

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

REPUBLICAN PARTY OF LOUISIANA

ADDRESS (number and street) C/O RED CURVE SOLUTIONS  
500 CUMMINGS CENTER, SUITE 4400  
BEVERLY MA 01915

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End 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 (12S)

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  /  /  through  /  /

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 Mr. DANIEL G. KYLE

Signature of Treasurer Mr. DANIEL G. KYLE [Electronically Filed] Date  /  /

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**REPUBLICAN PARTY OF LOUISIANA**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="17403.15"/>	<input type="text" value="17403.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61999.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="235907.51"/>	<input type="text" value="1174015.15"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="297906.59"/>	<input type="text" value="1191418.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="157870.56"/>	<input type="text" value="1051382.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="140036.03"/>	<input type="text" value="140036.03"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="3800.00"/>	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**REPUBLICAN PARTY OF LOUISIANA**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2771.50	82462.66
(ii) Unitemized .....	3798.75	86367.85
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6570.25	168830.51
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6570.25	172830.51
12. Transfers From Affiliated/Other Party Committees.....	229337.26	848100.27
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	3.20
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	1500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	151581.17
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	151581.17
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	235907.51	1174015.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	235907.51	1022433.98

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	2510.70	106742.54
(ii) Non-Federal Share.....	9445.00	399869.06
(b) Other Federal Operating Expenditures .....	93387.59	295723.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	105343.29	802334.92
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	100.00
(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	100.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .....	52527.27	248947.35
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	52527.27	248947.35
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	157870.56	1051382.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	148425.56	651513.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6570.25	172830.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6570.25	172730.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	95898.29	402465.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	95898.29	402462.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 57
	<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. MR. DEREK BABCOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 13600 QUAIL RUN AVE

City DENHAM SPRINGS State LA Zip Code 70726

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11Al.18074**

Amount of Each Receipt this Period  
 750.00

**B. JOHN BECKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1245 W CAUSEWAY APPROACH

City MANDEVILLE State LA Zip Code 70471

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

Name of Employer JOHN D BECKER & ASSOC ESTATE Occupation OWNER  
 PLANNING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : SA11Al.18070**

Amount of Each Receipt this Period  
 1000.00

**C. MR. CHRIS CARROLL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3811 MCCOY DRIVE, BUILDING D

City BOSSIER CITY State LA Zip Code 71111

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

Name of Employer CARROLL COMPRESSION Occupation VICE-PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2014

**Transaction ID : SA11Al.18135**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 57
	<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. MR. ARCHIE CORDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5501 W. ESPLANADE AVE.

City METAIRIE	State LA	Zip Code 70003
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FEC ID number of contributing federal political committee. **C**

Name of Employer CC SALES CO.	Occupation OWNER
----------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

**Transaction ID : SA11Al.18149**

Amount of Each Receipt this Period  
75.00

**B. MRS. LINDSEY COTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 14518 JAMESTOWN BLVD

City BATON ROUGE	State LA	Zip Code 70810
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FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

**Transaction ID : SA11Al.18146**

Amount of Each Receipt this Period  
75.00

**C. JEAN-PAUL COUSSAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 113 BERNICE AVE

City LAFAYETTE	State LA	Zip Code 70503
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FEC ID number of contributing federal political committee. **C**

Name of Employer ANDRUS, BOUDREAUX, LANDRY & COUSSA	Occupation REAL ESTATE TITLE ATTORNEY
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

**Transaction ID : SA11Al.18145**

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	185.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 57  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)  
**A. MRS GENA GORE**

Mailing Address 8940 HIGHWAY 71 N

City State Zip Code  
DRY PRONG LA 71423

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

Name of Employer Occupation  
T & G TREES, LLC OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : SA11Al.18147**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. MRS STEPHANIE HAYNES**

Mailing Address 119 N 6TH ST STE 203

City State Zip Code  
ALPINE TX 79830

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014  
**Transaction ID : SA11Al.18037**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. PAMELA SCHAFFER**

Mailing Address 3636 N. HULLEN ST.

City State Zip Code  
METAIRIE LA 70002

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

Name of Employer Occupation  
NEW ORLEANS COPPER, INC. OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
369.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2014  
**Transaction ID : SA11Al.18123**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 345.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 57
	<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**

Full Name (Last, First, Middle Initial)  
**A. PAMELA SCHAFER**

Mailing Address 3636 N. HULLEN ST.

City METAIRIE	State LA	Zip Code 70002
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FEC ID number of contributing federal political committee. **C**

Name of Employer NEW ORLEANS COPPER, INC.	Occupation OWNER
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **377.75**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2014

**Transaction ID : SA11Al.18136**

Amount of Each Receipt this Period  

8.25
------

Full Name (Last, First, Middle Initial)  
**B. CHARLES THOMAS**

Mailing Address 7040 MODESTO

City BATON ROUGE	State LA	Zip Code 70811
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FEC ID number of contributing federal political committee. **C**

Name of Employer FAMILY VALUES RESOURCE INSTITUTE	Occupation EXECUTIVE DIRECTOR
--	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2014

**Transaction ID : SA11Al.18116**

Amount of Each Receipt this Period  

25.00
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Full Name (Last, First, Middle Initial)  
**C. CHARLES THOMAS**

Mailing Address 7040 MODESTO

City BATON ROUGE	State LA	Zip Code 70811
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FEC ID number of contributing federal political committee. **C**

Name of Employer FAMILY VALUES RESOURCE INSTITUTE	Occupation EXECUTIVE DIRECTOR
--	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **299.25**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2014

**Transaction ID : SA11Al.18125**

Amount of Each Receipt this Period  

8.25
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>41.50</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 57  
(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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MR. ROBERT D WEBB JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 536

City RESERVE	State LA	Zip Code 70084
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Date of Receipt: 10 / 03 / 2014  
**Transaction ID : SA11AI.18017**

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 1000.00

Name of Employer: LA MACHINERY CO LLC  
Occupation: OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date: 1000.00

**B. TOMMY WOODARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 313 THIRD ST

City BATON ROUGE	State LA	Zip Code 70801
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Date of Receipt: 10 / 08 / 2014  
**Transaction ID : SA11AI.18121**

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 75.00

Name of Employer: SELF EMPLOYED  
Occupation: PHARMACIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date: 600.00

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

Mailing Address

City	State	Zip Code
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Date of Receipt: / /

Amount of Each Receipt this Period:

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date:

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2771.50

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. 21ST CENTURY MAJORITY FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address 6065 ROSWELL ROAD, #2274

City ATLANTA	State GA	Zip Code 30328
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FEC ID number of contributing federal political committee. **C** C00361956

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	26	/	2014

**Transaction ID : SA12.18163**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

**B. ALAMO PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 919 CONGRESS AVENUE  
SUITE 1400

City AUSTIN	State TX	Zip Code 78701
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FEC ID number of contributing federal political committee. **C** C00387464

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	01	/	2014

**Transaction ID : SA12.18154**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

**C. AMERICAN STAFFING ASSOCIATION STAFFINGPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 277 S. WASHINGTON ST., SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00145623

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA12.18179**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)  
**A. ASSOCIATED BUILDERS AND CONTRACTORS**

Mailing Address 1300 NORTH 17TH STREET SUITE 800

City ROSSLYN State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C70003355

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA12.18169**

Amount of Each Receipt this Period  
 5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. CHANTAL BAGWELL**

Mailing Address 4705 LELAND DRIVE

City CUMMING State GA Zip Code 30041

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

Name of Employer Occupation  
 HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA12.18187**

Amount of Each Receipt this Period  
 10000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. HUGH F. CAFFERTY**

Mailing Address 129 VALENTINE DRIVE

City LOCKPORT State LA Zip Code 70374

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

Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA12.18045**

Amount of Each Receipt this Period  
 10000.00

JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. CASSIDY VICTORY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 CUMMINGS CENTER SUITE 4400  
C/O RED CURVE SOLUTIONS  
City BEVERLY State MA Zip Code 01915  
FEC ID number of contributing federal political committee. **C** C00564203  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
63165.17

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014  
**Transaction ID : SA12.18048**  
Amount of Each Receipt this Period  
48866.91

**B. GARY R. CHARTRAND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 139 PONTE VEDRA BOULEVARD  
City PONTE VEDRA BEACH State CA Zip Code 32082  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
ACOSTA EXECUTIVE CHAIRMAN  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014  
**Transaction ID : SA12.18188**  
Amount of Each Receipt this Period  
10000.00  
JFC TRANSFER - TARGETED STATE VICTORY  
**[MEMO ITEM]**

**C. CIEL LLC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 64806  
City BATON ROUGE State LA Zip Code 70896  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014  
**Transaction ID : SA12.18044**  
Amount of Each Receipt this Period  
10000.00  
JFC TRANSFER - CASSIDY VICTORY  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48866.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2014 <b>Transaction ID : SA12.18159</b>
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Receipt this Period 1250.00
City ALEXANDRIA	State VA	Zip Code 22314
FEC ID number of contributing federal political committee.	C C00491654	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
		JFC TRANSFER -TARGETED STATE VICTORY
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC</b>		Date of Receipt MM / DD / YYYY 09 / 24 / 2014 <b>Transaction ID : SA12.18176</b>
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Receipt this Period 3750.00
City ALEXANDRIA	State VA	Zip Code 22314
FEC ID number of contributing federal political committee.	C C00491654	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
		JFC TRANSFER -TARGETED STATE VICTORY
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. JR. JOHN R. DAWSON</b>		Date of Receipt MM / DD / YYYY 09 / 09 / 2014 <b>Transaction ID : SA12.18165</b>
Mailing Address P.O. BOX 64811		Amount of Each Receipt this Period 3.85
City VIRGINIA BEACH	State VA	Zip Code 23467
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3.85	
		JFC TRANSFER -TARGETED STATE VICTORY
		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. PAUL DICKSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 51367

City SHREVEPORT	State LA	Zip Code 71135
FEC ID number of contributing federal political committee. C		
Name of Employer MORRIS DICKSON	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2014  
**Transaction ID : SA12.18046**

Amount of Each Receipt this Period  
10000.00  
JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

**B. DIRIGO PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1355

City ALEXANDRIA	State VA	Zip Code 22313
FEC ID number of contributing federal political committee. C C00391797		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2014  
**Transaction ID : SA12.18175**

Amount of Each Receipt this Period  
2500.00  
JFC TRANSFER - TARGETED STATE VICTORY

**[MEMO ITEM]**

**C. FREEDOM FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 701 8TH STREET, NW  
SUITE 500

City WASHINGTON	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00390674		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2014  
**Transaction ID : SA12.18157**

Amount of Each Receipt this Period  
5000.00  
JFC TRANSFER - TARGETED STATE VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. FREE STATE PAC</b>		Date of Receipt
Mailing Address P.O. BOX 9191		<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code SHAWNEE MISSION KS 66201		<b>Transaction ID : SA12.18156</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00455717"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	JFC TRANSFER -TARGETED STATE VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. SUSAN L. GROFF</b>		Date of Receipt
Mailing Address 9832 CALVIN AVENUE		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City State Zip Code NORTHRIDGE CA 91324		<b>Transaction ID : SA12.18186</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value=""/>		Amount of Each Receipt this Period <input type="text" value="7692.31"/>
Name of Employer	Occupation	JFC TRANSFER -TARGETED STATE VICTORY
NORTHWEST EXCAVATING COMPANY	CONTRACTOR	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="7692.31"/>	

Full Name (Last, First, Middle Initial) <b>C. HEARTLAND VALUES PAC</b>		Date of Receipt
Mailing Address PO BOX 505		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code SIOUX FALLS SD 57101		<b>Transaction ID : SA12.18155</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00409003"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	JFC TRANSFER -TARGETED STATE VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. HELLERHIGHWATER PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370672  
 City LAS VEGAS State NV Zip Code 89137  
 FEC ID number of contributing federal political committee. **C** C00471607  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA12.18174**  
 Amount of Each Receipt this Period  
 5000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

**B. MARCUS D. HILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2505 N. HIGHWAY 360 SUITE 800  
 City GRAND PRAIRIE State TX Zip Code 75050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WESTERN RIM PROPERTY SERVICES CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA12.18184**  
 Amount of Each Receipt this Period  
 10000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

**C. NANCY S. HILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2505 N. HIGHWAY 360 SUITE 800  
 City GRAND PRAIRIE State TX Zip Code 75050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : SA12.18185**  
 Amount of Each Receipt this Period  
 10000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. PAUL J. ISAAC**  
Full Name (Last, First, Middle Initial)

Mailing Address 75 PROSPECT AVENUE

City LARCHMONT State NY Zip Code 10538

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

Name of Employer ARBITER PARTNERS Occupation PORTFOLIO MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7692.31

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2014

**Transaction ID : SA12.18192**

Amount of Each Receipt this Period  
7692.31

JFC TRANSFER - TARGETED STATE VICTORY

**[MEMO ITEM]**

**B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**  
Full Name (Last, First, Middle Initial)

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : SA12.18041**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

**C. HOWARD H. LEACH**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 ROYAL PALM WAY  
#402

City PALM BEACH State FL Zip Code 33480

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

Name of Employer LEACH CAPITAL Occupation FINANCIAL INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 09 / 2014

**Transaction ID : SA12.18166**

Amount of Each Receipt this Period  
10000.00

JFC TRANSFER - TARGETED STATE VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MR RICHARD A LIPSEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 83280

City BATON ROUGE	State LA	Zip Code 70884
FEC ID number of contributing federal political committee. C		
Name of Employer LIPSEY'S	Occupation WHOLESALER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : SA12.18047**

Amount of Each Receipt this Period  
10000.00  
JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

**B. THOMAS E. MCINERNEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16 BLUFF POINT

City WESTPORT	State CT	Zip Code 06880
FEC ID number of contributing federal political committee. C		
Name of Employer BLUFF POINT ASSOCIATES	Occupation FINANCIAL INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8750.00	

Date of Receipt  
09 / 09 / 2014  
**Transaction ID : SA12.18167**

Amount of Each Receipt this Period  
8750.00  
JFC TRANSFER - TARGETED STATES

**[MEMO ITEM]**

**C. MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1301 CONCORD TERRACE

City SUNRISE	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C C00469205		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Date of Receipt  
08 / 19 / 2014  
**Transaction ID : SA12.18162**

Amount of Each Receipt this Period  
1250.00  
JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11250 WAPLES MILL ROAD  
 City State Zip Code  
 FAIRFAX VA 22030  
 FEC ID number of contributing federal political committee. **C** C00053553  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA12.18180**  
 Amount of Each Receipt this Period  
 5000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

**B. NEXT CENTURY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 S ROYAL STREET  
 City State Zip Code  
 ALEXANDRIA VA 22314  
 FEC ID number of contributing federal political committee. **C** C00343947  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : SA12.18170**  
 Amount of Each Receipt this Period  
 5000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

**C. J LARRY NICHOLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7011 N. COUNTRY CLUB DRIVE  
 City State Zip Code  
 OKLAHOMA CITY OK 73116  
 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 ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA12.18189**  
 Amount of Each Receipt this Period  
 10000.00  
 JFC TRANSFER -TARGETED STATE VICTORY  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. ORRINPAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3986

City WASHINGTON	State DC	Zip Code 20027
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00235572

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 18 / 2014  
**Transaction ID : SA12.18160**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER - TARGETED STATES

**[MEMO ITEM]**

**B. MRS. CLAUDIA B. PHILLIPS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6020 HIGHLAND ROAD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : SA12.18043**

Amount of Each Receipt this Period  
10000.00

JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

**C. MR. GARY L. PHILLIPS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6020 HIGHLAND ROAD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer REPUBLIC FINANCE	Occupation CHAIRMAN
--------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : SA12.18042**

Amount of Each Receipt this Period  
10000.00

JFC TRANSFER - CASSIDY VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)  
**A. RELY ON YOUR BELIEFS FUND**

Mailing Address 209 PENNSYLVANIA AVENUE, SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee. **C** C00344648

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

**Transaction ID : SA12.18164**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. ROCK CITY PAC**

Mailing Address 1015 STONEBRIDGE PARK DRIVE

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee. **C** C00436410

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

**Transaction ID : SA12.18181**

Amount of Each Receipt this Period  
5000.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. ROCKTENN POLITICAL ACTION COMMITTEE**

Mailing Address 504 THRASHER STREET

City	State	Zip Code
NORCROSS	GA	30071

FEC ID number of contributing federal political committee. **C** C00117424

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : SA12.18178**

Amount of Each Receipt this Period  
2500.00

JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. JAMES N. STANARD**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 14309

City CLEVELAND State OH Zip Code 44114

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 ▼ 10000.00

Date of Receipt 10 / 01 / 2014  
Transaction ID : SA12.18191

Amount of Each Receipt this Period 10000.00

JFC TRANSFER -TARGETED STATE VICTORY

[MEMO ITEM]

**B. TARGETED STATE VICTORY**  
Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00566513

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 180470.35

Date of Receipt 10 / 15 / 2014  
Transaction ID : SA12.18039

Amount of Each Receipt this Period 180470.35

**C. JACK C. TAYLOR**  
Full Name (Last, First, Middle Initial)

Mailing Address 35 HUNTER AVENUE

City ST. LOUIS State MO Zip Code 63124

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

Name of Employer ENTERPRISE HOLDINGS Occupation FOUNDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2014  
Transaction ID : SA12.18190

Amount of Each Receipt this Period 5000.00

JFC TRANSFER -TARGETED STATE VICTORY

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional).....▶ 180470.35

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)  
**A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : SA12.18183**

Amount of Each Receipt this Period  
5000.00  
JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. THE SENATE VICTORY FUND PAC**

Mailing Address PO BOX 7274

City TUPELO State MS Zip Code 38802

FEC ID number of contributing federal political committee. **C** C00202861

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 17 / 2014  
**Transaction ID : SA12.18172**

Amount of Each Receipt this Period  
5000.00  
JFC TRANSFER -TARGETED STATE VICTORY

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	229337.26

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ACADIAN RELIGIOUS & GIFTS**

Mailing Address 2819 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17446

Amount of Each Disbursement this Period

380.73

Full Name (Last, First, Middle Initial)

**B. AIRNET**

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement  
TELEPHONE EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17447

Amount of Each Disbursement this Period

5575.17

Full Name (Last, First, Middle Initial)

**C. ALFORD & DOVE PROPERTIES LLC**

Mailing Address PO BOX 2817

City HOUMA State LA Zip Code 70361

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.17448

Amount of Each Disbursement this Period

650.00

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

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

6605.90

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City MANHATTAN State NY Zip Code 10080

Purpose of Disbursement  
AMEX PAYMENT: MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

Transaction ID : SB21B.17450

Amount of Each Disbursement this Period

558.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING LLC**

Mailing Address 1555 WILSON BLVD STE 307

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17449

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 10156 PERKINS ROAD  
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

Transaction ID : SB21B.17457

Amount of Each Disbursement this Period

84.56

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

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

1084.56

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17451

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17452

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17453

Amount of Each Disbursement this Period

183.12

[MEMO ITEM]

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

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

0.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17454

Amount of Each Disbursement this Period

215.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17455

Amount of Each Disbursement this Period

1604.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address 3301 VETERANS MEMORIAL BLVD

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SB21B.17456

Amount of Each Disbursement this Period

3594.82

[MEMO ITEM]

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

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

0.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. BALDWIN HASPEL BURKE & MAYER LLC**

Mailing Address 1100 POYDRAS STREET

City State Zip Code  
ENERGY CENTER LA 70163

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17461**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. DUSTIN BREWSTER**

Mailing Address 550 LEE DR APT 235

City State Zip Code  
BATON ROUGE LA 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17472**

Amount of Each Disbursement this Period

125.00
--------

Full Name (Last, First, Middle Initial)

**C. BRIE TRAHAN**

Mailing Address 530 LAKELAND DR

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17463**

Amount of Each Disbursement this Period

250.00
--------

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

875.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. BRIE TRAHAN**

Mailing Address 530 LAKELAND DR

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : **SB21B.17464**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. KATHERINE D BROWN**

Mailing Address PO BOX 729

City State Zip Code  
SPRINGFIELD LA 70462

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17490**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. KATHERINE D BROWN**

Mailing Address PO BOX 729

City State Zip Code  
SPRINGFIELD LA 70462

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : **SB21B.17491**

Amount of Each Disbursement this Period

250.00

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

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

750.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SARAH E BRYSON**

Mailing Address 121 OAK CREST DR

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17517

Amount of Each Disbursement this Period

187.50

Full Name (Last, First, Middle Initial)

**B. SARAH E BRYSON**

Mailing Address 121 OAK CREST DR

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : SB21B.17518

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

**C. CAPITAL BUSINESS SERVICES LLC**

Mailing Address 14423 OLD HAMMOND HIGHWAY SUITE A

City BATON ROUGE State LA Zip Code 70816

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17465

Amount of Each Disbursement this Period

1545.00

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

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

1857.50

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. CHARLES ROBERT CARTER PROPERTIES**

Mailing Address 12030 LAKELAND BLVD SUITE 101

City State Zip Code  
BATON ROUGE LA 70809

Purpose of Disbursement  
RENT & UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.17466

Amount of Each Disbursement this Period

3531.07

Full Name (Last, First, Middle Initial)

**B. CJY STRATEGIES**

Mailing Address 1958 TULIP ST

City State Zip Code  
BATON ROUGE LA 70806

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17468

Amount of Each Disbursement this Period

6750.00

Full Name (Last, First, Middle Initial)

**C. KAREN F. CONNOLLY**

Mailing Address 6880 CHRISTOPHER AVE.

City State Zip Code  
GREENWELL SPRINGS LA 70739

Purpose of Disbursement  
CONNOLLY REIMBURSEMENT:MOBLIE PHONE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17487

Amount of Each Disbursement this Period

197.08

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

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

10478.15

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SARAH DAKE**

Mailing Address 1525 NORTH BERTRAND

City LAFAYETTE State LA Zip Code 70506

Purpose of Disbursement  
DAKE REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	01	/	2014

**Transaction ID : SB21B.17516**

Amount of Each Disbursement this Period

230.72
--------

Full Name (Last, First, Middle Initial)

**B. MADELEINE DAVIS**

Mailing Address 2107 ANN LANE

City OAKDALE State LA Zip Code 71463

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	03	/	2014

**Transaction ID : SB21B.17495**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. MADELEINE DAVIS**

Mailing Address 2107 ANN LANE

City OAKDALE State LA Zip Code 71463

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	15	/	2014

**Transaction ID : SB21B.17496**

Amount of Each Disbursement this Period

250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

730.72
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)  
**A. DIRECT MAILING SERVICES, INC.**

Mailing Address 12562 N. LAKE SHORE

City WALKER State LA Zip Code 70785

Purpose of Disbursement  
DIRECT MAIL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17471**

Amount of Each Disbursement this Period  
6000.00

Full Name (Last, First, Middle Initial)  
**B. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City MONROE State LA Zip Code 71201

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
10 / 02 / 2014

Transaction ID : **SB21B.17482**

Amount of Each Disbursement this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
REIMBURSEMENT:SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
10 / 02 / 2014

Transaction ID : **SB21B.17484**

Amount of Each Disbursement this Period  
680.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7180.00

**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)

<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)

**A. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
ELSBURY REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2014

Transaction ID : SB21B.17485

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
ELSBURY REIMBURSEMENT:INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2014

Transaction ID : SB21B.17486

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. EVANGELINE OAK LLC**

Mailing Address PO BOX 1026

City MADISONVILLE State LA Zip Code 70447

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 01 / 2014

Transaction ID : SB21B.17477

Amount of Each Disbursement this Period

1000.00

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

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

1000.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. FEDERAL EXPRESS**

Mailing Address PO BOX 660481

City DALLAS State TX Zip Code 75266-0481

Purpose of Disbursement  
DELIVERY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2014

Transaction ID : SB21B.17478

Amount of Each Disbursement this Period

587.77

Full Name (Last, First, Middle Initial)

**B. STEPHANIE GARDNER**

Mailing Address 3645 GLADIOLA CT APT G

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2014

Transaction ID : SB21B.17519

Amount of Each Disbursement this Period

375.00

Full Name (Last, First, Middle Initial)

**C. STEPHANIE GARDNER**

Mailing Address 3645 GLADIOLA CT APT G

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : SB21B.17520

Amount of Each Disbursement this Period

500.00

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

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

1462.77

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SARA ASHLYN HARRISON**

Mailing Address 1021 PEYTON AVE

City BENTON State LA Zip Code 71006

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17513**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. SARA ASHLYN HARRISON**

Mailing Address 1021 PEYTON AVE

City BENTON State LA Zip Code 71006

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : **SB21B.17514**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City PONCHATOULA State LA Zip Code 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17458**

Amount of Each Disbursement this Period

250.00

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

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

750.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City State Zip Code  
PONCHATOULA LA 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : **SB21B.17459**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ERIN HUFFAKER**

Mailing Address 3858 SOUTH PASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
HUFFAKER REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2014

Transaction ID : **SB21B.17475**

Amount of Each Disbursement this Period

43.19

Full Name (Last, First, Middle Initial)

**C. ERIN HUFFAKER**

Mailing Address 3858 SOUTH PASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
HUFFAKER REIMBURSEMENT:INSURANCE STIPEND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2014

Transaction ID : **SB21B.17476**

Amount of Each Disbursement this Period

200.00

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

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

493.19

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LOGIC NATION, INC**

Mailing Address 910 PIERREMONT ROAD SUITE 216

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : **SB21B.17493**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL MAHFOUZ**

Mailing Address 1922 BROADWAY APT A

City NEW ORLEANS State LA Zip Code 70118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17499**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL MAHFOUZ**

Mailing Address 1922 BROADWAY APT A

City NEW ORLEANS State LA Zip Code 70118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : **SB21B.17500**

Amount of Each Disbursement this Period

250.00

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

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

1500.00

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. STEPHANIE MATT**

Mailing Address 14232 COTTINGHAM COURT

City State Zip Code  
BATON ROUGE LA 70817

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2014

Transaction ID : **SB21B.17523**

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

**B. MICRO AGE COMPUTERS**

Mailing Address PO BOX 2941

City State Zip Code  
PHOENIX AZ 85062

Purpose of Disbursement  
OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : **SB21B.17502**

Amount of Each Disbursement this Period

1588.32

Full Name (Last, First, Middle Initial)

**C. JONAH MUMPHREY**

Mailing Address 11335 ARCHERY DR

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
MUMPHREY REIMBURSEMENT:TRAVEL MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2014

Transaction ID : **SB21B.17483**

Amount of Each Disbursement this Period

497.78

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

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

2211.10

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. NORGATE INVESTORS C/O 1ST LAKE COMMERCIAL**

Mailing Address 3925 N I-10 SERVICE ROAD W  
SUITE 130

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
RENT & UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.17503

Amount of Each Disbursement this Period

2067.50

Full Name (Last, First, Middle Initial)

**B. PREMIERE SPEAKERS BUREAU**

Mailing Address 109 INTERNATIONAL DR SUITE 300

City FRANKLIN State TN Zip Code 37067

Purpose of Disbursement  
EVENT CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17505

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. RED CURVE SOLUTIONS**

Mailing Address 138 CONANT STREET, 1ST FLOOR

City BEVERLY State MA Zip Code 70802

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

Transaction ID : SB21B.17506

Amount of Each Disbursement this Period

16504.95

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

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

31072.45

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. REES REALTY CORPORATION**

Mailing Address PMB 540 2851 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.17507

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

**B. RRPEC**

Mailing Address PO BOX 12445

City ALEXANDRIA State LA Zip Code 71315

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

Transaction ID : SB21B.17509

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. JEFF STIDHAM**

Mailing Address 13323 BRIARGROVE AVE

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
REIMBURSEMENT:SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2014

Transaction ID : SB21B.17479

Amount of Each Disbursement this Period

634.02

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

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

2334.02

# 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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

### A. JEFF STIDHAM

Mailing Address 13323 BRIARGROVE AVE

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
STIDHAM REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Transaction ID : SB21B.17480

Amount of Each Disbursement this Period

500.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. JEFF STIDHAM

Mailing Address 13323 BRIARGROVE AVE

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
STIDHAM REIMBURSEMENT:INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Transaction ID : SB21B.17481

Amount of Each Disbursement this Period

134.02
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. TARGET OUTREACH INC

Mailing Address 700 W VIRGINIA ST SUITE 700  
TIMBERS BUILDING

City State Zip Code  
MILWAUKEE WI 53204

Purpose of Disbursement  
LIST ACQUISITION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : SB21B.17526

Amount of Each Disbursement this Period

5935.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5935.00
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**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. TAYLOR TRAVERS**

Mailing Address 83261 PRESS SHARP ROAD

City BUSH State LA Zip Code 70431

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : SB21B.17532

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE**

Mailing Address PO BOX 262100

City BATON ROUGE State LA Zip Code 70826

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : SB21B.17554

Amount of Each Disbursement this Period

7711.44

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address PO BOX 2100

City BATON ROUGE State LA Zip Code 70821-2100

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014

Transaction ID : SB21B.17533

Amount of Each Disbursement this Period

4764.16

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

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

12725.60

**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. VERVEMAIL**

Mailing Address 5348 VEGAS DR. STE. 289

City LAS VEGAS State NV Zip Code 89108

Purpose of Disbursement  
WEB DEVELOPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17534**

Amount of Each Disbursement this Period

309.42
--------

Full Name (Last, First, Middle Initial)

**B. MR. ROGER VILLERE**

Mailing Address 838 AURORA ST

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17508**

Amount of Each Disbursement this Period

1526.35
---------

Full Name (Last, First, Middle Initial)

**C. LAUREN VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
VIZZA REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2014

Transaction ID : **SB21B.17492**

Amount of Each Disbursement this Period

543.36
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2379.13
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**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JR MICHAEL J VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17497**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. JR MICHAEL J VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : **SB21B.17498**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. SANTANA WHATLEY**

Mailing Address 517 QUEEN ANNE DR

City SLIDELL State LA Zip Code 70460

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : **SB21B.17510**

Amount of Each Disbursement this Period

250.00
--------

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

750.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SANTANA WHATLEY**

Mailing Address 517 QUEEN ANNE DR

City SLIDELL State LA Zip Code 70460

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.17511

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DYLAN WINDSOR**

Mailing Address 131 FEINSTEIN RD

City LAKE CHARLES State LA Zip Code 70611

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.17473

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DYLAN WINDSOR**

Mailing Address 131 FEINSTEIN RD

City LAKE CHARLES State LA Zip Code 70611

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB21B.17474

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**A. LUNDEN ALYSSA CHENEVERT**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17535

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. KAREN F. CONNOLLY**

Mailing Address 6880 CHRISTOPHER AVE.

City GREENWELL SPRINGS State LA Zip Code 70739

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17536

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JASON P. DORE**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17537

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**A. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City State Zip Code  
MONROE LA 71201

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2014

**Transaction ID : SB30B.17538**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2014

**Transaction ID : SB30B.17539**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. KAITLIN O. FORAN**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 15 / 2014

**Transaction ID : SB30B.17540**

Amount of Each Disbursement this Period

1250.00

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

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

3750.00

**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 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)

**A. HUNTER HALL**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17541**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17542**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17551**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**A. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17552**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. KIMBERLY JANCA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17543**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JONAH MUMPHREY**

Mailing Address 11335 ARCHERY DR

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.17544**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**A. GARY SPENCER NICHOLS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17545

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JEFFREY BRANT STIDHAM**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17546

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JOHN AUSTIN STUKINS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : SB30B.17547

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**A. TARGETED CREATIVE COMMUNICATIONS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Mailing Address 106 S COLUMBUS STREET

**Transaction ID : SB30B.18193**

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

14760.00
----------

Purpose of Disbursement  
VOLUNTEER EXEMPT MAIL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. TARGETED CREATIVE COMMUNICATIONS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

Mailing Address 106 S COLUMBUS STREET

**Transaction ID : SB30B.18195**

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

6925.00
---------

Purpose of Disbursement  
VOLUNTEER EXEMPT MAIL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. TARGETED CREATIVE COMMUNICATIONS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Mailing Address 106 S COLUMBUS STREET

**Transaction ID : SB30B.18197**

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

6925.00
---------

Purpose of Disbursement  
VOLUNTEER EXEMPT MAIL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

28610.00
----------

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

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**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**

Full Name (Last, First, Middle Initial)

**A. LAUREN VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.17548**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RACHEL VIZZA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.17549**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. KRISTY L. WILKINSON**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.17550**

Amount of Each Disbursement this Period

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 55 OF 57
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JAMESTOWN ASSOCIATES</b>	Nature of Debt (Purpose): FEA VOLUNTEER MASS MAIL
Mailing Address 5 MAPLETON ROAD SUITE 300	
City State Zip Code PRINCETON NJ 08540	

Outstanding Balance Beginning This Period <input type="text" value="3800.00"/>	<b>Transaction ID : SD10.5463</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3800.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3800.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="3800.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3800.00"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: CHAIN BRIDGE BANK, Transaction ID: H4.17443. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (BANK FEES), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/10/2014), and a summary table showing Federal Share (3.15), NonFederal Share (11.85), and Total Amount (15.00).

Form B: AMERICAN EXPRESS, Transaction ID: H4.17439. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (AMEX PAYMENT:SEE MEMO ENTRIES), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (1474.74), NonFederal Share (5547.84), and Total Amount (7022.58).

Form C: AMERICAN EXPRESS, Transaction ID: H4.17440. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (AMEX PAYMENT:MERCHANT FEES), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (10/14/2014), and a summary table showing Federal Share (31.50), NonFederal Share (118.50), and Total Amount (150.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (1477.89) + NONFEDERAL SHARE (5559.69) = TOTAL AMOUNT (7037.58)

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) <b>EVANGLINE SPECIALTIES</b>		Transaction ID : H4.17442		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1825 BERTRAND DR				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City LAFAYETTE State LA Zip Code 70506				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: AMEX PAYMENT:OFFICE EQUIPMENT PURCHASE				Allocated Activity or Event Year-To-Date 518551.34	
Activity or Event Identifier: <b>Administrative</b>		Category/Type		Date 10 / 14 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+		NONFEDERAL SHARE	
139.77				525.78	
		=		TOTAL AMOUNT	
				665.55	

B. Full Name (Last, First, Middle Initial) <b>TARGETED STATE VICTORY</b>		Transaction ID : H4.17445		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 228 S WASHINGTON STREET SUITE 115				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City ALEXANDRIA State VA Zip Code 22314				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: BANK FEES				Allocated Activity or Event Year-To-Date 523469.46	
Activity or Event Identifier: Administrative		Category/Type		Date 10 / 15 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
1032.81				3885.31	
		=		TOTAL AMOUNT	
				4918.12	

C. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date	
FEDERAL SHARE		+		NONFEDERAL SHARE	
		=		TOTAL AMOUNT	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1032.81		3885.31		4918.12

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2510.70		9445.00		11955.70