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

COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS

ADDRESS (number and street) ▼ 80 OAK HILL DRIVE

☐ Check if different than previously reported. (ACC)

SHARON (CITY ▲) MA (STATE ▲) 02067 – (ZIP CODE ▲)

2. **FEC IDENTIFICATION NUMBER ▼** C C00936062

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

STATE ▼ MA DISTRICT 04

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 04 / 01 / 2026 through 06 / 30 / 2026

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 Nasir, Muzammil, , ,

Signature of Treasurer *Nasir, Muzammil, , ,* Date 07 / 15 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only							

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS

Report Covering the Period: From: 04 / 01 / 2026 To: 06 / 30 / 2026

	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))	422.58	422.58
(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))	422.58	422.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9530.00	9530.00
(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))	9530.00	9530.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2816.13	
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)	32025.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS

Report Covering the Period: From: MM 04 / DD 01 / YYYY 2026 To: MM 06 / DD 30 / YYYY 2026

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)	250.00	250.00
(ii) Unitemized	172.58	172.58
(iii) TOTAL of contributions from individuals ▶	422.58	422.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	422.58	422.58
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) ▶	422.58	422.58

FEC **Form 3** (Revised 05/2016)

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	9530.00	9530.00
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) ▶	9530.00	9530.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	11923.55
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	422.58
25. SUBTOTAL (add Line 23 and Line 24)	12346.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	9530.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2816.13

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 IHSSANE LECKEY FOR CONGRESS

A.
Full Name (Last, First, Middle Initial): Tellal, Manal, , ,
Mailing Address: 100 NW 6th Street Apt 2612
City: Miami | State: FL | Zip Code: 33136
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Marketing
Receipt For: 2026
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 22 / 2026
Transaction ID : SA11AI.4103
Amount of Each Receipt this Period: 250.00
[ ] Memo Item

B.
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
Amount of Each Receipt this Period:
[ ] Memo Item

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
Amount of Each Receipt this Period:
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 250.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial): Long Line Solutions
Mailing Address: 66 St. Rose Street, Unit 1
City: Boston | State: MA | Zip Code: 02130
Purpose of Disbursement: Website Design, Branding and Campaign Logo
Category/Type: 004
Candidate Name: COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 01 / 2026
FEC Identification Number: C C00936062
Amount of Each Disbursement this Period: 5000.00
Transaction ID : SB17.4108
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Numero, inc
Mailing Address: 695 Town Center Drive, Suite 1100
City: Costa Mesa | State: CA | Zip Code: 92626
Purpose of Disbursement: CRM Platform Subscription
Category/Type: 003
Candidate Name: COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 16 / 2026
FEC Identification Number: C C00936062
Amount of Each Disbursement this Period: 1500.00
Transaction ID : SB17.4112
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Souder Law Group LLP
Mailing Address: 570 Broad Street, Floor 15
City: Newark | State: NJ | Zip Code: 07102
Purpose of Disbursement: FEC Compliance and Legal Counsel
Category/Type: 001
Candidate Name: COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 10 / 2026
FEC Identification Number: C C00936062
Amount of Each Disbursement this Period: 3000.00
Transaction ID : SB17.4110
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9500.00

TOTAL This Period (last page this line number only) ▶ 9500.00

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
- [x] 10

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT IHSSANE LECKEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NWF Strategies, Inc.

Mailing Address Unknown

City	State	Zip Code
Palo Alto	CA	94306

Nature of Debt (Purpose):
Fundraising consulting services
February/March - settlement pending

Transaction ID : SD10.4122

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
7000.00	0.00	0.00	7000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
T. Booker Strategies LLC

Mailing Address P.O. Box 15304

City	State	Zip Code
Washington	DC	20003

Nature of Debt (Purpose):
Campaign Consulting Services. Disputed

Transaction ID : SD10.4120

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
25025.00	0.00	0.00	25025.00

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) ▶	32025.00
2) **TOTALS** This Period (last page this line number only) ▶	32025.00
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	0.00
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	32025.00