FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 AUG -7 A 8:29

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 ▲	STATE ▲	ZIP CODE ▲
Highland	IN	46322 -

2. FEC IDENTIFICATION NUMBER ▼

C 00357434

3. IS THIS REPORT ☐ NEW (N) OR ☒ AMENDED (A)

STATE ▼ DISTRICT: IN 01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ 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 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 07 / 01 / 2005 through 09 / 30 / 2005

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: Mark J. Leyva

Signature of Treasurer: Mark J. Leyva

Date 08 / 01 / 2006

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

Office Use Only							

FEC FORM 3
(Revised 02/2003)

FE4AN044

26039162457

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

Report Covering the Period: From: 07 / 01 / 2005 To: 09 / 30 / 2005

	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))	30.00	420.00
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	30.00	420.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1,334.82	2,613.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	-0-	-0-
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1,334.82	2,613.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	457.92	
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)	33,835.79	

For further information contact:

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

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

26026152455

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

Report Covering the Period: From: 07/01/2005 To: 09/30/2005

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)	30.00	420.00
(ii) Unitemized	-0-	-0-
(iii) TOTAL of contributions from individuals ▶	30.00	420.00
(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))	30.00	420.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	-0-	-0-
13. LOANS:		
(a) Made or Guaranteed by the Candidate	1700.00	2,150.00
(b) All Other Loans	-0-	-0-
(c) TOTAL LOANS (add Lines 13(a) and (b))	1700.00	2,150.00
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) ▶	1730.00	2570.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	1,334.82	2,613.22
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) ▶	1,334.82	2,613.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	62.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	1,730.00
25. SUBTOTAL (add Line 23 and Line 24)	1,792.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	1,334.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	457.92

25031512466

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): Mark J. Leyva
Mailing Address: 10027 4th Street
City: Highland State: IN Zip Code: 46322
FEC ID number of contributing federal political committee: C00357434
Date of Receipt: 08/21/2005
Campaign Phone
Amount of Each Receipt this Period: 15.00
In-Kind
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Election Cycle-to-Date: 15.00
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial): Mark J. Leyva
Mailing Address: 10027 4th Street
City: Highland State: IN Zip Code: 46322
FEC ID number of contributing federal political committee: C00357434
Date of Receipt: 09/21/2005
Campaign Phone
Amount of Each Receipt this Period: 15.00
In-Kind
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Election Cycle-to-Date: 30.00
[ ] 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: C00357434
Date of Receipt:
Amount of Each Receipt this Period:
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date:
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

26026162461

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): St. John Sports
Mailing Address: 9119 Wicker Ave
City: St. Hohn State: IN Zip Code: 46373-7284
Purpose of Disbursement: Campaign T-Shirts
Category/Type: 006
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 07 / 01 / 2005
Amount of Each Disbursement this Period: 180.47
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Quint Signs
Mailing Address: 8304 Cline Ave
City: Crown Point State: IN Zip Code: 46307
Purpose of Disbursement: Letter Decals
Category/Type: 006
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 07 / 22 / 2005
Amount of Each Disbursement this Period: 500.0
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): TWS Printing
Mailing Address: 9515 Indianapolis Blve., Unit 2
City: Highland State: IN Zip Code: 46322
Purpose of Disbursement: Camp. Bus. Cards
Category/Type: 006
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 07 / 28 / 2005
Amount of Each Disbursement this Period: 5033
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 28080

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

26031916246 2

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): City Sales
Mailing Address: P.O. Box 9038
City: Highland State: IN Zip Code: 46322-9038
Purpose of Disbursement: Parade Candy
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 07 / 01 / 2005
Amount of Each Disbursement this Period: 198.96
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): City Sales
Mailing Address: P.O. Box 9038
City: Highland State: IN Zip Code: 46322-9038
Purpose of Disbursement: Parade Candy
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 07 / 22 / 2005
Amount of Each Disbursement this Period: 100.34
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): City Sales
Mailing Address: P.O. Box 9038
City: Highland State: IN Zip Code: 46322-9038
Purpose of Disbursement: Parade Candy
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect
Date of Disbursement: 09 / 09 / 2005
Amount of Each Disbursement this Period: 100.34
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 399.64

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

26039152462

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)
[ ] 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): Juniper Bank
Mailing Address: P.O. Box 13337
City: Philadelphia, State: PA Zip Code: 19101-3337
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-Elect
Date of Disbursement: 07/14/2005
Amount of Each Disbursement this Period: 119.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Postmaster
Mailing Address:
City: Highland State: IN Zip Code: 46322
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-Elect
Date of Disbursement: MM/DD/2005
Amount of Each Disbursement this Period: 13.65
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): AT&T Wireless
Mailing Address: P.O. Box 8220
City: Aurora State: IL Zip Code: 60572-8220
Purpose of Disbursement: Campaign 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-Elect
Date of Disbursement: 07/21/2005
Amount of Each Disbursement this Period: 51.80
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 184.45

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

26039162464

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): Doppler ISP, Inc

Mailing Address: 110 W. Main Street

City: Griffith State: IN Zip Code: 46319

Purpose of Disbursement: 3-Month Hosting Fees

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-Elect

Date of Disbursement: 07 / 22 / 2005

Amount of Each Disbursement this Period: 90.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial): Juniper Bank

Mailing Address: P.O. Box 13337

City: Philadelphia State: PA Zip Code: 19101-3337

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-Elect

Date of Disbursement: 08 / 05 / 2005

Amount of Each Disbursement this Period: 119.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial): Juniper Bank

Mailing Address: P.O. Box 13337

City: Philadelphia State: PA Zip Code: 19101-3337

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-Eclect

Date of Disbursement: 09 / 02 / 2005

Amount of Each Disbursement this Period: 100.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 309.00

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

26031916465

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): Doppler Internet, Inc

Mailing Address: 219 Russell St.

City: Hammond State: IN Zip Code: 46324

Purpose of Disbursement: Domain Name Fee

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-Elect

Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 35.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial): TWS Printing

Mailing Address: 9515 Indianapolis Blvd, Unit 2

City: Highland State: IN Zip Code: 46322

Purpose of Disbursement: Camp. Bus. Cards

Category/Type: 006

Candidate Name: Mark J. Leyva

Office Sought: [X] House [ ] Senate [ ] President

State: IN District: 01

Disbursement For: [ ] Primary [ ] General [X] Other (specify) Non-Elect

Date of Disbursement: 09 / 06 / 2005

Amount of Each Disbursement this Period: 95.93

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

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

Mailing Address: 10027 4th Street

City: Highland State: IN Zip Code: 46322

Purpose of Disbursement: Campaign Phone (08/21 & 09/21) $15 ea

Category/Type: 006

Candidate Name: Mark J. Leyva

Office Sought: [X] House [ ] Senate [ ] President

State: IN District: 01

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 21 / 2005

Amount of Each Disbursement this Period: 30.00

In-Kind

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	160.93
TOTAL This Period (last page this line number only) ▶	1334.82

26031162466

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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

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

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

Mailing Address
10027 4th Street

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

Original Amount of Loan: 400.00
Cumulative Payment To Date: -0-
Balance Outstanding at Close of This Period: 400.00

TERMS
Date Incurred: 07 / 01 / 2005
Date Due: MM / DD / YYYY NONE
Interest Rate: 0.0 % (apr)
Secured: [ ] [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) ▶ 400.00

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.

26029162467

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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

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

Mailing Address
10027 4th Street

City: Highland
State: IN
ZIP Code: 46322

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

Original Amount of Loan: 400.00
Cumulative Payment To Date: -0-
Balance Outstanding at Close of This Period: 400.00

TERMS
Date Incurred: 07 / 12 / 2005
Date Due: MM / DD / NONE
Interest Rate: .000 % (apr)
Secured: [ ] 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) ▶ 400.00

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.

26020916246 8

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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

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

Mailing Address
10027 4th Street

City: Highland
State: IN
ZIP Code: 46322

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

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300.00	-0-	300.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 25 / 2005	MM / DD / NONE	0.00 % (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) ▶ 300.00

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.

26020152459

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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

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

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

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

Original Amount of Loan: 300.00
Cumulative Payment To Date: -0-
Balance Outstanding at Close of This Period: 300.00

TERMS
Date Incurred: 09 / 02 / 2005
Date Due: MM / DD / NONE
Interest Rate: .000 % (apr)
Secured: [ ] 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) ▶ 300.00

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.

26031916247B

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)
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

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

Mailing Address
10027 4th Street

City: Highland
State: IN
ZIP Code: 46322

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

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300.00	-0-	300.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
09 / 12 / 2005	NONE	0.00 % (apr)	[ ] [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) ▶ 300.00

TOTALS This Period (last page in this line only) ▶ 22400.00

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

26031512471

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):

Outstanding Balance Beginning This Period: 11,673.79

Amount Incurred This Period: -0-

Payment This Period: 238.00

Outstanding Balance at Close of This Period: 11,435.79

B. 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):

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: Leyva, Mark, J.

Mailing Address: 10027 4th Street

City: Highland State: IN Zip Code: 46322

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) ▶	-0-
2) **TOTALS** This Period (last page this line number only) ▶	11,435.79
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	22,400.00
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	33,835.79

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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 8/2/06
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☐ 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
PREPARER	DATE PREPARED 8/7/06

(3/2005)

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