

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

LEAH FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 1266

Check if different than previously reported. (ACC)

MESA

AZ

85211

2. **FEC IDENTIFICATION NUMBER** ▼

C C00517110

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

AZ

09

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Jacob Darl Brown

Signature of Treasurer Jacob Darl Brown

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
LEAH FOR CONGRESS

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

	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))....	14275.00	14275.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14275.00	14275.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	445.74	445.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	445.74	445.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13829.26	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

LEAH FOR CONGRESS

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

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).....	6500.00	6500.00
(ii) Unitemized.....	275.00	275.00
(iii) TOTAL of contributions from individuals ▶	6775.00	6775.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	7500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14275.00	14275.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	14275.00	14275.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	445.74	445.74
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	445.74	445.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14275.00
25. SUBTOTAL (add Line 23 and Line 24).....	14275.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	445.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13829.26

**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 5 OF 9
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
LEAH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher Anzidei

Mailing Address 5020 Park Place

City State Zip Code
Bethesda MD 20816

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

Name of Employer Occupation
Law Offices of Christopher Anz Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
250.00

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

Mailing Address 312 Buncombe St.

City State Zip Code
Raleigh NC 27609

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

Name of Employer Occupation
American Anesthesiology Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2012

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period
250.00

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

Mailing Address Zonamerica, Ruta 8 km. 17500

City State Zip Code
Montevideo, Uruguay ZZ

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

Name of Employer Occupation
Merrill Lynch Senior Vice President over Investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2012

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)
LEAH FOR CONGRESS

Full Name (Last, First, Middle Initial) Jonathan Greenhill		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2012
Mailing Address 5244 Macomb St., NW		Transaction ID : SA11AI.4102
City Washington	State DC	
Zip Code 20016		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	Occupation Diplomat	Amount of Each Receipt this Period 1000.00
Name of Employer Department of State	Election Cycle-to-Date 1000.00	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Michael W. Luce		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2012
Mailing Address 3115 Patrick Henry Dr. #534		Transaction ID : SA11AI.4130
City Falls Church	State VA	
Zip Code 22044		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation Retired	Amount of Each Receipt this Period 500.00
Name of Employer Self	Election Cycle-to-Date 500.00	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Teresa Rotunno		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2012
Mailing Address PO Box 439039		Transaction ID : SA11AI.4128
City San Ysidro	State CA	
Zip Code 92143		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation Foreign Service Officer	Amount of Each Receipt this Period 500.00
Name of Employer US State Department	Election Cycle-to-Date 500.00	
Receipt For: 2012 <input checked="" 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).....	

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

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NAME OF COMMITTEE (In Full)
LEAH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles Staats

Mailing Address 4120 E.Rancho Tierra Drive

City State Zip Code
Cave Creek AZ 85331

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

Name of Employer Occupation
City of Scottsdale Government

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
500.00

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

Mailing Address 1551 Ala Wai Blvd

City State Zip Code
Honolulu HI 96815

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

Name of Employer Occupation
US Army Colonel

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2012

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
2500.00

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3000.00

6500.00

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

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NAME OF COMMITTEE (In Full)
LEAH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ax PAC

Mailing Address 1006 Pendleton

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00506535

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.4111

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 1006 Pennsylvania Ave.

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00506717

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.4114

Amount of Each Receipt this Period
 5000.00

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

7500.00

7500.00

**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)		PAGE 9 OF 9	
	<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)
LEAH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jacob Darl Brown		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 712 E 3rd Ave		Amount of Each Disbursement this Period 445.74 Transaction ID : SB17.4141
City Mesa	State AZ	
Purpose of Disbursement Reimbursement for Campaign Supplies		Category/ Type 006
Candidate Name LEAH FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ	District: 09	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	445.74
TOTAL This Period (last page this line number only).....	445.74