

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Louisiana Reform PAC

Report Covering the Period: From:

M	M
0	4

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		90964.74
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	32650.46									
(c) Total Receipts (from Line 19)	61182.95	64683.06								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	93833.41	155647.80								
7. Total Disbursements (from Line 31)	33190.08	95004.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	60643.33	60643.33								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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
Louisiana Reform PAC

Report Covering the Period: From:

M	M
0	4

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	48500.00	51000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	48500.00	51000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	12500.00	13500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	61000.00	64500.00
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)	0.00	0.11
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	182.95	182.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	61182.95	64683.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	61182.95	64683.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	28190.08	45004.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28190.08	45004.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	50000.00
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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33190.08	95004.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33190.08	95004.47

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)	61000.00	64500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61000.00	64500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28190.08	45004.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.11
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28190.08	45004.36

**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 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
Harley Lippman

Mailing Address 1021 Park Avenue
7C

City State Zip Code
New York NY 10028-0959

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

Name of Employer Occupation
Genesis IO Founder/ CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 6

Transaction ID: SA11A1-28-180-c

Amount of Each Receipt this Period
5000.00

US Open Event

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

Mailing Address 5348 Southern Avenue

City State Zip Code
Dallas TX 75209-5912

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

Name of Employer Occupation
Centurion Partners, Ltmd Principal Partner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 6

Transaction ID: SA11A1-60-228-c

Amount of Each Receipt this Period
4000.00

US Open Event

C. Full Name (Last, First, Middle Initial)
Daniel Poulin

Mailing Address 150 James Drive E
Suite 140

City State Zip Code
Saint Rose LA 70087-4007

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

Name of Employer Occupation
Sealy Company Regional Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 7 / 2 0 0 6

Transaction ID: SA11A1-65-207-c

Amount of Each Receipt this Period
4000.00

US Open Event

SUBTOTAL of Receipts This Page (optional)	▶	13000.00
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 7 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Virginia Shehee		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address PO Box 88		Transaction ID: SA11A1-144-146-c
City State Zip Code Shreveport LA 71161-0088	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Kilpatrick Life Insurance Co	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Archer Frierson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 10985 Harts Island Road		Transaction ID: SA11A1-145-147-c
City State Zip Code Shreveport LA 71115-9579	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Vintage Realty Co.	Occupation Commercial Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Robert Nichols		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 6121 Fern Avenue		Transaction ID: SA11A1-146-148-c
City State Zip Code Shreveport LA 71105-4155	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Eagle Distributing of Shreve	Occupation Eagle Distributing of Shreveport, Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
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 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
Michael Woods

Mailing Address 10249 Ellerbe Road

City State Zip Code
Shreveport LA 71106-7449

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

Name of Employer Woods Operating Occupation Oil & Gas

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 13 / 2006

Transaction ID: SA11A1-147-149-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

B. Full Name (Last, First, Middle Initial)
Bobby Jelks

Mailing Address PO Box 7665

City State Zip Code
Shreveport LA 71137-7665

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

Name of Employer Franks Management Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 19 / 2006

Transaction ID: SA11A1-150-152-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

C. Full Name (Last, First, Middle Initial)
Alan Murphy

Mailing Address 400 Travis Street Suite 1910

City State Zip Code
Shreveport LA 71101-3145

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

Name of Employer Self Employed Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 17 / 2006

Transaction ID: SA11A1-151-153-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 9 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Markham Dickson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address PO Box 51367		Transaction ID: SA11A1-153-155-c
City State Zip Code Shreveport LA 71135-1367	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Morris Dickson LLC Partner	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Paul Dickson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address PO Box 51367		Transaction ID: SA11A1-154-156-c
City State Zip Code Shreveport LA 71135-1367	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Morris Dickson LLC Partner	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Will Atkins		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address 736 Linden Street		Transaction ID: SA11A1-155-157-c
City State Zip Code Shreveport LA 71104-4320	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Atco Investments Executive	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL 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 10 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
Anil Nanda, MD

Mailing Address 2718 Alvamar Drive

City State Zip Code
Shreveport LA 71106-8261

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

Name of Employer Occupation
Self Employed Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2006

Transaction ID: SA11A1-156-158-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

B. Full Name (Last, First, Middle Initial)
Allen Dickson

Mailing Address PO Box 5845

City State Zip Code
Shreveport LA 71135-5845

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

Name of Employer Occupation
Morris Dickson LLC Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2006

Transaction ID: SA11A1-158-160-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

C. Full Name (Last, First, Middle Initial)
Eugene Hilliard, III

Mailing Address 401 Edwards Street Suite 2000

City State Zip Code
Shreveport LA 71101-5509

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

Name of Employer Occupation
Hilliard Petroleum, Inc. Owner/operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2006

Transaction ID: SA11A1-159-161-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 11 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Farida Baig		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 39328 Magnolia Trace		Transaction ID: SA11A1-162-164-c
City State Zip Code Ponchatoula LA 70454-6920	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Pelican Club	
Name of Employer Occupation Self-employed Physician	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 333 Texas Street Suite 2020		Transaction ID: SA11A1-163-165-c
City State Zip Code Shreveport LA 71101-3680	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Shreveport Pelican Club	
Name of Employer Occupation Anderson Oil & Gas, Inc Vice President	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Garner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 10 Forrest Court		Transaction ID: SA11A1-170-205-c
City State Zip Code Metairie LA 70001-6155	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	NOLA Pelican Club	
Name of Employer Occupation Sher Garner Lawyer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
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 12 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Leopold Sher		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 909 Poydras Street Floor 28		Transaction ID: SA11A1-171-204-c Amount of Each Receipt this Period 500.00
City State Zip Code New Orleans LA 70112-4000	NOLA Pelican Club	
FEC ID number of contributing federal political committee. C		
Name of Employer Sher Garner Law Firm	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Juan Gershanik MD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 1303 Henry Clay Avenue		Transaction ID: SA11A1-172-203-c Amount of Each Receipt this Period 500.00
City State Zip Code New Orleans LA 70118-6008	NOLA Pelican Club	
FEC ID number of contributing federal political committee. C		
Name of Employer Neonatal Medical Group	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Wade Webster		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 4614 Carondelet Street		Transaction ID: SA11A1-180-196-c Amount of Each Receipt this Period 1000.00
City State Zip Code New Orleans LA 70115-4822	NOLA Pelican Club	
FEC ID number of contributing federal political committee. C		
Name of Employer Middleberg, Riddle & Gian- na	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2000.00
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 13 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Vaughn Fitzpatrick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1437 Washington Avenue		Transaction ID: SA11A1-182-198-c
City State Zip Code New Orleans LA 70130-5751	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	NOLA Pelican Club	
Name of Employer Occupation Self Employed Attorney	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christopher Carver		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 2708 S Carrollton Avenue		Transaction ID: SA11A1-183-199-c
City State Zip Code New Orleans LA 70118-4339	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	NOLA Pelican Club	
Name of Employer Occupation Siemens Environmental Engineer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Laborde		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 601 Poydras Street Suite 1637		Transaction ID: SA11A1-184-200-c
City State Zip Code New Orleans LA 70130-6049	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	NOLA Pelican Club	
Name of Employer Occupation None Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 14 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) L Brammer, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 333 Texas Street Suite 1116		Transaction ID: SA11A1-185-201-c
City State Zip Code Shreveport LA 71101-3677	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Self Employed Investor	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) William Fenstermaker		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 135 Regency Square		Transaction ID: SA11A1-186-209-c
City State Zip Code Lafayette LA 70508-4221	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C		US Open 2006
Name of Employer Occupation C.H. Fenstermaker & Assoc. President CEO	Aggregate Year-to-Date ▼ 4000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Ryan Lemoine		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 214 Jefferson Street Suite 200		Transaction ID: SA11A1-187-210-c
City State Zip Code Lafayette LA 70501-7050	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C		US Open Event
Name of Employer Occupation The Lemoine Company Construction Manager	Aggregate Year-to-Date ▼ 4000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
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 15 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
Vernon Meyer

Mailing Address 1604 Beau Chene

City State Zip Code
Westlake LA 70669-4110

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

Name of Employer Occupation
Meyer & Assoc. Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2006

Transaction ID: SA11A1-196-223-c

Amount of Each Receipt this Period
4000.00

US Open Event

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

Mailing Address 1915 St. Joseph Street

City State Zip Code
New Orleans LA 70118

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

Name of Employer Occupation
The C2 Group Lobbyist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: SA11A1-201-229-c

Amount of Each Receipt this Period
4000.00

US Open Event

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

Mailing Address 62250 West End Boulevard

City State Zip Code
Slidell LA 70461-5622

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

Name of Employer Occupation
Sunrise Construction Home Builder

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2006

Transaction ID: SA11A1-173-202-c

Amount of Each Receipt this Period
500.00

NOLA Pelican Club

SUBTOTAL of Receipts This Page (optional)	▶	8500.00
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 16 / 32
	<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)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
Leonard Lemoine

Mailing Address 214 Jefferson Street
Suite 100

City State Zip Code
Lafayette LA 70501-7050

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

Name of Employer Occupation
The Lemoine Company President & CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

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

Transaction ID: SA11A1-188-211-c

Amount of Each Receipt this Period
4000.00

US Open Event

B. Full Name (Last, First, Middle Initial)
E. Campbell

Mailing Address 457 Railsback Street

City State Zip Code
Shreveport LA 71106-7725

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

Name of Employer Occupation
Capital One Senior Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2006

Transaction ID: SA11A1-149-151-c

Amount of Each Receipt this Period
500.00

Shreveport Pelican Club

C. Full Name (Last, First, Middle Initial)
Andre Coudrain

Mailing Address 525 Oak Hollow Drive

City State Zip Code
Hammond LA 70401-8216

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

Name of Employer Occupation
Cashe, Lewis, Coudrain ... Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2006

Transaction ID: SA11A1-161-163-c

Amount of Each Receipt this Period
500.00

Pelican Club

SUBTOTAL of Receipts This Page (optional)	5000.00
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 17 / 32
	<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)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. David Legier, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1401 Exposition Boulevard		Transaction ID: SA11A1-200-227-c
City State Zip Code New Orleans LA 70118-6037	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Pelican Club
Name of Employer Occupation Shell Chemical Retired	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Markham Dickson, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address PO Box 51367		Transaction ID: SA11A1-152-154-c
City State Zip Code Shreveport LA 71135-1367	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Morris Dickson LLC Partner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jack Grigsby		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 333 Texas Street Suite 2285		Transaction ID: SA11A1-148-150-c
City State Zip Code Shreveport LA 71101-3665	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Shreveport Pelican Club
Name of Employer Occupation Grigsby Petroleum Owner	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
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:	PAGE 18 / 32
	(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"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
A. Powell III

Mailing Address 1000 N Morrison Boulevard

City State Zip Code
Hammond LA 70401-2233

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

Name of Employer Occupation
A.C. Powell, III Law Firm Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 11 / 2006

Transaction ID: SA11A1-157-159-c

Amount of Each Receipt this Period
500.00

Pelican Club

B. Full Name (Last, First, Middle Initial)
John Atkins

Mailing Address 333 Texas Street
Suite 2300

City State Zip Code
Shreveport LA 71101-3680

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

Name of Employer Occupation
Atco Investment Company Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2006

Transaction ID: SA11A1-160-162-c

Amount of Each Receipt this Period
500.00

Pelican Club

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	48500.00

**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 19 / 32
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. American Society of Anesthesiologists PAC		Date of Receipt MM / DD / YYYY 06 / 14 / 2006
Mailing Address 520 N Northwest Highway		Transaction ID: SA11C-52-221-c
City Park Ridge	State IL	Zip Code 60068-2538
FEC ID number of contributing federal political committee. C C00255752		Amount of Each Receipt this Period 3500.00
Name of Employer	Occupation	US Open Event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) B. ACSPA-Surgeons PAC		Date of Receipt MM / DD / YYYY 06 / 26 / 2006
Mailing Address 1640 Wisconsin Avenue NW		Transaction ID: SA11C-198-225-c
City Washington	State DC	Zip Code 20007-7715
FEC ID number of contributing federal political committee. C C00382424		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	US Open Event
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Blessey Marine Services, Inc. PAC		Date of Receipt MM / DD / YYYY 05 / 24 / 2006
Mailing Address 1515 River Oaks Road E		Transaction ID: SA11C-199-226-c
City Harahan	State LA	Zip Code 70123-2167
FEC ID number of contributing federal political committee. C C00409789		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Pelican Club
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
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:	PAGE 20 / 32
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial)
U S Team PAC

Mailing Address 100 W Putnam Avenue

City State Zip Code
Greenwich CT 06830-5342

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: SA11C-195-222-c

Amount of Each Receipt this Period
2500.00

US Open Event

B. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code
Atlanta GA 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11C-197-224-c

Amount of Each Receipt this Period
5000.00

US Open Event

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
TOTAL This Period (last page this line number only)	▶	12500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Courtney Guastella		Transaction ID: SB21B-103-167-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 6
Mailing Address 7449 Garfield Street		Amount of Each Disbursement this Period 1500.00
City New Orleans State LA Zip Code 70118-3636	Purpose of Disbursement April Retainer Candidate Name Category/Type 001	
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. Courtney Guastella		Transaction ID: SB21B-103-168-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address 7449 Garfield Street		Amount of Each Disbursement this Period 3000.00
City New Orleans State LA Zip Code 70118-3636	Purpose of Disbursement May & June Retainer Candidate Name Category/Type 001	
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) C. Monica Schmidt		Transaction ID: SB21B-165-192-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 10010 Winding Ridge Drive		Amount of Each Disbursement this Period 300.00
City Shreveport State LA Zip Code 71106-7684	Purpose of Disbursement June administrative assistant fee Candidate Name Category/Type 001	
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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4800.00
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)

PAGE 22 / 32

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Monica Schmidt		Transaction ID: SB21B-165-173-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 10010 Winding Ridge Drive		Amount of Each Disbursement this Period 200.00
City Shreveport State LA Zip Code 71106-7684	001 Category/ Type	
Purpose of Disbursement May administrative assistant charge		
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. Machado & Company		Transaction ID: SB21B-102-169-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 6111 Newman Road		Amount of Each Disbursement this Period 349.00
City Fairfax State VA Zip Code 22030-5918	001 Category/ Type	
Purpose of Disbursement 1st Qtr Retainer plus expenses		
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) C. AmSouth Bank		Transaction ID: SB21B-128-213-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 333 Texas Street		Amount of Each Disbursement this Period 10.88
City Shreveport State LA Zip Code 71101-3666	001 Category/ Type	
Purpose of Disbursement Bank analysis service charge		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	559.88
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. AmSouth Bank		Transaction ID: SB21B-128-170-e Date of Disbursement
Mailing Address 333 Texas Street		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Shreveport	State LA	Zip Code 71101-3666
Purpose of Disbursement Bank Analysis Charge	<input type="text" value="001"/> Category/Type	
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:		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) B. AmSouth Bank		Transaction ID: SB21B-128-171-e Date of Disbursement
Mailing Address 333 Texas Street		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Shreveport	State LA	Zip Code 71101-3666
Purpose of Disbursement Bank charge for new checks	<input type="text" value="001"/> Category/Type	
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:		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) C. AmSouth Bank		Transaction ID: SB21B-128-190-e Date of Disbursement
Mailing Address 333 Texas Street		<input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City Shreveport	State LA	Zip Code 71101-3666
Purpose of Disbursement Deposit book printing charge	<input type="text" value="001"/> Category/Type	
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:		

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 32

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. AmSouth Bank		Transaction ID: SB21B-128-191-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 333 Texas Street		Amount of Each Disbursement this Period 11.76
City Shreveport State LA Zip Code 71101-3666	Purpose of Disbursement Bank service charge Candidate Name Category/Type 001	
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. AmSouth Bank		Transaction ID: SB21B-128-179-e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 333 Texas Street		Amount of Each Disbursement this Period 56.56
City Shreveport State LA Zip Code 71101-3666	Purpose of Disbursement Additional new check charges Candidate Name Category/Type 001	
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) C. CompleteCampaigns.com		Transaction ID: SB21B-164-215-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 100.00
City San Diego State CA Zip Code 92102-4548	Purpose of Disbursement Credit card processing fee for contrib Candidate Name Category/Type 003	
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	168.32
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. CompleteCampaigns.com		Transaction ID: SB21B-164-208-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 250.00
City San Diego State CA Zip Code 92102-4548		
Purpose of Disbursement Credit card processing fee for contrib Candidate Name		Category/ Type 003
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. CompleteCampaigns.com		Transaction ID: SB21B-164-194-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 350.00
City San Diego State CA Zip Code 92102-4548		
Purpose of Disbursement Monthly service fee for PAC database Candidate Name		Category/ Type 001
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) C. CompleteCampaigns.com		Transaction ID: SB21B-164-172-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 350.00
City San Diego State CA Zip Code 92102-4548		
Purpose of Disbursement Monthly service fee for PAC database Candidate Name		Category/ Type 001
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:		

SUBTOTAL of Disbursements This Page (optional) ▶	950.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. CompleteCampaigns.com		Transaction ID: SB21B-164-195-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 50.00
City San Diego State CA Zip Code 92102-4548		
Purpose of Disbursement Credit card processing fee for contrib Candidate Name		003 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. United States Golf Association		Transaction ID: SB21B-168-177-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address PO Box 708		Amount of Each Disbursement this Period 8000.00
City Far Hills State NJ Zip Code 07931-0708		
Purpose of Disbursement Candidate Name		003 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) ▼	

Fee for 2006 Champions Table at U.S. Open golf tournament

Full Name (Last, First, Middle Initial) C. Ridgewells		Transaction ID: SB21B-175-186-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 5525 Dorsey Lane		Amount of Each Disbursement this Period 1073.75
City Bethesda State MD Zip Code 20816-1501		
Purpose of Disbursement Candidate Name		003 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) ▼	

Catering charges for U.S. Open champions pavillion for contributors

SUBTOTAL of Disbursements This Page (optional) ▶	9123.75
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. United States Golf Association, Inc.		Transaction ID: SB21B-176-187-e Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 520.00
City Far Hills State NJ Zip Code 07931-1500	Two tickets for daily package in Champions Pavillion for contributors	
Purpose of Disbursement Candidate Name		003 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. Delta Airlines		Transaction ID: SB21B-191-214-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 324.30
City Atlanta State GA Zip Code 30320-6001	Airfare for Senator Vitter to NY to US Open Event	
Purpose of Disbursement Candidate Name		003 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) C. Verizon		Transaction ID: SB21B-192-216-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 1300 I Street NW Suite 400		Amount of Each Disbursement this Period 2800.00
City Washington State DC Zip Code 20005-3314	8 U.S. Open tickets from Verizon	
Purpose of Disbursement Candidate Name		003 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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3644.30
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Verizon Full Name (Last, First, Middle Initial) Mailing Address 1300 I Street NW Suite 400 City Washington State DC Zip Code 20005-3314 Purpose of Disbursement Fundraising: Void 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) ▼		Transaction ID: SB21B-192-217-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 0.00 Category/Type: 003
--	--	---

B. Lattanzi Full Name (Last, First, Middle Initial) Mailing Address 361 W 46th Street City New York State NY Zip Code 10036-3805 Purpose of Disbursement 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) ▼		Transaction ID: SB21B-193-218-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 2147.55 Category/Type: 003 Thank You Dinner for Contributors who attended US Open event
--	--	--

C. Sheraton Hotels Full Name (Last, First, Middle Initial) Mailing Address 811 7th Avenue City New York State NY Zip Code 10019-6002 Purpose of Disbursement 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) ▼		Transaction ID: SB21B-205-233-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 3683.82 Category/Type: 003 Hotel rooms for contributors attending US Open event
--	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	5831.37
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Dickie Brennan & Co Full Name (Last, First, Middle Initial) Mailing Address 605 Canal Street City New Orleans State LA Zip Code 70130-2307 Purpose of Disbursement Fundraising: Reception expense 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) ▼		Transaction ID: SB21B-134-140-e Date of Disbursement: MM / DD / YYYY 04 / 01 / 2006 Amount of Each Disbursement this Period: 980.59 Category/Type: 003
--	--	---

B. Northwest Airlines Full Name (Last, First, Middle Initial) Mailing Address 2700 Lone Oak Parkway City Eagan State MN Zip Code 55121-1546 Purpose of Disbursement 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) ▼		Transaction ID: SB21B-166-174-e Date of Disbursement: MM / DD / YYYY 05 / 05 / 2006 Amount of Each Disbursement this Period: 640.61 Category/Type: 003 Airfare for Senator Vitter from Mem to NY
---	--	--

C. US Airways, Inc. Full Name (Last, First, Middle Initial) Mailing Address 111 W Rio Salado Parkway City Tempe State AZ Zip Code 85281-2880 Purpose of Disbursement Airfare for Senator Vitter from NY to DC 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) ▼		Transaction ID: SB21B-167-175-e Date of Disbursement: MM / DD / YYYY 05 / 05 / 2006 Amount of Each Disbursement this Period: 314.30 Category/Type: 003
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SUBTOTAL of Disbursements This Page (optional)	1935.50
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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial)

A. US Airways, Inc.

Mailing Address 111 W Rio Salado Parkway

City State Zip Code
Tempe AZ 85281-2880

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB21B-167-176-e

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

Roundtrip Airfare for Sen-
ator Vitter from DC to NY

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

Full Name (Last, First, Middle Initial) A. Friends of George Allen		Transaction ID: SB23-203-231-e Date of Disbursement 06 / 13 / 2006	
Mailing Address PO Box 6859		Amount of Each Disbursement this Period 5000.00	
City Arlington	State VA	Zip Code 22206-0859	011 Category/ Type
Purpose of Disbursement Contribution to Friends of George Allen			
Candidate Name George Allen		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 00		

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 32 / 32	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dickie Brennan & Co	Nature of Debt (Purpose): Fundraising-Reception exp- ense
Mailing Address 605 Canal Street	
City State ZIP Code New Orleans LA 70130-2307	

Outstanding Balance Beginning This Period	Transaction ID: SD10-DEBT140	
980.59		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	980.59	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	