

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Republican Party of Louisiana

ADDRESS (number and street) 11440 North Lake Sherwood Ave  
 Check if different than previously reported. (ACC)  
Baton Rouge LA 70816

2. **FEC IDENTIFICATION NUMBER** C00187450  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2006 through 06 30 2006

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 Charlie Buckels

Signature of Treasurer Electronically Filed by Charlie Buckels Date 07 20 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		3612.53
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	103728.05									
(c) Total Receipts (from Line 19) .....	30141.56	267466.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	133869.61	271079.03								
7. Total Disbursements (from Line 31) .....	39562.06	176771.48								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	94307.55	94307.55								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	80299.37									

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**

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	16400.00	63115.00
(i) Itemized (use Schedule A) .....	13468.07	48232.42
(ii) Unitemized .....	29868.07	111347.42
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	119000.00
(c) Other Political Committees (such as PACs) .....	29868.07	230347.42
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	245.00	6195.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	28.49	30924.08
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	28.49	30924.08
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30141.56	267466.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30113.07	236542.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5.03	5457.22
(ii) Non-Federal Share.....	28.49	30924.08
(b) Other Federal Operating Expenditures.....	27934.20	128795.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	27967.72	165177.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	11594.34	11594.34
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	11594.34	11594.34
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	39562.06	176771.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	39533.57	145847.40

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	29868.07	230347.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29868.07	230347.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27939.23	134253.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	245.00	6195.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	27694.23	128058.06

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Dudley Bertrand

Mailing Address 111 Dupont Circle

City State Zip Code  
West Monroe LA 71291-4715

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2006

Transaction ID: 60619.C57792

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Manning Billeaud

Mailing Address 145 Girard Woods Dr

City State Zip Code  
Lafayette LA 70503-2807

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2006

Transaction ID: 60710.C58152

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Anthony Blalock

Mailing Address 202 Perdido Ln

City State Zip Code  
Lafayette LA 70503-5828

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2006

Transaction ID: 60710.C58100

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Gail Broussard

Mailing Address 203 Mathews Blvd

City State Zip Code  
Lafayette LA 70508-5727

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2006

Transaction ID: 60710.C58091

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Greene S Butler

Mailing Address 929 N Main St

City State Zip Code  
Homer LA 71040-3845

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

Transaction ID: 60710.C58119

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Colton

Mailing Address 1406 7th St

City State Zip Code  
New Orleans LA 70115

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

Name of Employer Self Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2006

Transaction ID: 60710.C58174

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Clyde Courtright

Mailing Address 106 Clipper Cv

City State Zip Code  
Lafayette LA 70508-7024

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

Name of Employer Self Occupation Geologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 20 / 2006

Transaction ID: 60710.C58048

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dan Donald

Mailing Address PO Box 675

City State Zip Code  
Jennings LA 70546

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

Name of Employer Jeff Davis Bank & Trust Occupation Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 13 / 2006

Transaction ID: 60619.C57952

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Sara Dunham

Mailing Address 2603 E Lakeshore Dr

City State Zip Code  
Baton Rouge LA 70808-2149

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 27 / 2006

Transaction ID: 60710.C58158

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Malcolm Falgoust

Mailing Address 117 Belle Terre

City State Zip Code  
La Place LA 70068

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

Name of Employer Occupation  
Keller Williams Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2006

Transaction ID: 60619.C57670

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Michael Futrell

Mailing Address 10875 Belle Cour Way

City State Zip Code  
Shreveport LA 71106-4606

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

Name of Employer Occupation  
Self Physican

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2006

Transaction ID: 60710.C58129

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ernestine George

Mailing Address 222 Grand Ave

City State Zip Code  
Lafayette LA 70503

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

Name of Employer Occupation  
Sidewinder Pumps Inc Secretary/ Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2350.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2006

Transaction ID: 60619.C57933

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Ernestine George

Mailing Address 222 Grand Ave

City State Zip Code  
Lafayette LA 70503

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

Name of Employer Occupation  
Sidewinder Pumps Inc Secretary/ Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2006

Transaction ID: 60710.C58151

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William Goggans

Mailing Address 162 Chateau Latour Dr

City State Zip Code  
Kenner LA 70065-2023

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2006

Transaction ID: 60710.C58064

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Griffith

Mailing Address PO Box 91610

City State Zip Code  
Lafayette LA 70509-1610

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

Name of Employer Occupation  
Self Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

Transaction ID: 60619.C57869

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Richard Griffith

Mailing Address PO Box 91610

City State Zip Code  
Lafayette LA 70509-1610

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2006

Transaction ID: 60710.C58173

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Gregory Hamer

Mailing Address 805 Pine St

City State Zip Code  
Morgan City LA 70380-1826

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

Name of Employer B & G Food Ent., Inc Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60710.C58051

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Fred Hogeman

Mailing Address 8 Rue Toulouse

City State Zip Code  
Baton Rouge LA 70808-4681

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

Transaction ID: 60619.C57870

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Monty Joseph Ingles

Mailing Address PO Box 485

City State Zip Code  
Folsom LA 70437-0485

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2006

Transaction ID: 60619.C57854

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Joe Klutts

Mailing Address 328 Martial Avenue

City State Zip Code  
Lafayette LA 70508

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

Name of Employer Self Occupation Geologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

Transaction ID: 60619.C57894

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Charles Lane

Mailing Address 201 St Charles Ave

City State Zip Code  
New Orleans LA 70170

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

Name of Employer Jones, Walker et. al Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2006

Transaction ID: 60710.C58077

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Walter Ledet

Mailing Address 914 Cypress St

City State Zip Code  
Sulphur LA 70663

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 13 / 2006

Transaction ID: 60619.C57945

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
Crowley LA 70526

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

Name of Employer LA Pac Manufacturing Occupation General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2006

Transaction ID: 60710.C58145

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Marcie Little

Mailing Address 218 Circle Dr

City State Zip Code  
Franklin LA 70538

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

Name of Employer Best efforts Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2006

Transaction ID: 60710.C58102

Amount of Each Receipt this Period  
2000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ross Little		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6	
Mailing Address 100 Harwell Drive		<b>Transaction ID:</b> 60710.C58095	
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Teche Federal Bank	Occupation Marketing Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Stuart Lunn		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address 717 Amsouth Bank Building		<b>Transaction ID:</b> 60619.C57925	
City State Zip Code Shreveport LA 71101	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Janice Mosing		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 131 Wembley Road		<b>Transaction ID:</b> 60710.C58187	
City State Zip Code Lafayette LA 70503-3568	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer None	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Kam Movassaghi

Mailing Address 9253 N Berkley Hills Dr

City State Zip Code  
Baton Rouge LA 70809-2470

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2006

Transaction ID: 60710.C58093

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dave Roberts

Mailing Address 17747 Airline Hwy

City State Zip Code  
Prairieville LA 70769-3701

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

Name of Employer Excel Occupation pres/ceo

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

Transaction ID: 60619.C57857

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lawrence Sandoz

Mailing Address P O Box 10

City State Zip Code  
Opelousas LA 70571

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 07 / 2006

Transaction ID: 60619.C57851

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Bonnie Schulz

Mailing Address 7 Sparrow Ln

City State Zip Code  
New Orleans LA 70123-2033

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

Name of Employer Self Occupation Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2006

Transaction ID: 60710.C58054

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Benita Scott

Mailing Address 1322 Brooklyn Avenue

City State Zip Code  
Metairie LA 70010

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

Name of Employer East Jefferson General Hospital Occupation activities therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2006

Transaction ID: 60710.C58143

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
John Shank

Mailing Address 4116 Woodside Drive

City State Zip Code  
Lake Charles LA 70605

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 06 / 2006

Transaction ID: 60619.C57830

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich

Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

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

Name of Employer Occupation  
Out of the Box Designs President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 20 / 2006

Transaction ID: 60710.C58142

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Margie Villere

Mailing Address 1443 Eleonore St

City State Zip Code  
New Orleans LA 70115

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 13 / 2006

Transaction ID: 60710.C58112

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Annette White

Mailing Address 106 Wilree Drive

City State Zip Code  
New Iberia LA 70563

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 09 / 2006

Transaction ID: 60619.C57863

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 49	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Richard Williams

Mailing Address 1126 Rosetta St

City State Zip Code  
Lake Charles LA 70607-1928

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

Name of Employer Occupation  
Retired Information Requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	6

Transaction ID: 60619.C57758

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	16400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 49
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
La Workers Comp Corp

Mailing Address 2237 S Acadian Thruway Ste 102

City	State	Zip Code
Baton Rouge	LA	70808-

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	6

Transaction ID: 60710.C58099

Amount of Each Receipt this Period  
245.00

Offsets to Operating Expenditure

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	245.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	245.00

**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)

PAGE 20 / 49

<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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. ADT Security Systems</b>		<b>Transaction ID:</b> 60714.E12998 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 8683 Siegen Lane		Amount of Each Disbursement this Period 34.99
City Baton Rouge State LA Zip Code 70810-	Category/ Type  SECURITY	
Purpose of Disbursement SECURITY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		<b>Transaction ID:</b> 60714.E12903 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-	Category/ Type  SOFTWARE HOSTING	
Purpose of Disbursement SOFTWARE HOSTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>		<b>Transaction ID:</b> 60714.E12952 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-	Category/ Type  SOFTWARE HOSTING	
Purpose of Disbursement SOFTWARE HOSTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2034.99
<b>TOTAL</b> 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)

PAGE 21 / 49

<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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Blue Cross Blue Shield</b>		<b>Transaction ID:</b> 60714.E12909 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address PO Box 261798		Amount of Each Disbursement this Period 96.86
City Baton Rouge	State LA Zip Code 70826-	
Purpose of Disbursement HEALTH INS		HEALTH INS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Blue Cross Blue Shield</b>		<b>Transaction ID:</b> 60714.E12967 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address PO Box 261798		Amount of Each Disbursement this Period 215.15
City Baton Rouge	State LA Zip Code 70826-	
Purpose of Disbursement HEALTH INS		HEALTH INS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Blue Cross Blue Shield</b>		<b>Transaction ID:</b> 60714.E12988 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 261798		Amount of Each Disbursement this Period 312.01
City Baton Rouge	State LA Zip Code 70826-	
Purpose of Disbursement HEALTH INS		HEALTH INS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	624.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

PAGE 22 / 49

<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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Canon Financial Services, Inc</b>		<b>Transaction ID:</b> 60714.E12911 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address P. O. Box 4004		Amount of Each Disbursement this Period 628.82	
City Carol Stream State IL Zip Code 60197-4004	Purpose of Disbursement COPIER RENTAL	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COPIER RENTAL	

Full Name (Last, First, Middle Initial) <b>B. Cingular Wireless</b>		<b>Transaction ID:</b> 60714.E12961 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address PO Box 650584		Amount of Each Disbursement this Period 40.50	
City Dallas State TX Zip Code 75265-0584	Purpose of Disbursement CELL PHONE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CELL PHONE	

Full Name (Last, First, Middle Initial) <b>C. Computer Evolution</b>		<b>Transaction ID:</b> 60714.E12913 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 14465 Wax Rd Ste B		Amount of Each Disbursement this Period 403.68	
City Baton Rouge State LA Zip Code 70818-4233	Purpose of Disbursement COMPUTER REPAIR	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPUTER REPAIR	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1073.00
<b>TOTAL</b> 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)

PAGE 23 / 49

<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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Karen Connolly</b>		<b>Transaction ID:</b> 60714.E12885 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 6880 Christopher		Amount of Each Disbursement this Period 836.45	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) <b>B. Karen Connolly</b>		<b>Transaction ID:</b> 60714.E12886 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address 6880 Christopher		Amount of Each Disbursement this Period 836.45	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement SALARY	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) <b>C. Continental Airlines</b>		<b>Transaction ID:</b> 60714.E12959 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address		Amount of Each Disbursement this Period 982.40	
City State Zip Code -	Purpose of Disbursement GENERIC TRAVEL	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	GENERIC TRAVEL	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2655.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Cox Communications</b>		<b>Transaction ID:</b> 60714.E12997 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address P O Box 139004		Amount of Each Disbursement this Period 383.19
City Tyler State TX Zip Code 75713-9004	TELEPHONES	
Purpose of Disbursement TELEPHONES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Jody Crouch</b>		<b>Transaction ID:</b> 60714.E12882 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 212 Loop Dr		Amount of Each Disbursement this Period 316.00
City Slidell State LA Zip Code 70458-1320	INTERN SALARY	
Purpose of Disbursement INTERN SALARY Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Jody Crouch</b>		<b>Transaction ID:</b> 60714.E12955 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 212 Loop Dr		Amount of Each Disbursement this Period 320.00
City Slidell State LA Zip Code 70458-1320	INTERN SALARY	
Purpose of Disbursement INTERN SALARY Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1019.19
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Ellen Wray Davis</b>		<b>Transaction ID:</b> 60714.E12950 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period 840.00
City Baton Rouge State LA Zip Code 70810-	Purpose of Disbursement COMMISSION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMMISSION

Full Name (Last, First, Middle Initial) <b>B. De Lage Landen Financial Svcs</b>		<b>Transaction ID:</b> 60714.E12960 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address P. O. Box 41601		Amount of Each Disbursement this Period 328.19
City Philadelphia State PA Zip Code 19101-1601	Purpose of Disbursement COMPUTER LEASING Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPUTER LEASING

Full Name (Last, First, Middle Initial) <b>C. Demco</b>		<b>Transaction ID:</b> 60714.E12908 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address P. O. Box 2153		Amount of Each Disbursement this Period 153.79
City Birmingham State AL Zip Code 35287-1340	Purpose of Disbursement UTILITIES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	UTILITIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1321.98
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Direct Mailing Services, Inc</b>		<b>Transaction ID:</b> 60714.E12984 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 12511 East Millburn Avenue		Amount of Each Disbursement this Period 2000.00
City Baton Rouge State LA Zip Code 70815-	Purpose of Disbursement GENERIC FUNDRAISING CONSULT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	GENERIC FUNDRAISING CONSULT

Full Name (Last, First, Middle Initial) <b>B. Fireside Room at Joeys</b>		<b>Transaction ID:</b> 60714.E12941 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 503 Bertrand Dr		Amount of Each Disbursement this Period 679.68
City Lafayette State LA Zip Code 70506-5542	Purpose of Disbursement FOOD FOR LAFAYETTE GENERIC FUNDRAIS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FOOD FOR LAFAYETTE GENERIC FUNDRAIS

Full Name (Last, First, Middle Initial) <b>C. Gage Telephone</b>		<b>Transaction ID:</b> 60714.E12907 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 11815 Sunbelt Court		Amount of Each Disbursement this Period 247.50
City Baton Rouge State LA Zip Code 70809-	Purpose of Disbursement TELEPHONE REPAIR Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TELEPHONE REPAIR

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2927.18
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Arthur J. Gallagher Risk Mgmt Serv</b>		<b>Transaction ID:</b> 60714.E12953 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 235 Highlandia Dr Ste 200 Suite 200		Amount of Each Disbursement this Period 2625.00
City Baton Rouge State LA Zip Code 70810-5903	Category/ Type  INSURANCE	
Purpose of Disbursement INSURANCE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jacob Gower</b>		<b>Transaction ID:</b> 60714.E12881 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 204 Hermitage Ave.		Amount of Each Disbursement this Period 276.00
City Lafayette State LA Zip Code 70503-	Category/ Type  INTERN SALARY	
Purpose of Disbursement INTERN SALARY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jacob Gower</b>		<b>Transaction ID:</b> 60714.E12964 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 204 Hermitage Ave.		Amount of Each Disbursement this Period 320.00
City Lafayette State LA Zip Code 70503-	Category/ Type  INTERN SALARY	
Purpose of Disbursement INTERN SALARY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3221.00
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

<b>A. Hanover Insurance Company</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 4031 City Woburn State MA Zip Code 01888-4031 Purpose of Disbursement INS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60714.E12954 <b>Date of Disbursement:</b> 06 / 20 / 2006 Amount of Each Disbursement this Period 852.07 Category/Type INS
---	--	--

<b>B. Iberia Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 3700 Essen Ln City Baton Rouge State LA Zip Code 70809- Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60714.E12880 <b>Date of Disbursement:</b> 06 / 10 / 2006 Amount of Each Disbursement this Period 23.75 Category/Type BANK FEES
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<b>C. Iberia Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 3700 Essen Ln City Baton Rouge State LA Zip Code 70809- Purpose of Disbursement MERCHANT FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60714.E12939 <b>Date of Disbursement:</b> 06 / 14 / 2006 Amount of Each Disbursement this Period 30.76 Category/Type MERCHANT FEES
---	--	---

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	906.58
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Iberia Bank</b>		<b>Transaction ID:</b> 60714.E12951 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period 750.68
City Baton Rouge	State LA Zip Code 70809-	
Purpose of Disbursement PAYROLL TAXES		PAYROLL TAXES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Iberia Bank</b>		<b>Transaction ID:</b> 60714.E12990 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period 1639.38
City Baton Rouge	State LA Zip Code 70809-	
Purpose of Disbursement PAYROLL TAXES		PAYROLL TAXES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Iberia Bank Visa</b>		<b>Transaction ID:</b> 60714.E12991 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 30495		Amount of Each Disbursement this Period 718.00
City Tampa	State FL Zip Code 33630-3495	
Purpose of Disbursement DEBT PAYMENT		DEBT PAYMENT
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3108.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. McDermott, Will &amp; Emory</b>		<b>Transaction ID:</b> 60714.E12902 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 600 Thirteenth St. NW		Amount of Each Disbursement this Period 500.00	
City Washington State DC Zip Code 20005-	Purpose of Disbursement LEGAL FEES Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

LEGAL FEES

Full Name (Last, First, Middle Initial) <b>B. McDermott, Will &amp; Emory</b>		<b>Transaction ID:</b> 60714.E12996 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 600 Thirteenth St. NW		Amount of Each Disbursement this Period 500.00	
City Washington State DC Zip Code 20005-	Purpose of Disbursement LEGAL FEES Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

LEGAL FEES

Full Name (Last, First, Middle Initial) <b>C. Eric Miller Photography</b>		<b>Transaction ID:</b> 60714.E12877 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 5 Echezeaux Dr		Amount of Each Disbursement this Period 267.00	
City Kenner State LA Zip Code 70065-1115	Purpose of Disbursement PHOTOGRAPHY Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

PHOTOGRAPHY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1267.00
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Office Depot Credit Plan</b>		<b>Transaction ID:</b> 60714.E12965 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address P. O. Box 9020		Amount of Each Disbursement this Period 141.20
City Des Moines State IA Zip Code 50368-9020	SUPPLIES	
Purpose of Disbursement SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. James L Quinn</b>		<b>Transaction ID:</b> 60714.E12883 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 419 Northline St		Amount of Each Disbursement this Period 1354.39
City Metairie State LA Zip Code 70005-4451	SALARY	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. James L Quinn</b>		<b>Transaction ID:</b> 60714.E12884 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 419 Northline St		Amount of Each Disbursement this Period 1354.39
City Metairie State LA Zip Code 70005-4451	SALARY	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2849.98
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. R &amp; C Properties</b>		<b>Transaction ID:</b> 60714.E12999
Mailing Address 16851 Cicero Ave		Date of Disbursement 06 / 29 / 2006
City Baton Rouge	State LA	Zip Code 70816-1853
Purpose of Disbursement RENT	Amount of Each Disbursement this Period 2385.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	RENT	

Full Name (Last, First, Middle Initial) <b>B. Targeted Creative Communicatio</b>		<b>Transaction ID:</b> 60714.E12901
Mailing Address 1000 Duke Street		Date of Disbursement 06 / 09 / 2006
City Alexandria	State VA	Zip Code 22314-
Purpose of Disbursement DEBT REPAYMENT	Amount of Each Disbursement this Period 500.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	DEBT REPAYMENT	

Full Name (Last, First, Middle Initial) <b>C. Targeted Creative Communicatio</b>		<b>Transaction ID:</b> 60714.E12987
Mailing Address 1000 Duke Street		Date of Disbursement 06 / 29 / 2006
City Alexandria	State VA	Zip Code 22314-
Purpose of Disbursement DEBT REPAYMENT	Amount of Each Disbursement this Period 500.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	DEBT REPAYMENT	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3385.00</b>
<b>TOTAL</b> 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)

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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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. U S Postmaster</b>		Transaction ID: 60714.E12966 Date of Disbursement MM / DD / YYYY 06 / 21 / 2006	
Mailing Address 10380 Perkins Rd		Amount of Each Disbursement this Period 30.19	
City Baton Rouge	State LA	Zip Code 70810-	Category/ Type
Purpose of Disbursement THANK YOU LTRS BULK POSTAGE			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	THANK YOU LTRS BULK POSTAGE		

Full Name (Last, First, Middle Initial) <b>B. U S Postmaster</b>		Transaction ID: 60714.E12986 Date of Disbursement MM / DD / YYYY 06 / 27 / 2006	
Mailing Address 10380 Perkins Rd		Amount of Each Disbursement this Period 117.00	
City Baton Rouge	State LA	Zip Code 70810-	Category/ Type
Purpose of Disbursement POSTAGE			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	POSTAGE		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

147.19

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

26540.47

**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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Alexandria Office Suites</b>		<b>Transaction ID:</b> 60714.E12982 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1104 Macarthur Dr		Amount of Each Disbursement this Period 400.00
City Alexandria State LA Zip Code 71303-3122	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ALLTELL</b>		<b>Transaction ID:</b> 60714.E13006 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address P O Box 530533		Amount of Each Disbursement this Period 405.65
City Atlanta State GA Zip Code 30353-0533	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ALLTELL</b>		<b>Transaction ID:</b> 60714.E13010 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address P O Box 530533		Amount of Each Disbursement this Period 252.99
City Atlanta State GA Zip Code 30353-0533	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1058.64
<b>TOTAL</b> 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<p><b>A. ALLTELL</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address P O Box 530533</p> <p>City Atlanta State GA Zip Code 30353-0533</p> <p>Purpose of Disbursement FEA GENERIC VOTER DRIVE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 60714.E13013 <b>Date of Disbursement:</b> 06 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 138.18</p> <p>FEA GENERIC VOTER DRIVE</p>
<p><b>B. Sharon &amp; Frank Bonner</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 2401 Jasmine St</p> <p>City Monroe State LA Zip Code 71201-4127</p> <p>Purpose of Disbursement FEA GENERIC VOTER DRIVE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 60714.E12985 <b>Date of Disbursement:</b> 06 / 26 / 2006</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>FEA GENERIC VOTER DRIVE</p>
<p><b>C. Blake Cooper</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 927 Stones Way Dr</p> <p>City Pineville State LA Zip Code 71360-4008</p> <p>Purpose of Disbursement FEA GENERIC VOTER DRIVE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 60714.E12899 <b>Date of Disbursement:</b> 06 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 1695.65</p> <p>FEA GENERIC VOTER DRIVE</p>

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

2333.83

**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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Blake Cooper</b>		<b>Transaction ID:</b> 60714.E12983 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 927 Stones Way Dr		Amount of Each Disbursement this Period 1695.65
City Pineville State LA Zip Code 71360-4008	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Cooper Eyre</b>		<b>Transaction ID:</b> 60714.E12897 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 4813 West Gordon		Amount of Each Disbursement this Period 75.00
City Alexandria State LA Zip Code 71303-	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Cooper Eyre</b>		<b>Transaction ID:</b> 60714.E12931 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 4813 West Gordon		Amount of Each Disbursement this Period 125.00
City Alexandria State LA Zip Code 71303-	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1895.65
<b>TOTAL</b> 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Cooper Eyre</b>		<b>Transaction ID:</b> 60714.E12974 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 26 / 2006
Mailing Address 4813 West Gordon		Amount of Each Disbursement this Period 175.00
City Alexandria State LA Zip Code 71303-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial) <b>B. David Mayeaux</b>		<b>Transaction ID:</b> 60714.E12888 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 06 / 2006
Mailing Address 1412 Oaklane Loop		Amount of Each Disbursement this Period 125.00
City Pineville State LA Zip Code 71360-3512	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial) <b>C. David Mayeaux</b>		<b>Transaction ID:</b> 60714.E12926 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 12 / 2006
Mailing Address 1412 Oaklane Loop		Amount of Each Disbursement this Period 135.00
City Pineville State LA Zip Code 71360-3512	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	435.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. David Mayeaux</b>		<b>Transaction ID:</b> 60714.E12969 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1412 Oaklane Loop		Amount of Each Disbursement this Period 175.00
City Pineville State LA Zip Code 71360-3512	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Chris McLin</b>		<b>Transaction ID:</b> 60714.E12887 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 14050 Oaklane Loop		Amount of Each Disbursement this Period 125.00
City Pineville State LA Zip Code 71360-	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Chris McLin</b>		<b>Transaction ID:</b> 60714.E12925 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 14050 Oaklane Loop		Amount of Each Disbursement this Period 160.00
City Pineville State LA Zip Code 71360-	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>460.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Chris McLin</b> Full Name (Last, First, Middle Initial) Mailing Address 14050 Oaklane Loop City Pineville State LA Zip Code 71360- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12968</b> Date of Disbursement 06 / 26 / 2006 Amount of Each Disbursement this Period 225.00 FEA GENERIC VOTER DRIVE
<b>B. Scott Melvin</b> Full Name (Last, First, Middle Initial) Mailing Address 1412 Oaklane Loop City Pineville State LA Zip Code 71360-3512 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12889</b> Date of Disbursement 06 / 06 / 2006 Amount of Each Disbursement this Period 125.00 FEA GENERIC VOTER DRIVE
<b>C. Scott Melvin</b> Full Name (Last, First, Middle Initial) Mailing Address 1412 Oaklane Loop City Pineville State LA Zip Code 71360-3512 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12927</b> Date of Disbursement 06 / 12 / 2006 Amount of Each Disbursement this Period 110.00 FEA GENERIC VOTER DRIVE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>460.00</b>
<b>TOTAL</b> 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Scott Melvin</b>		<b>Transaction ID:</b> 60714.E12970 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 1412 Oaklane Loop		Amount of Each Disbursement this Period 200.00	
City Pineville State LA Zip Code 71360-3512	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

Full Name (Last, First, Middle Initial) <b>B. Allison Norris</b>		<b>Transaction ID:</b> 60714.E12935 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address 1712 Handy Loop Ext		Amount of Each Disbursement this Period 50.00	
City Pineville State LA Zip Code 71360-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

Full Name (Last, First, Middle Initial) <b>C. Allison Norris</b>		<b>Transaction ID:</b> 60714.E12976 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 1712 Handy Loop Ext		Amount of Each Disbursement this Period 200.00	
City Pineville State LA Zip Code 71360-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	450.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12898 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period 50.00	
City Deville State LA Zip Code 71328-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA GENERIC VOTER DRIVE		

<b>B.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12932 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period 125.00	
City Deville State LA Zip Code 71328-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA GENERIC VOTER DRIVE		

<b>C.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12975 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period 175.00	
City Deville State LA Zip Code 71328-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA GENERIC VOTER DRIVE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> 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)

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<input 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 checked="" type="checkbox"/> 30b

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)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Amanda Swanner</b>		Transaction ID: 60714.E12942 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006	
Mailing Address 3100 Deborah Dr Apt 22		Amount of Each Disbursement this Period 1500.00	
City Monroe State LA Zip Code 71201-2090	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

Full Name (Last, First, Middle Initial) <b>B. Target Stores</b>		Transaction ID: 60714.E13014 Date of Disbursement MM / DD / YYYY 06 / 30 / 2006	
Mailing Address		Amount of Each Disbursement this Period 586.09	
City Alexandria State LA Zip Code 71301-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

Full Name (Last, First, Middle Initial) <b>C. Dustin Walker</b>		Transaction ID: 60714.E12891 Date of Disbursement MM / DD / YYYY 06 / 06 / 2006	
Mailing Address 408 Hines Ln		Amount of Each Disbursement this Period 100.00	
City Ball State LA Zip Code 71405-3903	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2186.09
<b>TOTAL</b> 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Dustin Walker</b>		Transaction ID: 60714.E12928 Date of Disbursement MM / DD / YYYY 06 / 12 / 2006
Mailing Address 408 Hines Ln		Amount of Each Disbursement this Period 135.00
City Ball State LA Zip Code 71405-3903	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dustin Walker</b>		Transaction ID: 60714.E12971 Date of Disbursement MM / DD / YYYY 06 / 26 / 2006
Mailing Address 408 Hines Ln		Amount of Each Disbursement this Period 225.00
City Ball State LA Zip Code 71405-3903	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	360.00
<b>TOTAL</b> This Period (last page this line number only) .....	9989.21

**SCHEDULE D (FEC Form 3X)**

**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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Baton Rouge Marriott

Nature of Debt (Purpose):  
Negotiated Settlement

Mailing Address Formerly the B.R. Hilton/Davidson  
1755 Lynnfield Road- Suite 142

City State ZIP Code  
Memphis TN 38119-

Outstanding Balance Beginning This Period	<b>Transaction ID: LS0614200111E5406</b>	
181.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	181.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MCREI Inc

Nature of Debt (Purpose):  
Campaign Calls

Mailing Address 3937 Pines Rd, Ste 1

City State ZIP Code  
Shreveport LA 71119-

Outstanding Balance Beginning This Period	<b>Transaction ID: LS50729.E12245</b>	
6019.84		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	6019.84

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bauer for President

Nature of Debt (Purpose):  
Ballot Access Fee Refund

Mailing Address P O Box 6616

City State ZIP Code  
Arlington VA 22206-0616

Outstanding Balance Beginning This Period	<b>Transaction ID: LS0614200111E5408</b>	
3500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3500.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>9700.84</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**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)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Thomas Graphics			Nature of Debt (Purpose): Yard Signs-Exempt Activity
Mailing Address P. O. Box 142226			
City Austin	State TX	ZIP Code 78714-	

Outstanding Balance Beginning This Period 2000.00		<b>Transaction ID:</b> LS50729.E12246	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Targeted Creative Communicatio			Nature of Debt (Purpose): Volunteer Mass Mail
Mailing Address 1000 Duke Street			
City Alexandria	State VA	ZIP Code 22314-	

Outstanding Balance Beginning This Period 40000.00		<b>Transaction ID:</b> LS50131.E11683	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40000.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Targeted Creative Communicatio			Nature of Debt (Purpose): debt repayment
Mailing Address 1000 Duke Street			
City Alexandria	State VA	ZIP Code 22314-	

Outstanding Balance Beginning This Period 15000.00		<b>Transaction ID:</b> LS60714.E12901	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 14000.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	56000.00
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 / 49
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Jamestown Associates	Nature of Debt (Purpose): FEA Volunteer Mass Mail
Mailing Address 5 Mapleton Rd, Suite 300	
City State ZIP Code Princeton NJ 08540-	

Outstanding Balance Beginning This Period 3800.00	<b>Transaction ID:</b> LS50131.E11682	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3800.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Iberia Bank Visa	Nature of Debt (Purpose): debt payment
Mailing Address PO Box 30495	
City State ZIP Code Tampa FL 33630-3495	

Outstanding Balance Beginning This Period 11516.53	<b>Transaction ID:</b> LS60714.E12991	
Amount Incurred This Period 0.00	Payment This Period 718.00	Outstanding Balance at Close of This Period 10798.53

1) <b>SUBTOTALS</b> This Period This Page (optional).....	14598.53
2) <b>TOTALS</b> This Period (last page this line number only).....	80299.37
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

NAME OF ACCOUNT RPL- Federal 11140 North Lake Sherwoo	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 28.49
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BREAKDOWN OF TRANSFER RECEIVED		28.49
i) Total Administrative .....		Transaction ID: H360720.C58273
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	28.49
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred) .....	28.49

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)  
Iberia Bank

Mailing Address  
3700 Essen Ln

City State Zip Code  
Baton Rouge LA 70809-

Purpose of Disbursement:  
bank fees

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
36381.30

Date 06 / 20 / 2006

Transaction ID: H460714.E12879

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.03		28.49		33.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.03		28.49		33.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.03		28.49		33.52