

FEC  
FORM 3REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For An Authorized CommitteeRECEIVED  
FEC MAIL  
OPERATIONS CENTER

2004 JUN 28 AM 9:39

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

125E4115

COMMITTEE TO ELECT GRAHAM LEONARD

ADDRESS (number and street)

Check if different  
than previously  
reported. (AOC)

BRENDA JILL KARLSSON, TREASURER

905 EDGEMONT AV

BRISTOL

TN 37620

2. FEC IDENTIFICATION NUMBER ▼

C 00403295

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORT

(N)

NEW  
(N)

OR

AMENDED  
(A)

TN 01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

Q1 April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Full-Year Report (FYR)

(b) 12-Day PRE-Election Report for the:

12P Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

08 05 2004

In the  
State of

TN

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

General (30G)

Runoff (30R)

Special (30S)

Election on

In the  
State of

5. Covering Period

04 01 2004

through

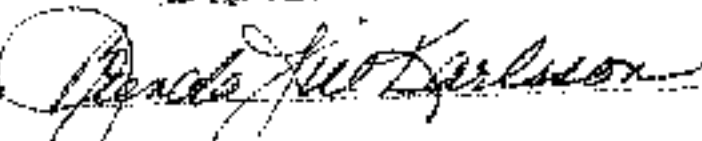
06 30 2004

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

BRENDA JILL KARLSSON

Signature of Treasurer



Date

07 10 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5429g.

Office  
Use  
OnlyFEC FORM 3  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

COMMITTEE TO ELECT GRAHAM LEONARD

Report Covering the Period

From

04 01 2004

To

06 30 2004

|                                                                                                     | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                             |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))                                     | 10,300.00               |                                    |
| (b) Total Contribution Refunds<br>(from Line 20(d))                                                 | 0.                      |                                    |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a))                     | 10,300.00               |                                    |
| 7. Net Operating Expenditures                                                                       |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17)                                                  | 91.41                   |                                    |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14)                                       | 0.                      |                                    |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a))                               | 91.41                   |                                    |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27)                                      | 10,209.46               |                                    |
| 9. Debts and Obligations Owed TO<br>the Committee (itemize all on<br>Schedule C and/or Schedule D)  | 0                       |                                    |
| 10. Debts and Obligations Owed BY<br>the Committee (itemize all on<br>Schedule C and/or Schedule D) | 0.                      |                                    |

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 02/2003)

Page 3

Write or Type Committee Name

COMMITTEE TO ELECT GRAHAM LEONARD

Report Covering the Period:

From:

04 01 2004

To:

06 30 2004

## I. RECEIPTS

COLUMN A  
Total This Period

COLUMN B  
Election Cycle-to-Date

### 11. CONTRIBUTIONS (other than loans) FROM:

(i) Individuals/Persons Other Than  
Political Committees

(ii) Itemized (use Schedule A).....

10,300.00

(iii) Unitemized.....

0

(iv) TOTAL of contributions  
from individuals.....

10,300.00

(v) Political Party Committees.....

0.

(vi) Other Political Committees  
(such as PACs).....

0.

(vii) The Candidate.....

0

(viii) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(i)(ii), (v), (vi), and (vii))..

10,300.00

### 12. TRANSFERS FROM OTHER

AUTHORIZED COMMITTEES.....

0.

### 13. LOANS:

(a) Made or Guaranteed by the  
Candidate.....

0.

(b) All Other Loans.....

0

(c) TOTAL LOANS

0.

(add Lines 13(a) and (b)).....

### 14. OFFSETS TO OPERATING

EXPENDITURES

(Refunds, Rebates, etc.).....

0.

### 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

.87

### 16. TOTAL RECEIPTS (add Lines

11(i), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

10,300.87

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

| II. DISBURSEMENTS                                                      | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                        | 91.41                         | 91.41                              |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                   | 0                             | 0                                  |
| 19. LOAN REPAYMENTS:                                                   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....               | 0                             | 0                                  |
| (b) Of All Other Loans.....                                            | 0                             | 0                                  |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....            | 0                             | 0                                  |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                       |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees.....        | 0                             | 0                                  |
| (b) Political Party Committees.....                                    | 0                             | 0                                  |
| (c) Other Political Committees<br>(such as PACs).....                  | 0                             | 0                                  |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c))..... | 0                             | 0                                  |
| 21. OTHER DISBURSEMENTS.....                                           | 0                             | 0                                  |
| 22. TOTAL DISBURSEMENTS<br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶  | 91.41                         | 91.41                              |

## III. CASH SUMMARY

|                                                                                       |           |           |
|---------------------------------------------------------------------------------------|-----------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 0         | 0         |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 18, page 3).....                            | 10,300.87 | 10,300.87 |
| 25. SUBTOTAL (add Lines 23 and Line 24).....                                          | 10,300.87 | 10,300.87 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 91.41     | 91.41     |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 10,209.46 | 10,209.46 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER: **FWSE 1 OF 10**  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13e ☐ 13f ☐ 14 ☐ 15

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions or for confidential 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 GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

A. **ALTMER, LISA**

Mailing Address

**24 HARBOR RD**

City

**BURLINGTON**

State

**VT**

Zip Code

**05401**

FEC ID number of contributing federal political committee

**C**

Name of Employer

Occupation

Receipt For

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**20000**

Date of Receipt

**05 25 2004**

Amount of Each Receipt this Period

**20000**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(4)(1)(A))

Full Name (Last, First, Middle Initial)

B. **AKINS, JAMES E**

Mailing Address

**10450 LOTTSFORD RD, COLLINGTON 5103**

City

**MITCHELLVILLE**

State

**MD**

Zip Code

**20721-3302**

FEC ID number of contributing federal political committee

**C**

Name of Employer

Occupation

**RETIRED****FORMER US AMBASSADOR**

Receipt For

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**100000**

Date of Receipt

**04 21 2004**

Amount of Each Receipt this Period

**100000**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(4)(1)(A))

Full Name (Last, First, Middle Initial)

C. **BADRAN, HEITHAM**

Mailing Address

**1415 JANDER DR**

City

**SPRING**

State

**TX**

Zip Code

**77386**

FEC ID number of contributing federal political committee

**C**

Name of Employer

Occupation

Receipt For

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**100000**

Date of Receipt

**05 17 2004**

Amount of Each Receipt this Period

**100000**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a)(4)(1)(A))

SUBTOTAL of Receipts This Page (optional)

**220000**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER  
 (check only one)

 PAGE **2** OF **10**
☒ 10a ☐ 10b ☐ 10c ☐ 10d ☐ 10e

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NAME OF COMMITTEE (in full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**A. BLISS RACHAEL**

Mailing Address

**1421 W SULLIVAN ST**

City

**KINGSPORT**

State

**TN**

Zip Code

**37660**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**50.00**

Date of Receipt

**06 04 2004**

Amount of Each Receipt this Period

**50.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

Full Name (Last, First, Middle Initial)

**B. BUSSART WALTER**

Mailing Address

**100 NETHERLAND INN RD #336**

City

**KINGSPORT**

State

**TN**

Zip Code

**37660**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**100.00**

Date of Receipt

**06 06 2004**

Amount of Each Receipt this Period

**100.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

Full Name (Last, First, Middle Initial)

**C. BUTTERWORTH CHARLES**

Mailing Address

**2413 GREENWICH PKY NW**

City

**WASHINGTON**

State

**DC**

Zip Code

**20007**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**100.00**

Date of Receipt

**05 25 2004**

Amount of Each Receipt this Period

**100.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)

**250.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER  
 (check only one)

 PAGE **3** OF **10**
☒ 10a ☐ 11a ☐ 12a ☐ 13a ☐ 14a ☐ 15a  
☐ 11b ☐ 12b ☐ 13b ☐ 14b ☐ 15b

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NAME OF COMMITTEE (Full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**A. COLBU LORE M**

Mailing Address

**501 AVENIDA LORENZO**

City

**NEWPORT BEACH**

State

**CA**

Zip Code

**92660**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employee

Occupation

Receipt For:

☒ Primary

☐ General

Other (specify)

Election Cycle-to-Date

**15000**

Date of Receipt

**06 30 2004**

Amount of Each Receipt this Period

**15000**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

Full Name (Last, First, Middle Initial)

**B. ECKHART MICHAEL**

Mailing Address

**BLOOMINGDALE RD**

City

**KINGSPORT**

State

**TN**

Zip Code

**37660**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employee

Occupation

Receipt For:

☒ Primary

☐ General

Other (specify)

Election Cycle-to-Date

**10000**

Date of Receipt

**06 22 2004**

Amount of Each Receipt this Period

**10000**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

Full Name (Last, First, Middle Initial)

**C. GREENE FRANK**

Mailing Address

**123 W. 3RD ST.**

City

**FREDERICK**

State

**MD**

Zip Code

**21701**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employee

Occupation

**RETIRED**

Receipt For:

☒ Primary

☐ General

Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**04 30 2004**

Amount of Each Receipt this Period

**500.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)

**750.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category on the  
 Detailed Statement Page

FEC LINE NUMBER

PAGE 4 of 10

(check only one)

☒ 1a ☐ 1b ☐ 1c ☐ 1d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (in full)

COMMITTEE TO ELECT GRAHAM LEONARD

Full Name (Last, First, Middle Initial)

A. LAUBACH BOB

Mailing Address

226 STRATFORD ST

City

SYRACUSE

State

NY

Zip Code

13210-3052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary☐ General

Other (specify) ▼

Election Cycle-to-Date ▼

20000

Date of Receipt

05 30 2004

Amount of Each Receipt This Period

200.00

Units Increased Due to Opponent's  
Spending (2 U.S.C. §441a)(4)(A)-(I)

Full Name (Last, First, Middle Initial)

B. LEONARD MARIL ANN

Mailing Address

5108 BLOOMINGDALE RD

City

KINGSPORT

State

TN

Zip Code

31600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary☐ General

Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

04 12 2004

Amount of Each Receipt this Period

100.00

Units Increased Due to Opponent's  
Spending (2 U.S.C. §441a)(4)(A)-(I)

Full Name (Last, First, Middle Initial)

C. NEWMAN WILDA

Mailing Address

5964 RESINATE RUN

City

COLUMBIA

State

MD

Zip Code

21045

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

06 01 2004

Amount of Each Receipt this Period

100.00

Units Increased Due to Opponent's  
Spending (2 U.S.C. §441a)(4)(A)-(I)

SUBTOTAL of Receipts This Page (optional)...

400.00

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

 FORM LINE NUMBER  
 (check only one)

 PAGE **5** OF **10**
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 11e

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NAME OF COMMITTEE (in Full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**A. HOLADAY BART**

Mailing Address

**400 E. OHIO ST APT #2504**

City

**CHICAGO IL 60611**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

**RETIRED**

Occupation

**MERCHANT BANKER**

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle to Date ▼

**1,000.00**

Date of Receipt

**05 25 2004**

Amount of Each Receipt This Period

**1,000.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

Full Name (Last, First, Middle Initial)

**B. HORNE DOUGLAS A.**

Mailing Address

**415 N CEDAR BLUFF RD SUITE 205**

City

**KNOXVILLE TN 37923**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

**SELF-EMPLOYED**

Occupation

Election Cycle to Date ▼

**500.00**

Date of Receipt

**06 30 2004**

Amount of Each Receipt This Period

**500.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

Full Name (Last, First, Middle Initial)

**C. KENT GEDDEREN**

Mailing Address

**3701 CONNECTICUT AVE #436**

City

**WASHINGTON DC 20008**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

**RETIRED**

Occupation

Election Cycle to Date ▼

**300.00**

Date of Receipt

**04 30 2004**

Amount of Each Receipt This Period

**300.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)

**1800.00**

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: PAGE **6** of **10**  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12  
☐ 12 ☐ 15a ☐ 15b ☐ 16 ☐ 17

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NAME OF COMMITTEE (in full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**PAGANELLI ROBERT**

Date of Receipt

**04 21 2004**

Mailing Address

**50 FOREST PLACE**

City

**FREDONIA**

State

**NY**

Zip Code

**14063**

FEC ID number of contributing federal political committee.

**C**

Amount of Each Receipt This Period

**100.00**

Name of Employer

Occupation

Receipt For

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date

**100.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-(C))

Full Name (Last, First, Middle Initial)

**RITTER PENN**

Date of Receipt

**05 20 2004**

Mailing Address

**14 BIRCH RD**

City

**WEST HARTFORD**

State

**CT**

Zip Code

**06119**

FEC ID number of contributing federal political committee.

**C**

Amount of Each Receipt This Period

**100.00**

Name of Employer

Occupation

Receipt For

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date

**100.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-(C))

Full Name (Last, First, Middle Initial)

**SHAMI BASEM**

Date of Receipt

**05 13 2004**

Mailing Address

**15631 BLUE ASH DR**

City

**HOUSTON**

State

**TX**

Zip Code

**77090**

FEC ID number of contributing federal political committee.

**C**

Amount of Each Receipt This Period

**1000.00**

Name of Employer

Occupation

**ELITE, INC**
**OWNER**

Receipt For

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date

**1000.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-(C))

SUBTOTAL of Receipts This Page (optional)

**1200.00**

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 PAGE **7** OF **10**  
 (check only one)  
☒ 1a ☐ 1b ☐ 1c ☐ 1d  
☐ 1e ☐ 1f ☐ 1g

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NAME OF COMMITTEE (in Full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

A. **SHAMI FAROUK**

Mailing Address

**15 DOE RUN**

City

**THE WOODLANDS**

State

**TX**

Zip Code

**77380**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**FAROUK SYSTEMS**

Occupation

**OWNER**

Receipt For:

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1,000.00**

Date of Receipt

**05 13 2004**

Amount of Each Receipt this Period

**1,000.00**Limits Increased Due to Opponent's  
Spending (2 U.S.C. §441a(1)(4)(a)-(i))

Full Name (Last, First, Middle Initial)

B. **SHAMI SAMIL**

Mailing Address

**7130 FORESTWOOD CT**

City

**MCLEAN**

State

**VA**

Zip Code

**22101**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**FAROUK SYSTEMS**

Occupation

**OWNER**

Receipt For:

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1,000.00**

Date of Receipt

**05 13 2004**

Amount of Each Receipt this Period

**1,000.00**Limits Increased Due to Opponent's  
Spending (2 U.S.C. §441a(1)(4)(a)-(i))

Full Name (Last, First, Middle Initial)

C. **SHAMI RAMI**

Mailing Address

**1518 TELKWA DR**

City

**SPRING**

State

**TX**

Zip Code

**77386**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**FAROUK SYSTEMS**

Occupation

**OWNER**

Receipt For:

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1,000.00**

Date of Receipt

**05 13 2004**

Amount of Each Receipt this Period

**1,000.00**Limits Increased Due to Opponent's  
Spending (2 U.S.C. §441a(1)(4)(a)-(i))

SUBTOTAL of Receipts This Page (optional)

**3,000.00**

TOTAL This Period (last page this line transfer only)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER: PAGE **8** OF **10**  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 11e

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NAME OF COMMITTEE (in full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**A. SHULER HANNAH**

Mailing Address

**47 HOMER AVE #54**

City

**CAMBRIDGE**

State

**MA**

Zip Code

**02138**

FEC ID number of contributing federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to Date ▼

**200.00**

Date of Receipt

**05 25 2004**

Amount of Each Receipt This Period

**200.00**

 Limits increased Due to Opponent's  
 Spending (2 U.S.C. §441a(j)(4)(A)-(i))

Full Name (Last, First, Middle Initial)

**B. WRIGHT E.M.**

Mailing Address

**4020 SKYLAND DR**

City

**KINGSPORT**

State

**TN**

Zip Code

**37664**

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

**06 04 2004**

Amount of Each Receipt This Period

**25.00**

 Limits increased Due to Opponent's  
 Spending (2 U.S.C. §441a(j)(4)(A)-(i))

Full Name (Last, First, Middle Initial)

**C. KNUDSEN JOHN P.**

Mailing Address

**410 WEATHERGREEN DR**

City

**RALEIGH**

State

**NC**

Zip Code

**27615**

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

**06 13 2004**

Amount of Each Receipt This Period

**100.00**

 Limits increased Due to Opponent's  
 Spending (2 U.S.C. §441a(j)(4)(A)-(i))

SUBTOTAL of Receipts This Page (implicit)

**325.00**

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

 FOOTLINE NUMBER:  
 (check only one)

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☒ 1Es ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 12a ☐ 12b ☐ 12c ☐ 12d

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NAME OF COMMITTEE (in full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**RITTER PATRICIA K**

Mailing Address

**180 FERN ST**

City

**WEST HARTFORD**

State

**CT**

Zip Code

**06119**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**150.00**

Date of Receipt

**05 29 2004**

Amount of Each Receipt this Period

**150.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-(i)

Full Name (Last, First, Middle Initial)

**RITTER GEORGE J**

Mailing Address

**180 FERN ST**

City

**WEST HARTFORD**

State

**CT**

Zip Code

**06119**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**150.00**

Date of Receipt

**05 30 2004**

Amount of Each Receipt this Period

**150.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-(i)

Full Name (Last, First, Middle Initial)

**RITTER MARTHA K**

Mailing Address

**180 FERN ST**

City

**WEST HARTFORD**

State

**CT**

Zip Code

**06119**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**50.00**

Date of Receipt

**05 28 2004**

Amount of Each Receipt this Period

**50.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a)(4)(A)-(i)

SUBTOTAL of Receipts This Page (optional)

**350.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedules  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBERS  
 (check only one)

 PAGE **10** OF **10**
☒ 1a ☐ 1b ☐ 1c ☐ 1d  
☐ 2 ☐ 3a ☐ 3b ☐ 4 ☐ 5

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NAME OF COMMITTEE (In Full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

**RIDGEWAY CONSTANCE G**

Mailing Address

**3871 NEWARK ST NW B-470**

City

**WASHINGTON**

State

**DC**

Zip Code

**20016-3028**

 FEC ID number of contributing  
 federal political committee

**C**

Name of Employer

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

**25.00**

Date of Receipt

**05 26 2004**

Amount of Each Receipt this Period

**25.00**

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

Full Name (Last, First, Middle Initial)

**B.**

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

Amount of Each Receipt this Period

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

Full Name (Last, First, Middle Initial)

**C.**

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

Amount of Each Receipt this Period

 Limits Increased Due to Opponent's  
 Spending (2 U.S.C. §441a(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)

**25.00**

TOTAL This Period (last page this line number only)

**10,300.00**

**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

OF

|     |     |     |     |
|-----|-----|-----|-----|
| 17  | 18  | 19a | 19b |
| 20a | 20b | 20c | 21  |

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NAME OF COMMITTEE (in full)

**COMMITTEE TO ELECT GRAHAM LEONARD**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**04 28 2004**
**A. GREENE COUNTY NATIONAL BANK**

Mailing Address

**100 N. MAIN ST**

City

**GREENEVILLE**

State

**TN**

Zip Code

**37743**

Purpose of Disbursement

**BANK STATIONARY**

Candidate Name

**GRAHAM LEONARD**
Category/  
Type

Amount of Each Disbursement this Period

**9141**

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 402.55

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☒ Primary

☐ General

☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 402.55

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 402.55

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements (this Page optional)

TOTAL This Period (add pages this line number only)

**91.41**
**91.41**

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.

|                                                                            |                                                       |
|----------------------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Hand Delivered                                    | Date of Receipt                                       |
| <input type="checkbox"/> USPS First Class Mail                             | Postmarked                                            |
| <input checked="" type="checkbox"/> USPS Registered/Certified              | Postmarked (R/C)<br>7-14-04                           |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked                                            |
|                                                                            | Delivery Confirmation™ Label <input type="checkbox"/> |
| <input type="checkbox"/> USPS Express Mail                                 | Postmarked                                            |
| <input type="checkbox"/> Postmark Illegible                                |                                                       |
| <input type="checkbox"/> No Postmark                                       |                                                       |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date                                         |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt                                       |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt                                       |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt                                       |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked                         |
| <i>FEI</i><br>PREPARER                                                     | 7-28-04<br>DATE PREPARED                              |

(5/2004)