000514950
--	---

LENDING INSTITUTION (LENDER) Full Name <i>N/A</i>	Amount of Loan <i>0</i>	Interest Rate (APR) %
---	----------------------------	--------------------------

Mailing Address	Date Incurred or Established	M M M	D D D	Y Y Y Y Y Y
City	Date Due	M M M	D D D	Y Y Y Y Y Y
State	Zip Code			

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit; chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account: _____
 Address: _____
 City, State, Zip: _____

Date account established: M M M / D D D / Y Y Y Y Y Y

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE M M M / D D D / Y Y Y Y Y Y
---	-------------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE M M M / D D D / Y Y Y Y Y Y
--	-------	-------------------------------------

12030784276

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 1 OF 10
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Nina Hayden for Congress

A. 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	

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)	<input checked="" type="checkbox"/>
2) TOTALS This Period (last page this line number only)	<input checked="" type="checkbox"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	100.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	100.00

12030784279

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

USPS Registered/Certified Postmarked (R/C)
4/12/12

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail 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

Jmp
PREPARER

4/18/12
DATE PREPARED

12030784280