

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF LOUISIANA

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		186212.22
(b) Cash on Hand at Beginning of Reporting Period.....	20505.44	
(c) Total Receipts (from Line 19)	23418.61	313844.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	43924.05	500056.29
7. Total Disbursements (from Line 31).....	14755.46	470887.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29168.59	29168.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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).....	14846.50	54544.75
(ii) Unitemized	4181.50	74014.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19028.00	128558.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19028.00	129558.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	97204.75
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	6054.20
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	4390.61	81026.25
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	4390.61	81026.25
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	23418.61	313844.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19028.00	232817.82

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	1627.56	61788.14
(ii) Non-Federal Share.....	2893.46	109395.29
(b) Other Federal Operating Expenditures	10234.44	126703.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14755.46	297887.24
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	405.00
(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	405.00
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	0.00	172595.46
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	172595.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14755.46	470887.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11862.00	361492.41

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)	19028.00	129558.87
34. Total Contribution Refunds (from Line 28(d))	0.00	405.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19028.00	129153.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11862.00	188491.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	6054.20
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11862.00	182437.75

**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 35
<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial) A. MR. ROBERT AMBROSE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2015 Transaction ID : SA11AI.31579
Mailing Address 1415 7TH ST		Amount of Each Receipt this Period 250.00
City LAKE CHARLES	State LA	Zip Code 70601
FEC ID number of contributing federal political committee. C		
Name of Employer CPSB	Occupation SUBSTITUTE TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR. DEREK BABCOCK		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2015 Transaction ID : SA11AI.31410
Mailing Address 13600 QUAIL RUN AVE		Amount of Each Receipt this Period 75.00
City DENHAM SPRINGS	State LA	Zip Code 70726
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. CHRIS CARROLL		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2015 Transaction ID : SA11AI.31377
Mailing Address 3811 MCCOY DRIVE, BUILDING D		Amount of Each Receipt this Period 50.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 7 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial) A. MR. KEVIN CAVELL		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2015
Mailing Address 2910 HILL ST		Transaction ID : SA11AI.31371
City ALEXANDRIA	State LA	Zip Code 71301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00	
Name of Employer EXECUTONE OF LOUISIANA	Occupation REGIONAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. MR. ARCHIE CORDER		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2015
Mailing Address 5501 W. ESPLANADE AVE.		Transaction ID : SA11AI.31366
City METAIRIE	State LA	Zip Code 70003
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00	
Name of Employer CC SALES CO.	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. JEAN-PAUL COUSSAN		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2015
Mailing Address 113 BERNICE AVE		Transaction ID : SA11AI.31378
City LAFAYETTE	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer ANDRUS, BOUDREAUX, LANDRY & COUSSA	Occupation REAL ESTATE TITLE ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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:	PAGE 8 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. CYNTHIA DORE
Full Name (Last, First, Middle Initial)

Mailing Address 1017 NANTUCKET DR UNIT D

City HOUSTON	State TX	Zip Code 77057
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FEC ID number of contributing federal political committee. **C**

Name of Employer RADJET SERVICES US INC	Occupation ACCOUNTANT
--	--------------------------

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		30		2015

Transaction ID : SA11AI.31387

Amount of Each Receipt this Period
750.00

B. RAYMOND N. FINK
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 134

City WILLIAMSTON	State MI	Zip Code 48895
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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 ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2015

Transaction ID : SA11AI.31435

Amount of Each Receipt this Period
100.00

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

Mailing Address 8940 HIGHWAY 71 N

City DRY PRONG	State LA	Zip Code 71423
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FEC ID number of contributing federal political committee. **C**

Name of Employer T & G TREES, LLC	Occupation OWNER
--------------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : SA11AI.31367

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	205.00
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: PAGE 9 OF 35
(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

A. MR. CHRIS GUIDRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5396 COURTYARD DR
 City State Zip Code
 GONZALES LA 70737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GUIDRY ASSOCIATES OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015
Transaction ID : SA11AI.31576
 Amount of Each Receipt this Period
 100.00

B. MR. SAM HAYNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 18142 PERKINS ROAD
 City State Zip Code
 BATON ROUGE LA 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BLUE BAYOU WATER PARK OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : SA11AI.31393
 Amount of Each Receipt this Period
 2500.00

C. MR. PAUL HOLLIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 GRAND MAISON BLVD.
 City State Zip Code
 MANDEVILLE LA 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PAUL HOLLIS RARE COINS SMALL BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015
Transaction ID : SA11AI.31557
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3100.00
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: PAGE 10 OF 35
(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

A. LUCAS HUDDLESTON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 742
 City THIBODAUX State LA Zip Code 70302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : SA11AI.31384
 Amount of Each Receipt this Period
 750.00

B. MR. JOHN P LABORDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 POYDRAS ST ST 1725
 City NEW ORLEANS State LA Zip Code 70130
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015
Transaction ID : SA11AI.31556
 Amount of Each Receipt this Period
 200.00

C. MR. MICHAEL D LOWRIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1835 GLEN COVE DR.
 City BENTON State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADIANA ENERGY Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015
Transaction ID : SA11AI.31578
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. ALICE BAIRD MUNGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2729 CONSTANCE ST
 City NEW ORLEANS State LA Zip Code 70130
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015
Transaction ID : SA11AI.31411
 Amount of Each Receipt this Period
 100.00

B. MR. WILLIAM T MURPHY III
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 TRAVIS ST STE 1910
 City SHREVEPORT State LA Zip Code 71101
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015
Transaction ID : SA11AI.31592
 Amount of Each Receipt this Period
 300.00

C. NANCY PIERRON
 Full Name (Last, First, Middle Initial)
 Mailing Address 306 FORTUNE DR
 City MONROE State LA Zip Code 71203
 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 ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015
Transaction ID : SA11AI.31521
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional).....▶	490.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. LORETTA RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 TWIN OAKS BLVD
 City LAFAYETTE State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2015
Transaction ID : SA11AI.31413
 Amount of Each Receipt this Period
 200.00

B. PAMELA SCHAFFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 N. HULLEN ST.
 City METAIRIE State LA Zip Code 70002
 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 ▼ 240.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : SA11AI.31368
 Amount of Each Receipt this Period
 8.25

C. PAMELA SCHAFFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 N. HULLEN ST.
 City METAIRIE State LA Zip Code 70002
 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 ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : SA11AI.31392
 Amount of Each Receipt this Period
 8.25

SUBTOTAL of Receipts This Page (optional).....▶	216.50
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: PAGE 13 OF 35
(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

A. MS. MARY T SVENDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 WOODLAND DR
 City State Zip Code
 BATON ROUGE LA 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED COMMUNITY VOLUNTEER
 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
 10 / 28 / 2015
Transaction ID : SA11AI.31597
 Amount of Each Receipt this Period
 5000.00

B. MR. JOSHUA W TUCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 LONGSTREET ROAD
 City State Zip Code
 PINEVILLE LA 71360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LSU STUDENT
 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 / 30 / 2015
Transaction ID : SA11AI.31372
 Amount of Each Receipt this Period
 75.00

C. THOMAS TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2014 DAHLIA ST
 City State Zip Code
 BATON ROUGE LA 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TURNER INDUSTRIES, LTD. VICE CHRMAN
 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
 10 / 30 / 2015
Transaction ID : SA11AI.31475
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10075.00
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: PAGE 14 OF 35
(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

A. Full Name (Last, First, Middle Initial)
GEORGE WHITE

Mailing Address 1205 JEFFERSON AVENUE

City State Zip Code
NEW ORLEANS LA 70115

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

Name of Employer Occupation
STEWART ENTERPRISES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11AI.31577

Amount of Each Receipt this Period
750.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	14846.50

**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. AMERICAN EXPRESS

Mailing Address 777 AMERICAN EXPRESS WAY

City State Zip Code
FT LAUDERDALE FL 33336

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:SEE MEMO ENTRIES

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 / 13 / 2015

Transaction ID : SB21B.31309

Amount of Each Disbursement this Period

702.80

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address 777 AMERICAN EXPRESS WAY

City State Zip Code
FT LAUDERDALE FL 33336

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:ANNUAL MEMBERSHIP FEE

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 / 13 / 2015

Transaction ID : SB21B.31310

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address 777 AMERICAN EXPRESS WAY

City State Zip Code
FT LAUDERDALE FL 33336

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:INTEREST

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 / 13 / 2015

Transaction ID : SB21B.31311

Amount of Each Disbursement this Period

18.44

[MEMO ITEM]

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

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

702.80

**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. ANDREA'S NEW ORLEANS ITALIAN RESTAURANT

Mailing Address 3100 19TH ST

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2015

Transaction ID : SB21B.31315

Amount of Each Disbursement this Period

94.38

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ANDREA'S NEW ORLEANS ITALIAN RESTAURANT

Mailing Address 3100 19TH ST

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2015

Transaction ID : SB21B.31320

Amount of Each Disbursement this Period

94.38

[MEMO ITEM]

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 / 08 / 2015

Transaction ID : SB21B.31322

Amount of Each Disbursement this Period

52.57

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

52.57

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. 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 / 30 / 2015

Transaction ID : SB21B.31329

Amount of Each Disbursement this Period

290.89

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:AIR

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31336

Amount of Each Disbursement this Period

332.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DOUBLETREE

Mailing Address 7930 JONES BRANCH DR.
SUITE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
VISA PAYMENT:TRAVEL:LODGING

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 / 2015

Transaction ID : SB21B.31326

Amount of Each Disbursement this Period

363.89

[MEMO ITEM]

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

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

290.89

**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. EXXON MOBIL

Mailing Address 5959 LAS COLINAS BLVD.

City IRVING State TX Zip Code 75039

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:TRAVEL:FUEL

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
10			13			2015			

Transaction ID : SB21B.31321

Amount of Each Disbursement this Period

45.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:ONLINE ADVERTISING

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
10			13			2015			

Transaction ID : SB21B.31317

Amount of Each Disbursement this Period

137.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING

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
10			07			2015			

Transaction ID : SB21B.31301

Amount of Each Disbursement this Period

2849.00

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

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

2849.00

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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. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING

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 / 2015

Transaction ID : SB21B.31303

Amount of Each Disbursement this Period

4519.00

Full Name (Last, First, Middle Initial)

B. FRIENDS COASTAL

Mailing Address 407 ST TAMMANY ST

City MADISONVILLE State LA Zip Code 70447

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31351

Amount of Each Disbursement this Period

73.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FURY'S RESTAURANT

Mailing Address 724 MARTIN BEHRMAN AVE

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31348

Amount of Each Disbursement this Period

40.26

[MEMO ITEM]

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

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

4519.00

**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. GOOGLE

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAINVIEW State CA Zip Code 94043

Purpose of Disbursement AMERICAN EXPRESS PAYMENT:ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 13 / 2015

Transaction ID : **SB21B.31312**

Amount of Each Disbursement this Period: 115.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HYATT

Mailing Address 71 SOUTH WACKER DRIVE SUITE 1000

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31347**

Amount of Each Disbursement this Period: 76.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. KINGFISH

Mailing Address 335 CHARTRES ST

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31332**

Amount of Each Disbursement this Period: 50.62

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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. MARK TWAINS PIZZA LANDING

Mailing Address 035 METAIRIE ROAD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31342**

Amount of Each Disbursement this Period: 29.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. MARK TWAINS PIZZA LANDING

Mailing Address 035 METAIRIE ROAD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31356**

Amount of Each Disbursement this Period: 32.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. OFFICE DEPOT

Mailing Address P.O. BOX 9020

City DES MOINES State IA Zip Code 50368

Purpose of Disbursement VILLERE REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31343**

Amount of Each Disbursement this Period: 65.08

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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. OUTBACK

Mailing Address 2746 SEVERN AVE

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	5

Transaction ID : SB21B.31334

Amount of Each Disbursement this Period

4	6	.	9	8
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. PAYPAL

Mailing Address 2211 NORTH FIRST STREET

City SAN JOSE State CA Zip Code 95131

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	5

Transaction ID : SB21B.31313

Amount of Each Disbursement this Period

5	0	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. PJ'S COFFEE

Mailing Address 509 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	1	5

Transaction ID : SB21B.31354

Amount of Each Disbursement this Period

3	2	.	5	0
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[MEMO ITEM]

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

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

0	0	.	0	0
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0	0	.	0	0
---	---	---	---	---

**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. PREMIUM PARKING SERVICE

Mailing Address 616 TOULOUSE ST

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:TRAVEL:PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2015

Transaction ID : SB21B.31318

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. REPUBLICAN WOMEN'S CLUB OF JEFFERSON PARISH

Mailing Address 3100 19TH STREET

City METAIRIE State LA Zip Code 70001

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31363

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ROYAL BLEND COFFEE & TEA

Mailing Address 204 METAIRIE RD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31345

Amount of Each Disbursement this Period

30.79

[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. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31337

Amount of Each Disbursement this Period

15.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31339

Amount of Each Disbursement this Period

25.18

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31353

Amount of Each Disbursement this Period

19.30

[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. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31357**

Amount of Each Disbursement this Period: 18.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31359**

Amount of Each Disbursement this Period: 22.78

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2015

Transaction ID : **SB21B.31360**

Amount of Each Disbursement this Period: 13.07

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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. SHELL OIL

Mailing Address ONE SHELL PLAZA

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FUEL

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
10			28			2015			

Transaction ID : SB21B.31362

Amount of Each Disbursement this Period

104.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHOGUN JAPANESE RESTAURANT

Mailing Address 2325 VETERAN'S MEMORIAL BOULEVARD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

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
10			28			2015			

Transaction ID : SB21B.31358

Amount of Each Disbursement this Period

64.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SOHO ASIAN CUISINE

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

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
10			28			2015			

Transaction ID : SB21B.31338

Amount of Each Disbursement this Period

30.01

[MEMO ITEM]

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

0.00

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 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. SOHO ASIAN CUISINE

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31341

Amount of Each Disbursement this Period

52.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SOHO ASIAN CUISINE

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31344

Amount of Each Disbursement this Period

65.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. THE FRESH MARKET

Mailing Address 755 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2015

Transaction ID : SB21B.31349

Amount of Each Disbursement this Period

63.99

[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. MR. ROGER VILLERE

Mailing Address 838 AURORA ST

City State Zip Code
METAIRIE LA 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT:SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2015			

Transaction ID : SB21B.31331

Amount of Each Disbursement this Period

1456.29

Full Name (Last, First, Middle Initial)

B. VISA BUSINESS

Mailing Address P.O. BOX 23078

City State Zip Code
COLUMBUS GA 31902

Purpose of Disbursement
VISA PAYMENT:SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2015			

Transaction ID : SB21B.31325

Amount of Each Disbursement this Period

363.89

Full Name (Last, First, Middle Initial)

C. WUFOO.COM

Mailing Address 285 HAMILTON AVE

City State Zip Code
PALO ALTO CA 94301

Purpose of Disbursement
AMERICAN EXPRESS PAYMENT:WEB HOSTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2015			

Transaction ID : SB21B.31314

Amount of Each Disbursement this Period

29.95

[MEMO ITEM]

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

1820.18

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. YELLOW CAB

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Mailing Address HARTSFIELD JACKSON AIRPORT

Transaction ID : SB21B.31365

City ATLANTA State GA Zip Code 30337

Amount of Each Disbursement this Period

120.00

Purpose of Disbursement
VILLERE REIMBURSEMENT:TRAVEL:GORUND TRANSPORTATION

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

0.00

10234.44

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 35
	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 JAMESTOWN ASSOCIATES	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"/>	Transaction ID : SD10.5463	
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) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3800.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="3800.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3800.00"/>

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

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

NAME OF ACCOUNT REPUBLICAN PARTY OF LOUISIANA	DATE OF RECEIPT MM / DD / YYYY 10 / 13 / 2015	TOTAL AMOUNT TRANSFERRED 4390.61
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4390.61
Transaction ID : H3.31327	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	4390.61
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	4390.61

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

Form/Schedule: H3

Transaction ID : H3.31327

THIS IS A NON-FEDERAL SHARE TRANSFER FROM THE OCTOBER MONTHLY THAT IS WITHIN THE 60 DAY WINDOW.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

Form A: Adobe. Transaction ID: H4.31305. Allocated Activity or Event: Administrative. Date: 10/13/2015. Total Amount: 51.99.

Form B: Comcast. Transaction ID: H4.31306. Allocated Activity or Event: Administrative. Date: 10/13/2015. Total Amount: 91.62.

Form C: AT&T. Transaction ID: H4.31307. Allocated Activity or Event: Administrative. Date: 10/13/2015. Total Amount: 277.30.

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Row 1: SUBTOTAL of Allocated Federal and NonFederal Activity This Page. Values: 0.00, 0.00, 0.00.

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Row 1: TOTAL This Period (last page for each line only). Values: [Empty], [Empty], [Empty].

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) Transaction ID : H4.31308 DIRECT TV		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 60036		Allocated Activity or Event Year-To-Date 169985.79	
City State Zip Code LOS ANGELES CA 90060	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: AMERICAN EXPRESS PAYMENT:BROADBAND SERVICES	Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
42.11 + 74.86 = 116.97			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.31328 IBERIA BANK		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3700 ESSEN LANE		Allocated Activity or Event Year-To-Date 170233.33	
City State Zip Code BATON ROUGE LA 70809	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: BANK FEES	Category/Type		
Activity or Event Identifier: Administrative	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
89.11 + 158.43 = 247.54			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.31330 US POSTAL SERVICE		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 262100		Allocated Activity or Event Year-To-Date 170733.33	
City State Zip Code BATON ROUGE LA 70826	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: POSTAGE	Category/Type		
Activity or Event Identifier: Administrative	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
180.00 + 320.00 = 500.00			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
269.11		478.43		747.54

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
1627.56	2893.46	4521.02