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2012 OCT 31 AM II: 58

FORM 1		UNGANIZ	ATION	FE	C MAIL CENTER
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	<sup>2</sup> 12FE4M5	
ARIZONA	REPU	BLICAN LEAD	DERSHIP FED	ERAL CO	MMITTEE
		<del></del>			
ADDRESS (number a	nd street)	P. O. BOX 74	<b>11274</b>		
(Check if address is changed)		BOYNTON B	EACH	, FL,	33474
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address	S (Please provide only one RepublicanL	e-mail address) eadershipCom	ımittees@y	/ahoo.com
COMMITTEE'S WEE	PAGE ADD	PRESS (URL)			
(Check if is change				<del></del>	
2. DATE Ï(	) <sup>*</sup> 24	°′ <b>ž0</b> 12 ′			
3. FEC IDENTIFIC	CATION NU	MBER C			
4. IS THIS STATE	MENT 🔀	NEW (N) OR	AMENDED (A	A)	
I certify that I have	examined th	is Statement and to the be	st of my knowledge and be	lief it is true, correct	and complete.
Type or Print Name	of Treasurer	EDWARD B	USH		
Signature of Treasure	er	Reduced	Bush	Date 10	′ <b>24°</b> ′ <b>20</b> ′12 ′
NOTE: Submission of	•	•	n may subject the person sign	· ·	the penalties of 2 U.S.C. §437g.
Office Use			For further informat Federal Election Com Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)

	F	EC Fo	rm 1 (Revised 02/2009)	Page 2			
ō.	–	YPE OF COMMITTEE					
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.	)			
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name Candi						
	Candid Party	dete Affiliatio	on Office Sought: House Senate President	State  District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name Candi	date		11111			
	Party	y Con	nmittee: (National, State	(Democratic,			
	(d)	Ш	This committee is a or subordinate) committee of the	Republican, etc.) Party.			
	Polit	ical A	ction Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:			
			Corporation w/o Capital Stock	Labor Organization			
			Memberuhip Organization Trade Association	Cooperativo			
			In addition, this committee is a Lobbyist/Registrant PAC.				
	<b>(f)</b>	$\boxtimes$	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
			In addition, this committee is a Lobbyist/Registrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Joint Fundraising Representative:						
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a faderal candidate.	•			
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political			
Committees Participating in Joint Fundraiser							
		1.					
		2.	FEC ID number C				
		3.	FEC ID number C				

FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name ARIZONA REPUBLICAN LEADERSHIP FEDERAL COMMITTEE Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leagership PAC Sponsor NONE Mailing Address ZIP CODE CITY STATE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee 7. books and records. Full Name P O BOX 741274

Mailing Address	[F, O, BOX, 77 12 14]		
			1111111
	BOYNTON BEACH	<u> F</u>	33474
Title or Position	СПУ	STATE	ZIP CODE
POLITICAL AFF	AIRS DIRECTOR	Telephone number 561	
Treasurer: List the name are any designated agent (e.g.,	d address (phone number optional) of the assistant treasurer).	treasurer of the committee; a	and the name and address of
Full Name of Treasurer	ARD BUSH	1.	
Mailing Address	P. O. BOX 741274		<del></del>
	BOYNTON BEACH	FL FL	33474
Title or Position	CITY	STATE	ZIP CODE
TREASURER		Telephone number 561	

FEC Form 1 (R	levised 02/2009)		
Full Name of Designated Agent			+ + + + + + + + + + + + + + + + + + + +
Mailing Address			
		<del>                                     </del>	
	СПУ	STATE	ZIP CODE
Title or Position			
	Telephone	number	<b></b>
Banks or Other Depos safety deposit boxes or Name of Bank, Deposi		nmittee deposits f	runds, holds accounts, rents
<u> </u> WE	ELLS FARGO BANK	<del>                                     </del>	
Mailing Address	200 NORTH CONGRESS AVENU	<u>E </u>	
		<del></del>	
	BOYNTON BEACH	J FL	33426
	CITY	STATE	ZIP CODE
Name of Bank, Deposi	itory, etc.		
1			<u> </u>
Mailing Address		<u>L I . L I . L I</u>	<u></u>
			111111
		ليال	<u> </u>
	CITY	STATE	ZIP CODE

## 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.

The FEC added this page to the end of this filing to indicate	
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Delivery Confirmation™ or Signature Confir	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss 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):	Receipt or Postmarked
PY	10/31/2012
PREPARER (3/2005)	DATE PREPARED