

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Louisiana Reform PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="14012.49"/>	<input type="text" value="14012.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5799.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="38700"/>	<input type="text" value="109700"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="44499.52"/>	<input type="text" value="123712.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14309.23"/>	<input type="text" value="93522.2"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30190.29"/>	<input type="text" value="30190.29"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name
Louisiana Reform PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7200	17900
(ii) Unitemized	0	300
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7200	18200
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	31500	91500
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	38700	109700
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	38700	109700
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	38700	109700

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	14309.23	68522.2
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14309.23	68522.2
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	20000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. 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 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	5000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14309.23	93522.2
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14309.23	93522.2

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	38700	109700
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38700	109700
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14309.23	68522.2
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14309.23	68522.2

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

No candidate benefitted from any of the expenditures on this report. For reimbursed expenses greater than \$200 to a particular vendor, a sub-itemization memo entry has been added to disclose the expense. Any other reimbursed expenses without a memo entry are below the \$200 threshold per vendor for the calendar year.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)
A. Donald T Bollinger

Mailing Address PO Box 250

City Lockport State LA Zip Code 70374-0250

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

Name of Employer: Bollinger Shipyards Occupation: Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600**

Date of Receipt: **10 / 30 / 2014**

Transaction ID : **328-1863-c**

Amount of Each Receipt this Period: **300**

Contribution

Full Name (Last, First, Middle Initial)
B. Mark Miller

Mailing Address 310 Greenhill Circle

City Broussard State LA Zip Code 70518

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

Name of Employer: MKM & Associates, Inc Occupation: Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3000**

Date of Receipt: **10 / 30 / 2014**

Transaction ID : **888-1859-c**

Amount of Each Receipt this Period: **3000**

Contribution

Full Name (Last, First, Middle Initial)
C. Sinclair M Buquet

Mailing Address 1243 Bayou Black Drive

City Houma State LA Zip Code 70360-7510

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

Name of Employer: Self-employed Occupation: Self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600**

Date of Receipt: **10 / 30 / 2014**

Transaction ID : **891-1866-c**

Amount of Each Receipt this Period: **600**

Contribution

SUBTOTAL of Receipts This Page (optional)..... **3900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Bryan J Hanks
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 Kings Walk
 City Lafayette State LA Zip Code 70503-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beta Land Service Occupation Land Man
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300

Date of Receipt 10 / 30 / 2014
Transaction ID : 893-1870-c
 Amount of Each Receipt this Period 300
 Contribution

B. B. Jeffrey Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 5625 James Gunnell Lane
 City Alexandria State VA Zip Code 22310-1159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Adams & Reese, LLP Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000

Date of Receipt 11 / 10 / 2014
Transaction ID : 56-1890-c
 Amount of Each Receipt this Period 3000
 Contribution

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3300.00
TOTAL This Period (last page this line number only).....▶	7200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Alvarez & Marsal PAC		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 Transaction ID : 892-1869-c
Mailing Address 555 13th Street NW		Amount of Each Receipt this Period 3000
City Washington State DC Zip Code 20004-1109	FEC ID number of contributing federal political committee. C C00489948	Contribution
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000

Full Name (Last, First, Middle Initial) B. Jones, Walker, Waechter, Poitevent, Carrere, & Denegre PAC		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 Transaction ID : 369-1867-c
Mailing Address 201 Saint Charles Avenue		Amount of Each Receipt this Period 3000
City New Orleans State LA Zip Code 70170-1000	FEC ID number of contributing federal political committee. C C00111534	Contribution
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000

Full Name (Last, First, Middle Initial) C. National Association of Home Builders		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 Transaction ID : 791-1868-c
Mailing Address 1201 15th Street NW		Amount of Each Receipt this Period 5000
City Washington State DC Zip Code 20005-2899	FEC ID number of contributing federal political committee. C C00000901	Contribution
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Nuclear Energy Institute PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 F Street NW
 Floor 11
 City Washington State DC Zip Code 20004-1217
 FEC ID number of contributing federal political committee. **C** C00239848
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : 889-1864-c
 Amount of Each Receipt this Period
 3000
 Contribution

B. The Clark Hill Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 Woodward Avenue
 Suite 3500
 City Detroit State MI Zip Code 48226-3485
 FEC ID number of contributing federal political committee. **C** C00413484
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : 890-1865-c
 Amount of Each Receipt this Period
 3000
 Contribution

C. KOCHPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 655 15th Street NW
 Suite 445
 City Washington State DC Zip Code 20005-5727
 FEC ID number of contributing federal political committee. **C** C00236489
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : 245-1862-c
 Amount of Each Receipt this Period
 5000
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Brick PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1850 Centennial Park Drive
Suite 301
City Reston State VA Zip Code 20191-1542
FEC ID number of contributing federal political committee. **C** C00429712
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2014
Transaction ID : 898-1887-c
Amount of Each Receipt this Period
500
Contributions

B. Chicago Bridge & Iron PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1050 K Street NW
Suite 620
City Washington State DC Zip Code 20001-4456
FEC ID number of contributing federal political committee. **C** C00104885
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2014
Transaction ID : 896-1885-c
Amount of Each Receipt this Period
3000
Contribution

C. Franchising Political Action Committee
Full Name (Last, First, Middle Initial)
Mailing Address 1501 K Street NW
Suite 350
City Washington State DC Zip Code 20005-1412
FEC ID number of contributing federal political committee. **C** C00084491
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2014
Transaction ID : 897-1886-c
Amount of Each Receipt this Period
3000
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 12 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)
A. National Association of Convenience Stores PAC

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014

Transaction ID : 899-1888-c

Amount of Each Receipt this Period
 3000

Contribution

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	31500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. Walt Disney World

Mailing Address 1675 N Buena Vista Dr

City State Zip Code
Lake Buena Vista FL 32830

Purpose of Disbursement
Fundraising: Fundraiser - entertainment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-803-1860-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Walt Disney World

Mailing Address 1675 N Buena Vista Dr

City State Zip Code
Lake Buena Vista FL 32830

Purpose of Disbursement
Fundraising: Fundraiser - entertainment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-803-1861-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CompleteCampaigns.com

Mailing Address 610 Gateway Center Way
Suite K

City State Zip Code
San Diego CA 92102-4548

Purpose of Disbursement
Software/software licensing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-164-1874-e

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. The LS Group, Inc.

Mailing Address 736 N Columbus Street

City Alexandria State VA Zip Code 22314-1851

Purpose of Disbursement
Fundraising: Fundraising consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : **SB21B-386-1872-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Monica H Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement
Administrative consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : **SB21B-165-1873-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CompleteCampaigns.com

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
Credit card fee/merchant fee

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : **SB21B-164-1871-e**

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. Walt Disney World

Mailing Address 1675 N Buena Vista Dr

City Lake Buena Vista State FL Zip Code 32830

Purpose of Disbursement
Fundraising: Fundraiser - entertainment

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B-803-1875-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CompleteCampaigns.com

Mailing Address 610 Gateway Center Way Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
Credit card fee/merchant fee

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B-164-1889-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Restaurant Marrakesh

Mailing Address 1510 N Avenue of the Stars

City Lake Buena Vista State FL Zip Code 32830

Purpose of Disbursement
Fundraising: Fundraiser - food

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B-894-1877-e

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. Kyle Ruckert

Mailing Address 703 7th Street SE

City Washington State DC Zip Code 20003-2740

Purpose of Disbursement
Travel: Meals/Car rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2014

Transaction ID : SB21B-64-1883-e

Amount of Each Disbursement this Period

351.9

Full Name (Last, First, Middle Initial)

B. Dollar Rent A Car

Mailing Address 5330 E 31st Street

City Tulsa State OK Zip Code 74135-5076

Purpose of Disbursement
Travel: Car rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2014

Transaction ID : SB21B-901-6-V

Amount of Each Disbursement this Period

323.08

[MEMO ITEM]

Subitemization of Kyle Ruckert (11/10/14)

Full Name (Last, First, Middle Initial)

C. Walt Disney World

Mailing Address 1675 N Buena Vista Dr

City Lake Buena Vista State FL Zip Code 32830

Purpose of Disbursement
Fundraising: Fundraiser - entertainment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

003

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2014

Transaction ID : SB21B-803-1876-e

Amount of Each Disbursement this Period

2716.31

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3068.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. Kyle Ruckert

Mailing Address 703 7th Street SE

City Washington State DC Zip Code 20003-2740

Purpose of Disbursement
Travel: Meals/Lodging/Hotel

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-64-1884-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Walt Disney World

Mailing Address 1675 N Buena Vista Dr

City Lake Buena Vista State FL Zip Code 32830

Purpose of Disbursement
Travel: Lodging/Hotel

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-803-5-V

Amount of Each Disbursement this Period

[MEMO ITEM]

Subitemization of Kyle Ruckert (11/13/14)

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Travel: Airfare

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-191-1880-e

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. ABC NYC Concierge

Mailing Address 6244 Saunders Street

City Rego Park State NY Zip Code 11374-1557

Purpose of Disbursement
Travel: Transportation

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-895-1879-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement
Administrative/Salary/Overhead: Meal

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-252-1891-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. US Airways, Inc.

Mailing Address 111 W Rio Salado Parkway

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement
Travel: Airfare

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-167-1881-e

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. Mrs. Wendy Vitter

Mailing Address 238 Helios Avenue

City Metairie State LA Zip Code 70005-3755

Purpose of Disbursement
Administrative/Salary/Overhead: Meals

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-124-1892-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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