FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
FEC MAIL CENTER
2007 MAY 18 AM 10: 51
Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

ADDRESS (number and street) ▼ 10027 4th Street

☐ Check if different than previously reported. (ACC)

CITY ▲ Highland — STATE ▲ IN — ZIP CODE ▲ 46322 -

2. **FEC IDENTIFICATION NUMBER ▼** C 00357434

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

STATE ▼ IN — DISTRICT 01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- X April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) — General (12G) — Runoff (12R)

Convention (12C) — Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 01 2007 through 03 31 2007

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

Signature or Print Name of Treasurer Mark J. Leyva

Signature of Treasurer Mark J. Leyva Date 05 18 2007

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

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

Report Covering the Period: From: 01/01/2007 To: 03/31/2007

	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))	45.00	45.00
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	45.00	45.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	749.40	749.40
(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	-0-
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	749.40	749.40
8. Cash on Hand at Close of Reporting Period (from Line 27)	721.70	
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)	47,442.70	

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

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

Report Covering the Period: From: 01/01/2007 To: 03/31/2007

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)	45.00	45.00
(ii) Unitemized	-0-	-0-
(iii) TOTAL of contributions from individuals ▶	45.00	45.00
(b) Political Party Committees	-0-	-0-
(c) Other Political Committees (such as PACs)	-0-	-0-
(d) The Candidate	-0-	-0-
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	45.00	45.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	-0-	-0-
13. LOANS:		
(a) Made or Guaranteed by the Candidate	890.00	890.00
(b) All Other Loans	-0-	-0-
(c) TOTAL LOANS (add Lines 13(a) and (b))	890.00	890.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	-0-	-0-
15. OTHER RECEIPTS (Dividends, Interest, etc.)	-0-	-0-
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	935.00	935.00

27031944120

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	749.40	749.40
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) ▶	749.40	749.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	535.52
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	935.00
25. SUBTOTAL (add Line 23 and Line 24)	1,470.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	749.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	721.12

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)
[X] 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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

A.
Full Name (Last, First, Middle Initial): Leyva, Mark J.
Mailing Address: 10027 4th Street
City: Highland State: IN Zip Code: 46322
FEC ID number of contributing federal political committee: C 00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Election Cycle-to-Date: , ,205.00
Date of Receipt: M M 03 / D D 21 / Y Y Y Y 2007
Amount of Each Receipt this Period: , , 45.00
In-Kind
Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C 00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: , ,
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period: , ,
Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C 00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: , ,
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period: , ,
Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ , ,

TOTAL This Period (last page this line number only) ▶ , , 45.00

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

A.
Full Name (Last, First, Middle Initial): U.S. Postal Service
Mailing Address: Highland Post Office
City: Highland State: IN Zip Code: 463229998
Purpose of Disbursement: FEC Postage
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Date of Disbursement: 01/11/2007
Amount of Each Disbursement this Period: 14.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: P.O. Box 15298
City: Wilmington State: DE Zip Code: 19850-5298
Purpose of Disbursement: Camp. Credit Card
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Date of Disbursement: 01/11/2007
Amount of Each Disbursement this Period: 200.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: P.O. Box 15298
City: Wilmington State: DE Zip Code: 19850-5298
Purpose of Disbursement: Camp. Credit card
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Date of Disbursement: 02/05/2007
Amount of Each Disbursement this Period: 200.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 414.40

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

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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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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

NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

A.
Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: P.O. Box 15298
City: Wilmington State: DE Zip Code: 19850-5298
Purpose of Disbursement: Camp. Credit Card
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Date of Disbursement: 03 10 2007
Amount of Each Disbursement this Period: 290.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Leyva, Mark J.
Mailing Address: 10027 4th Street
City: Highland State: IN Zip Code: 46322
Purpose of Disbursement: Camp. Phone
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Election
Date of Disbursement: 03 21 2007
Amount of Each Disbursement this Period: 45.00
In-Kind
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M D D Y Y Y Y
Amount of Each Disbursement this Period:
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 335.00

TOTAL This Period (last page this line number only) ▶ 749.40

SCHEDULE C (FEC Form 3)
LOANS

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

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

NAME OF COMMITTEE (In Full)
COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Leyva, Mark, J.

Mailing Address
10027 4th Street

City: Highland | State: IN | ZIP Code: 46322

Election: [ ] Primary [ ] General [X] Other (specify) ▼ Non-Election

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
, ,200.00	, ,-0- .	, ,200.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 / 11 / 2007	MM / DD / YYYY NONE	. 0 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶ , ,200.00

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.

27050445285

SCHEDULE C (FEC Form 3)
LOANS

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

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

NAME OF COMMITTEE (In Full)
COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Leyva, Mark, J.

Mailing Address
10027 4th Street

City: Highland
State: IN
ZIP Code: 46322

Election:
[ ] Primary
[ ] General
[X] Other (specify) ▼ Non-Election

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
, ,200.00	, ,-0- .	, ,200.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
02 / 05 / 2007	NONE	. 0 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶ , ,200.00

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.

27020442526

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [X] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Leyva, Mark, J.

Mailing Address
10027 4th Street

City: Highland | State: IN | ZIP Code: 46322

Election:
- [ ] Primary
- [ ] General
- [X] Other (specify) ▼ Non-Election

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
, ,200.00	, ,-0- .	, ,200.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM/DD/YYYY 02/08/2007	MM/DD/YYYY NONE	. 0 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶ , ,200,00

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.

27059442227

SCHEDULE C (FEC Form 3)
LOANS

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

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

NAME OF COMMITTEE (In Full)
COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
Leyva, Mark, J.

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

Election: [ ] Primary [ ] General [X] Other (specify) ▼ Non-Election

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
, ,290.00	, ,-0- .	, ,290.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate	Secured:
03/06/2007	NONE	0 % (apr)	[ ] Yes [X] 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) ▶ , ,890.00

TOTALS This Period (last page in this line only) ▶ , 26,890.00

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

27034432988

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)

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor: Leyva, Mark J.

Mailing Address: 10027 4th Street

City: Highland State: IN Zip Code: 46322

Nature of Debt (Purpose): Campaign Debt

Outstanding Balance Beginning This Period: 21,242.70

Amount Incurred This Period: -0-

Payment This Period: 690.00

Outstanding Balance at Close of This Period: 20,552.70

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

Mailing Address:

City: State: Zip Code:

Nature of Debt (Purpose):

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:

Mailing Address:

City: State: Zip Code:

Nature of Debt (Purpose):

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) ▶	
2) **TOTALS** This Period (last page this line number only) ▶	20,552.70
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	26,890.00
4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	47,442.70

FE4AN044

27034425029

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)
☐ USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☑ USPS Express Mail	Postmarked 5/17/07
☐ 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
Er PREPARER	5/18/07 DATE PREPARED

(3/2005)

27039443290