

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Defend Louisiana PAC
FEC IDENTIFICATION NUMBER C C00616128
Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on

Full Name of Payee BOLD
Mailing Address 1746 Jackson Ave
City New Orleans State LA Zip Code 70115
Purpose of Expenditure Community outreach Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 6000.00
Transaction ID : SE.4355
Date of Disbursement or Obligation 10/31/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , , [X] Support [ ] Oppose
Office Sought: [ ] House District: 00 [ ] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 257090.52
Disbursement For: [ ] Primary [X] General 2016 [ ] Other (specify)

Full Name of Payee Jefferson United
Mailing Address 1901 Manhattan Blvd. Suite 203
City Harvey State LA Zip Code 70058
Purpose of Expenditure Community outreach Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 10000.00
Transaction ID : SE.4356
Date of Disbursement or Obligation 10/31/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , , [X] Support [ ] Oppose
Office Sought: [ ] House District: 00 [ ] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 276090.52
Disbursement For: [ ] Primary [X] General 2016 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Townsend, Taylor, , , [Electronically Filed] Date 10/31/2016
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Defend Louisiana PAC
FEC IDENTIFICATION NUMBER C C00616128
Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on

Full Name of Payee NOEL
Mailing Address P.O. Box 58248
City New Orleans State LA Zip Code 70158
Purpose of Expenditure Community outreach Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 5000.00
Transaction ID : SE.4357
Date of Disbursement or Obligation 10/31/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , , [X] Support [ ] Oppose
Office Sought: [ ] House District: 00 [ ] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 266090.52
Disbursement For: [ ] Primary [X] General 2016 [ ] Other (specify)

Full Name of Payee TIPS
Mailing Address 1517 Harrison Ave.
City New Orleans State LA Zip Code 70119
Purpose of Expenditure Community outreach Category/Type 004
Date of Public Distribution/Dissemination 10/31/2016
Amount 4000.00
Transaction ID : SE.4358
Date of Disbursement or Obligation 10/31/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , , [X] Support [ ] Oppose
Office Sought: [ ] House District: 00 [ ] President [X] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 261090.52
Disbursement For: [ ] Primary [X] General 2016 [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 9000.00; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 25000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Townsend, Taylor, , , [Electronically Filed] Date 10/31/2016
Signature