**FEC FORM 3**

# REPORT OF RECEIPTS AND DISBURSEMENTS

**For An Authorized Committee**

RECEIVED
FEC MAIL CENTER
2008 DEC -4 AM 11:42
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)

Highland | IN | 46322 -

2. FEC IDENTIFICATION NUMBER ▼ C 00357434

CITY ▲ STATE ▲ ZIP CODE ▲

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 / 2008 through 09 / 30 / 2008

*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 12 / 04 / 2008

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

28039940808

# 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 / 2008 To: 09 / 30 / 2008

| | 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)) | 201278 | 323778 |
| (b) Total Contribution Refunds (from Line 20(d)) | -0- | -0- |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 201278 | 323778 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 325296 | 770042 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | -0- | -0- |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 325296 | 770042 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 297633 | |
| 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) | 546529 | |

**For further information contact:**

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

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



28039408809

# DETAILED SUMMARY PAGE
of Disbursements



| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|---|---|
| 17. OPERATING EXPENDITURES | 325296 | 770042 |
| 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) ▶ | 325296 | 770042 |

## III. CASH SUMMARY

| | |
|---|---|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | 91651 |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) | 531278 |
| 25. SUBTOTAL (add Line 23 and Line 24) | 622929 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | 325296 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | 297633 |

28039940810

# 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 / 2008 To: 09 / 30 / 2008

| 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) | 0 | 1,225.00 |
| (ii) Unitemized | 1,253.00 | 1,253.00 |
| (iii) TOTAL of contributions from individuals ▶ | 1,253.00 | 2,478.00 |
| (b) Political Party Committees | 759.78 | 759.78 |
| (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)) | 2,012.78 | 3,237.78 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0 | 0 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | 13,000.00 | 51,000.00 |
| (b) All Other Loans | 0 | 0 |
| (c) TOTAL LOANS (add Lines 13(a) and (b)) | 13,000.00 | 51,000.00 |
| 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) ▶ | 53,127.78 | 83,377.78 |

28039940811

# 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

PAGE 1 OF 3

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 ST
City: HIGHLAND State: IN Zip Code: 46322
FEC ID number of contributing federal political committee: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date: 13500
Date of Receipt: 09 / 21 / 2008
Amount of Each Receipt this Period: 4500
IN-KIND
[ ] 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 ST
City: HIGHLAND State: IN Zip Code: 46322
FEC ID number of contributing federal political committee: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date: 36978
Date of Receipt: 09 / 20 / 2008
Amount of Each Receipt this Period: 36978
IN-KIND
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**C.**
Full Name (Last, First, Middle Initial): CENTRAL INDIANA GUNSHOW
Mailing Address: PO BOX 32
City: CENTERVILLE State: IN Zip Code: 47330
FEC ID number of contributing federal political committee: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date: 9000
Date of Receipt: 09 / 13 / 2008
Amount of Each Receipt this Period: 4500
IN-KIND
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ▶ 45978

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

28039940812

# 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



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

**A.**
Full Name (Last, First, Middle Initial): Shererville Republican Org.
Mailing Address: 1534 Clover LN
City: Shererville State: IN Zip Code: 46375-1587
FEC ID number of contributing federal political committee.: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date:
Date of Receipt: 09 / 12 / 2008
Amount of Each Receipt this Period: 15000
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**B.**
Full Name (Last, First, Middle Initial): Grand Republican Org. of Women
Mailing Address: 558 North 50 West
City: Valparaiso State: IN Zip Code: 46385
FEC ID number of contributing federal political committee.: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date:
Date of Receipt: 09 / 20 / 2008
Amount of Each Receipt this Period: 5000
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**C.**
Full Name (Last, First, Middle Initial): Unhappy Taxpayers for B. Johnson
Mailing Address: 196 W. Clark St
City: Crown Point State: IN Zip Code: 46307
FEC ID number of contributing federal political committee.: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date:
Date of Receipt: 09 / 20 / 2008
Amount of Each Receipt this Period: 5000
[ ] Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ▶ 25000

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

28039940813

# 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 3 OF 3

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

**A.**
Full Name (Last, First, Middle Initial): Mid Lake Republican Womans Club
Mailing Address: 3610 Kingsway Dr
City: Crown Point State: IN Zip Code: 46307
FEC ID number of contributing federal political committee: C00357434
Name of Employer:
Occupation:
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Election Cycle-to-Date:
Date of Receipt: 09 / 23 / 2008
Amount of Each Receipt this Period: 5000
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: C00357434
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:
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
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:
Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ▶ 5000

**TOTAL** This Period (last page this line number only) ▶ 75978

28039940814

# 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): US Postal Service - Postmaster
Mailing Address: Highland Branch
City: Highland State: IN Zip Code: 46322-9998
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 [X] General [ ] Other (specify)
Date of Disbursement: 07/14/2008
Amount of Each Disbursement this Period: 1650
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**
Full Name (Last, First, Middle Initial): BuButton Parts.Com
Mailing Address: 350 S Campbell St Unit #3
City: Valparaiso State: IN Zip Code: 46385
Purpose of Disbursement: Button Parts
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 07/22/2008
Amount of Each Disbursement this Period: 4978
[ ] 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: 8721 Kennedy Ave
City: Highland State: IN Zip Code: 46322
Purpose of Disbursement: Printing
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08/21/2008
Amount of Each Disbursement this Period: 2673
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ 77601

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

28039940815

# 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): Space Age Marketing
Mailing Address: 2584 Broadway
City: Merrillville State: IN Zip Code: 46410
Purpose of Disbursement: Bus. Cards
Candidate Name: Mark J. Leyva
Category/Type: 001
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09/05/2008
Amount of Each Disbursement this Period: 132.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**
Full Name (Last, First, Middle Initial): Russ Print Shop
Mailing Address: 131 North Main St.
City: Hebron State: IN Zip Code: 46341
Purpose of Disbursement: Printing
Candidate Name: Mark J. Leyva
Category/Type: 001
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09/08/2008
Amount of Each Disbursement this Period: 749.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**
Full Name (Last, First, Middle Initial): Dunes Rifle + Pistol, LLC
Mailing Address: Po Box 345
City: Hobart State: IN Zip Code: 46324
Purpose of Disbursement: Table Fees
Candidate Name: Mark J. Leyva
Category/Type: 001
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09/20/2008
Amount of Each Disbursement this Period: 40.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ 921.50

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

28039940816

# 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 5

[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. John State: IN Zip Code: 46373-0370
Purpose of Disbursement: T-Shirts
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07/19/2008
Amount of Each Disbursement this Period: 277.67
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**
Full Name (Last, First, Middle Initial): DeMotte Chamber of Comme:
Mailing Address: 202 9th St SW
City: DeMotte State: IN Zip Code: 46310
Purpose of Disbursement: Parade Donation
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07/25/2008
Amount of Each Disbursement this Period: 100.0
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**
Full Name (Last, First, Middle Initial): Jim Holmes
Mailing Address: 9034 Homes Terrace
City: DeMotte State: IN Zip Code: 46310
Purpose of Disbursement: Entertainment Fee
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09/22/2008
Amount of Each Disbursement this Period: 500.0
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ 787.67

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

28039940817

# 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): EDonations 1 Account
Mailing Address: 118 N Saint Asaph St
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Fundraising Fees
Category/Type: 001
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08/31/2008
Amount of Each Disbursement this Period: 33.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**
Full Name (Last, First, Middle Initial): Puerto Rican Parade NWI
Mailing Address: 3485 Michigan Ave
City: East Chicago State: IN Zip Code: 46312
Purpose of Disbursement: Parade Fee
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 07/14/2008
Amount of Each Disbursement this Period: 25.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**
Full Name (Last, First, Middle Initial): Valparaiso Armory Board Fund
Mailing Address: 1502 Linwood Ave
City: Valparaiso State: IN Zip Code: 46383
Purpose of Disbursement: Hall Rental
Category/Type: 007
Candidate Name: Mark J. Leyva
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 09/22/2008
Amount of Each Disbursement this Period: 250.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ 308.00

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

28039408818

# 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): Mark J Leyva
Mailing Address: 10027 4th St
City: Highland State: IN Zip Code: 46322
Purpose of Disbursement: Campaign Phone
Candidate Name: Mark J. Leyva
Category/Type: 001
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 21 / 2008
Amount of Each Disbursement this Period: 4500
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**
Full Name (Last, First, Middle Initial): Mark J. Leyva
Mailing Address: 10027 4th St
City: Highland State: IN Zip Code: 46322
Purpose of Disbursement: Event Receipts
Candidate Name: Mark J. Leyva
Category/Type: 007
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 20 / 2008
Amount of Each Disbursement this Period: 3697.8
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**
Full Name (Last, First, Middle Initial): Central Indiana Gunshow
Mailing Address: PO Box 32
City: Centerville State: IN Zip Code: 47330
Purpose of Disbursement: Table Fees
Candidate Name: Mark J. Leyva
Category/Type: 007
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 01
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 31 / 2008
Amount of Each Disbursement this Period: 4500
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ 45978

**TOTAL** This Period (last page this line number only) ▶ 325296

28039940819

# SCHEDULE C (FEC Form 3)
# LOANS

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

PAGE 1 OF 1

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

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

3rd QT 2008

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

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

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|---|---|---|
| 1,300.00 | -0- | 1,300.00 |

**TERMS**

| Date Incurred (MM/DD/YYYY) | Date Due (MM/DD/YYYY) | Interest Rate | Secured: |
|---|---|---|---|
| 09/12/2009 | 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) ▶ 1,300.00

**TOTALS** This Period (last page in this line only) ▶ 32,290.00

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

28039940820

# SCHEDULE D (FEC Form 3)
## DEBTS AND OBLIGATIONS
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one) ☐ 9 ☐ 10

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

3rd QT 2008

**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor:** Office Depot

Mailing Address: 10332 Indianapolis Blvd

City: Highland State: IN Zip Code: 46322

Nature of Debt (Purpose): 09/10/2008 Copy Fees

Outstanding Balance Beginning This Period: 341.84

Amount Incurred This Period: 341.84

Payment This Period: -0-

Outstanding Balance at Close of This Period: 341.84

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

Mailing Address: 1601 W 81st Ave

City: Merrillville State: IN Zip Code: 46310

Nature of Debt (Purpose): 08/31/2008 Parade Candy

Outstanding Balance Beginning This Period: 434.71

Amount Incurred This Period: 434.71

Payment This Period: -0-

Outstanding Balance at Close of This Period: 434.71

**C. Full Name (Last, First, Middle Initial) of Debtor or Creditor:** Buy Button Parts.Com

Mailing Address: 350 S Campbell St Unit 3

City: Valparaiso State: IN Zip Code: 46385

Nature of Debt (Purpose): 09/03/2008 Button Parts

Outstanding Balance Beginning This Period: 119.78

Amount Incurred This Period: 119.78

Payment This Period: -0-

Outstanding Balance at Close of This Period: 119.78

| | |
|---|---|
| 1) **SUBTOTALS** This Period This Page (optional) ▶ | 896.33 |
| 2) **TOTALS** This Period (last page this line number only) ▶ | 2236.29 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 3290.00 |
| 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶ | 5465.29 |



28039940821

# 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

12-P 2008

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

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

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

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

**TERMS**

| Date Incurred (MM/DD/YYYY) | Date Due (MM/DD/YYYY) | Interest Rate | Secured: |
|---|---|---|---|
| | 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) ▶ 100.00

**TOTALS** This Period (last page in this line only) ▶ 29,290.00

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

28039940822

# 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

12-P 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor: Office Depot
Mailing Address: 10332 Indianapolis Blvd
City: Highland State: IN Zip Code: 46322
Nature of Debt (Purpose): 4/3/08 Camp. Flyer Printing
Outstanding Balance Beginning This Period: 2039589
Amount Incurred This Period: 9780
Payment This Period: 0
Outstanding Balance at Close of This Period: 2049369

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor: Office Depot
Mailing Address: 10332 Indianapolis Blvd.
City: Highland State: IN Zip Code: 46322
Nature of Debt (Purpose): 4/10/08 Card Stock
Outstanding Balance Beginning This Period: 2049369
Amount Incurred This Period: 9624
Payment This Period: 0
Outstanding Balance at Close of This Period: 2058993

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor: Oliver, Chuck
Mailing Address: 1109 W. 72nd Circle
City: Merrillville State: IN Zip Code: 46410
Nature of Debt (Purpose): 4/15/08 Flyer Printing
Outstanding Balance Beginning This Period: 2058993
Amount Incurred This Period: 6000
Payment This Period: 0
Outstanding Balance at Close of This Period: 2064993

| | |
|---|---|
| 1) **SUBTOTALS** This Period This Page (optional) ▶ | |
| 2) **TOTALS** This Period (last page this line number only) ▶ | 2064993 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 2929000 |
| 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶ | 4993993 |



FE4AN044

28039940823

# 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

1st QT 2008

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

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

Mailing Address: 10027 4th Street

City: Highland State: IN ZIP Code: 46322

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|---|---|---|
| 2,000.00 | -0- | 2,000.00 |

**TERMS**

| Date Incurred (MM/DD/YYYY) | Date Due (MM/DD/YYYY) | Interest Rate | Secured: |
|---|---|---|---|
| 03/19/2008 | 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) ▶ 2,000.00

**TOTALS** This Period (last page in this line only) ▶ 29,190.00

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

28039940824

# 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

1st QT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor: BuyButtonParts.com

Mailing Address: 350 S, Campbell St., Unit #3

City: Valparaiso State: IN Zip Code: 46385

Nature of Debt (Purpose): Button Parts 1/31/08 $62.54

Outstanding Balance Beginning This Period: 20,333.35

Amount Incurred This Period: 62.54

Payment This Period: -0-

Outstanding Balance at Close of This Period: 20,395.89

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) ▶ | 20,395.89 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 29,190.00 |
| 4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 49,585.89 |



28039940825

# 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

4th QT 2007

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

Election: [ ] Primary [ ] General [ ] Other (specify) ▼

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

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

TERMS

| Date Incurred | Date Due | Interest Rate | Secured: |
|---|---|---|---|
| M M / D D / Y Y Y Y | M M / D D / Y Y Y Y | | |
| | 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) ▶ -0-

**TOTALS** This Period (last page in this line only) ▶ 27,190.00

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



28039940825

# 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 4th OT 2007

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: -0-

Payment This Period: -0-

Outstanding Balance at Close of This Period: 20,333.35

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) ▶ | |
| 2) **TOTALS** This Period (last page this line number only) ▶ | 20,333.35 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 27,190.00 |
| 4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 47,520.35 |



FE4AN044

28039940827

# SCHEDULE C (FEC Form 3)
# LOANS

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

PAGE OF

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

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

3ND QT 2007

**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-Election

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

**TERMS**
Date Incurred: M M / D D / Y Y Y Y
Date Due: M M / D D / Y Y Y Y
Interest Rate: % (apr)
Secured: [ ] [ ]

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) ▶ -0-

**TOTALS** This Period (last page in this line only) ▶ 27,190.00

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

28039940828

# SCHEDULE D (FEC Form 3)
## DEBTS AND OBLIGATIONS
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one) ☐ 9 ☐ 10

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

3RD QT 2007

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): 04/07/07 Camp. C.C. Payments 7/11 - $273 8/6 - $270 9/7 - $300 Personal Check

Outstanding Balance Beginning This Period: 21,173.35

Amount Incurred This Period:

Payment This Period: 843.00

Outstanding Balance at Close of This Period: 20,330.35

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) ▶ | 20,330.35 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 27,190.00 |
| 4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 47,520.35 |



28039940829

# 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

2ND QT 2007

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

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

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

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

**TERMS**

| Date Incurred (MM / DD / YYYY) | Date Due (MM / DD / YYYY) | Interest Rate | Secured: |
|---|---|---|---|
| 05 / 21 / 2007 | NONE | 0% % (apr) | [ ] No [X] |

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) ▶ 27,190.00

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



28039940830

# 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

2ND QT 2007

**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):

FEC Postage _ 5/17/07
Paid Cash

Outstanding Balance Beginning This Period: 20,552.70

Amount Incurred This Period: 14.40

Payment This Period: -0-

Outstanding Balance at Close of This Period: 20,567.10

**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):

FEC Postage - 5/30/07
Paid Cash

Outstanding Balance Beginning This Period: 20,567.10

Amount Incurred This Period: 16.25

Payment This Period: -0-

Outstanding Balance at Close of This Period: 20,583.35

**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):

Camp. CC Payment - 6/07/07
Personal Check $290.00
Camp. CC Payment - 4/17/07
Camp. Check $300.00

Outstanding Balance Beginning This Period: 20,583.35

Amount Incurred This Period: 590.00

Payment This Period: -0-

Outstanding Balance at Close of This Period: 21,173.35

| | |
|---|---|
| 1) **SUBTOTALS** This Period This Page (optional) ▶ | |
| 2) **TOTALS** This Period (last page this line number only) ▶ | 21,173.35 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶ | 27,190.00 |
| 4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 48,363.35 |



FE4AN044

28039940831

# 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

1ST QT 2007

**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 | 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.**

28039940832

# 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

1ST QT 2007

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Leyva, Mark, J.

Mailing Address

10027 4th Street

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

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

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

**TERMS**

| Date Incurred (MM/DD/YYYY) | Date Due (MM/DD/YYYY) | 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) | 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) ▶ , ,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.**

FE6AN023

FEC Schedule C (Form 3) (Revised 02/2003)

28039940833

# 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

1ST QT 2007

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

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

Mailing Address
10027 4th Street

City: Highland State: IN ZIP Code: 46322

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|---|---|---|
| , ,200,00 | , ,-0- . | , ,200,00 |

**TERMS**

| Date Incurred (MM/DD/YYYY) | Date Due (MM/DD/YYYY) | Interest Rate | Secured: |
|---|---|---|---|
| 02/08/2007 | 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.**



28039940834

# 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

1 ST QT 2007

**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):
   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)* ▶ , ,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.**

28039940835

# 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

1ST QT 2007

**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) ▼ Previous Election

Original Amount of Loan: 26,000.00
Cumulative Payment To Date: -0-
Balance Outstanding at Close of This Period: 26,000.00

**TERMS**
Date Incurred: 01/01/2002 – Date Due: 12/31/2006
Interest Rate: 0% % (apr)
Secured: [ ] No [X]

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) ▶ 26,000.00

**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.**



28039940836

# 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

1ST QT 2007

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

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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 |
| Delivery Confirmation™ or Signature Confirmation™ Label ☐ | |
| ☑ USPS Express Mail | Postmarked 12/3/08 |
| ☐ 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 |
| JSD PREPARER | 12/4/08 DATE PREPARED |

(3/2005)

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