PAGE 1 / 20

FEC FORM 3

FE5AN018

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorize	ed Committee	Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Committee to Elect G	Sary King			
ADDRESS (number and street)	5537 Canal Blvd			
Check if different than previously reported. (ACC)	New Orleans		LA 7012	4
2. FEC IDENTIFICATION	NUMBER ▼C	CITY	STATE A	ZIP CODE
C C00528125	3. IS RE	THIS X NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT  LA 01
4. TYPE OF REPORT ((a) Quarterly Reports:  April 15 Quarterly Reports (a) April 15 Quarterly Reports (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	y Report (Q1)	Day <b>PRE</b> -Election Report for the Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
July 15 Quarterly October 15 Quai		ection on 11 / 06	/ Y Y Y Y Y 2012	in the LA State of
January 31 Year-	End Report (YE) (c) 30-I	Day POST-Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Repo		ection on	/ Y " Y " Y " Y	in the State of
5. Covering Period	10 01 / Y 2012		M / D D / Y 17	Y Y Y 2012
I certify that I have examined  Type or Print Name of Treasu		of my knowledge and belief it is	true, correct and cor	nplete.
	hristopher M. Gagnon	[Electronically Filed]	Date 10	24 / Y Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z
NOTE: Submission of false, error	oneous, or incomplete information	tion may subject the person signir	ng this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 20

Write or Type Committee Name

#### Committee to Elect Gary King

2012 10 10 17 01 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 275.00 3600.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 275.00 3600.00 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 1349.59 5128.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1349.59 5128.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 2127.32 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 3655.32 Schedule C and/or Schedule D).....

#### 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 3 (Revised 12/2003)

PAGE 3 / 20

Write or Type Committee Name

### Committee to Elect Gary King

10 01 2012 10 17 2012 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	0.00	2750.00
	(ii) Unitemized	275.00	850.00
	(iii) TOTAL of contributions from individuals	275.00	3600.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	275.00	3600.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	1061.00	1386.00
	(b) All Other Loans	600.00	2269.32
	(c) TOTAL LOANS (add Lines 13(a) and (b))	1661.00	3655.32
	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	1936.00	7255.32

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

oursements

PAGE 4 / 20

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	1349.59	5128.00
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
20.	(add Lines 19(a) and (b))	7 7 7	7
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	1349.59	5128.00
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1540.91
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	1936.00
25.	SUBTOTAL (add Line 23 and Line 24)		3476.91
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	1349.59
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		2127.32

age# 12040410200							
SCHEDULE A (FEC Form 3)			1 -	NE NUMBER:	PAG	E 5 OF	20
` ,		Use separate schedule(s) for each category of the		only one)			
TEMIZED RECEIPTS		Detailed Summary Page	11a		11c	11d	П.
			12	X   13a	13b	14	15
Any information copied from such Reports a or for commercial purposes, other than using							
NAME OF COMMITTEE (In Full) Committee to Elect Gary King	g						
Full Name (Last, First, Middle Initial)  Gary King			Date	of Receipt			
Mailing Address 5537 Canal Blvd			M 10	M / D		2012	Y
City	State	Zip Code	Tranca	action ID : SA	124 416	7	
New Orleans	LA	70124	Hallsa	iction id . 3#	413A.410	<u> </u>	
FEC ID number of contributing federal political committee.	С н4	NM02056	Amou	unt of Each	Receipt th		_
Name of Employer	Occupation Music Tea		7 L		7	411.0	)0
Receipt For: 2012							
Primary Seneral	Election C	ycle-to-Date					
		736.00	7				
Other (specify)		730.00	4				
Full Name (Last, First, Middle Initial)  Gary King			Date	of Receipt			
Mailing Address 5537 Canal Blvd			M 10			2012	Y
City New Orleans	State LA	Zip Code 70124	Transa	ction ID : SA	\13A.4168	3	_
FEC ID number of contributing federal political committee.	С н4	NM02056	Amo	unt of Each	Receipt t	nis Period	_
Name of Employer	Occupation	า				650.0	00
Self	Music Tead			,			
Receipt For: 2012							
Primary General	Election C	ycle-to-Date					
Other (specify)		1386.00	71				
Other (specify)		, , , , , , , , , , , , , , , , , , , ,	-				
Full Name (Last, First, Middle Initial)	'		Date	of Receipt			
Mailing Address			M		D / Y	- Y - Y - Y	Y
City	State	Zip Code					_
FEC ID number of contributing federal political committee.	С		Amo	unt of Each	Receipt tl	nis Period	_
Name of Employer	Occupation	1			- 9		
Receipt For:	Election C	ycle-to-Date					
Primary General		, = =	_				
Other (specify)							
1 1 1-1-1	1						

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

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

1061.00

1061.00

Receipt For:

Primary

Other (specify)

General

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

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

lm	age# 12940415209			
	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 20 (check only one)  11a 11b 11c 11d 11d 12 13a X 13b 14 15
	ny information copied from such Reports and Star for commercial purposes, other than using the			person for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full) Committee to Elect Gary King			
	Full Name (Last, First, Middle Initial) Cut Loose Hair Studio			Date of Receipt
٦.	Mailing Address 5537 Canal Blvd.			10 12 2012
	City New Orleans	State LA	Zip Code 70124	Transaction ID : SA13B.4169
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		600.00 Loan
	Receipt For: 2012 Primary General Other (specify)	Election Cy	/cle-to-Date	
	Full Name (Last, First, Middle Initial)			Date of Receipt
о.	Mailing Address			M M / D D / Y Y Y Y
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify)	Election Cy	rcle-to-Date	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	Mailing Address  City	State	Zip Code	M M / D D / Y Y Y Y
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		-

Election Cycle-to-Date

600.00

600.00

Office Sought:

c. Nationbuilder

Los Angeles

City

Mailing Address 448 S Hill St.

Purpose of Disbursement

Suite 200

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER: (check only one)			PAGE	7	OF	20	
Use separate schedule(s)								
for each category of the Detailed Summary Page	×	17		18		19a		] 19b
Detailed Suffilliary 1 age		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.								

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) Committee to Elect Gary King Full Name (Last, First, Middle Initial) Date of Disbursement A. Action Press, Inc. 2012 Mailing Address 3720 Hessmer Ave. 10 City Zip Code State Amount of Each Disbursement this Period LA Metairie 70002 594.86 Purpose of Disbursement 006 Transaction ID: SB17.4174 Candidate Name Category/ Committee to Elect Gary King Type

Disbursement For:

	Senate President State: LA District: 01	Primary X General Other (specify)		
3.	Full Name (Last, First, Middle Initial)  Artvertising  Mailing Address 1911 Magazine St.			Date of Disbursement  M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
	City New Orleans Purpose of Disbursement Signs Candidate Name Committee to Elect Gary k	State Zip Code LA 70130  King	006 Category/ Type	Amount of Each Disbursement this Period 611.71  Transaction ID : SB17.4172
	Office Sought:  House Senate President State: LA District: 01	Disbursement For: 2012 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial)			

001 Transaction ID: SB17.4175 Candidate Name Category/ Committee to Elect Gary King Type Office Sought: House Disbursement For: 2012 X General Senate Primary President Other (specify) State: LA District: 01 1318.57 SUBTOTAL of Disbursements This Page (optional)..... 1318.57

Zip Code

90013

State

LA

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

2012

112.00

Amount of Each Disbursement this Period

Date of Disbursement

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a
	13b

20

OF

Detailed Summary Page Transaction ID: SC/10.4154 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 75.00 0.00 75.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 07<sup>M</sup> <sup>D</sup> 18 Ž012 07/18/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 75.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a
	13b

20

OF

Detailed Summary Page Transaction ID: SC/10.4117 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>25 <sup>M</sup> 07<sup>M</sup> Ž012 07/25/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

10

×	13a
	13h

20

Detailed Summary Page Transaction ID: SC/10.4118 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King ★ General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 150.00 0.00 150.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 <sup>M</sup>08<sup>M</sup> Ž012 08/01/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 150.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

11

×	13a
	13b

20

Detailed Summary Page Transaction ID: SC/10.4167 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 411.00 0.00 411.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 10<sup>M</sup> 03 Ž012 10/03/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 411.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

12

×	13a
	13b

20

Detailed Summary Page Transaction ID: SC/10.4168 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King ★ General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 650.00 0.00 650.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 10<sup>M</sup> <sup>D</sup>12 Ž012 10/12/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 650.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

13 OF

	13a
$oldsymbol{ abla}$	13h

20

Detailed Summary Page Transaction ID: SC/10.4120 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Cut Loose Hair Studio ★ General Mailing Address Other (specify)  $\blacktriangledown$ 5537 Canal Blvd. State ZIP Code City LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup>08<sup>M</sup> Ž012 0.00 08/27/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 14

JANS		Detailed Summary Page    (Gricol Strily Ship)   13b
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4169
Committee to Elect Gary King		
LOAN SOURCE Full Name (Last, Firs	et, Middle Initial)	Election: 2012
Cut Loose Hair Studio		Primary
Mailing Address		General Other (specify) ▼
5537 Canal Blvd.		
City	State ZIP C	code
New Orleans	LA 7012	4
Original Amount of Loan	Cumulative Payment	To Date Balance Outstanding at Close of This Period
600.00		0.00
TERMS		
Date Incurred	Date Du	
M 10 M / D 12 D / Y Ž01Ž Y	M M / D D / N	( 10)/12/14
List All Endorsers or Guarantors (if a	any) to Loan Source	Yes N
1. Full Name (Last, First, Middle Initia	al)	Name of Employer
Mailing Address		Occupation
<b>3</b>		
City Sta	ate ZIP Code	Amount Guaranteed
City	ate Zii Oode	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Sta	ate ZIP Code	Guaranteed
3. Full Name (Last, First, Middle Initial)	1	Outstanding:
3. Full Name (Last, First, Middle Illitial)	)	Name of Employer
Mailing Address		Occupation
		Amount
City Sta	ate ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	)	Name of Employer
Mailing Address		Occuration
Mailing Address		Occupation
O'th.	710.0.1	Amount
City Sta	ate ZIP Code	Guaranteed Outstanding:
1		
SUBTOTALS This Period This Page (option	onal)	
TOTALS This Period (last page in this lie	o only)	
***OTALS This Period (last page in this line	e only)	<b>&gt;</b>
Carry outstanding balance only to LINE	3. Schedule D. for this line.	If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER:

PAGE

15

	13a
$\overline{}$	10h

DAN5		Detailed Summary Page	X 13b
AME OF COMMITTEE (In Full) Committee to Elect Gary King	l	Transaction ID:	SC/10.4146
LOAN SOURCE Full Name (Last, Fi	rst, Middle Initial)	Election	: 2012
Kathy Rougelot			mary
Mailing Address 5537 Canal Blvd		Ger Oth	ler (specify) ▼
City	State ZIP C	Code	
New Orleans	LA 7012	4	
Original Amount of Loan	Cumulative Payment <sup>-</sup>	To Date Balance Outs	tanding at Close of This Period
209.8	19	0.00	209.89
TERMS  Date Incurred	Date Du	e Interest Rate	Secured:
M08M / D02D / Y 2012	Y M M / D D / Y	( 8/02/14 Y 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if	any) to Loan Source		100 110
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9
3. Full Name (Last, First, Middle Initial	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City S	State ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (op	tional)	·	209.89
TOTALS This Period (last page in this li	ne only)	······	,
Carry outstanding balance only to LINE	3, Schedule D, for this line.	f no Schedule D, carry forward to a	ppropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16

	13a
X	13b

DANS		for each category of the Detailed Summary Page (check only one) 13a
AME OF COMMITTEE (In Full) Committee to Elect Gary Ki	na	Transaction ID : SC/10.4147
LOAN SOURCE Full Name (Last		Floring
Kathy Rougelot	First, Middle Initial)	Election: 2012 Primary General
Mailing Address 5537 Canal Blvd		Other (specify) ▼
City	State	ZIP Code
New Orleans	LA	70124
Original Amount of Loan	Cumulative Pa	ayment To Date Balance Outstanding at Close of This Period
18	36.45	0.00
Date Incurred  Mo8 <sup>M</sup> / Do9 <sup>D</sup> / Y 2012		Date Due Interest Rate Secured:  0.00 % (apr)
List All Endorsers or Guarantors	(if any) to Loan Source	
1. Full Name (Last, First, Middle	Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page	(optional)	
<b>TOTALS</b> This Period (last page in th	s line only)	
Carry outstanding balance only to I	INE 3. Schedule D. for th	is line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 17

LUANS	Detailed Summary Page (Check only one)
NAME OF COMMITTEE (In Full)  Committee to Elect Gary King	Transaction ID : SC/10.4148
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: 2012
Kathy Rougelot	Primary  General
Mailing Address 5537 Canal Blvd	Other (specify) ▼
City State ZIP Code	9
New Orleans LA 70124	
Original Amount of Loan Cumulative Payment To D	Date Balance Outstanding at Close of This Period
211.41	0.00 211.41
TERMS  Date Incurred  Date Due  Mo8  Date Due	Interest Rate Secured:  0.00
	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount Guaranteed
July State Zir Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
Oliv Oliv	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	211.41
TOTALS This Period (last page in this line only)	······································
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no	o Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 18

DANS			Detailed Sumn	nary Page	(check only or	13b
AME OF COMMITTEE (In Full) Committee to Elect Gary k	ling			Transaction	ID : SC/10.4149	
LOAN SOURCE Full Name (Las	st, First, Middle In	nitial)		Ele	ction: 2012	
Kathy Rougelot				×	Primary General	
Mailing Address 5537 Canal Blvd					Other (specify)	▼
City	State	ZIP Cod	le			
New Orleans	LA	70124				
Original Amount of Loan	Cun	nulative Payment To	Date	Balance (	Outstanding at C	Close of This Period
, , , ,	209.89	2 9	0.00		7 7	209.89
TERMS  Date Incurred		Date Due	Inter	est Rate		Secured:
M <sub>08</sub> / P <sub>16</sub> / Y ž01	ў <sup>У</sup> У		8/16/14 <sup>Y</sup>	0.00	% (apr)	Yes No
List All Endorsers or Guaranton	rs (if any) to Loa	n Source				
1. Full Name (Last, First, Middle	e Initial)		Name of Employe	er		
Mailing Address			Occupation			
City	State ZIF	<sup>2</sup> Code	Amount Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle	Initial)		Name of Employe	er		
Mailing Address			Occupation			
			Amount			
City	State ZIF	<sup>o</sup> Code	Guaranteed Outstanding:	7	7	-
3. Full Name (Last, First, Middle	Initial)		Name of Employe	er		
Mailing Address			Occupation			
			Amount			
City	State ZIF	<sup>o</sup> Code	Guaranteed Outstanding:	7	7	-
4. Full Name (Last, First, Middle	Initial)		Name of Employe	er		
Mailing Address			Occupation			
City	State ZIF	<sup>2</sup> Code	Amount Guaranteed Outstanding:		7	
UBTOTALS This Period This Page	e (optional)		·····		7 7	209.89
TOTALS This Period (last page in t					7	line of C
Carry outstanding balance only to	LINE 3, Schedule	ט, for this line. If r	io Scheaule D, ca	irry torward	to appropriate	ine of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 19

	13a
$\overline{\mathbf{v}}$	13h

OANS		Detailed Summary Pag	
AME OF COMMITTEE (In Full)		Transac	etion ID : SC/10.4150
Committee to Elect Gary Kin	g		
LOAN SOURCE Full Name (Last, I	First, Middle Initial)		Election: 2012 Primary
Mailing Address 5537 Canal Blvd			
City	State ZIF	P Code	
New Orleans	LA 70	0124	
Original Amount of Loan	Cumulative Payme	nt To Date Bala	ance Outstanding at Close of This Period
101	.68	0.00	101.68
Date Incurred  MO8  Date Incurred  Y  Y  Z012	Date	Due Interest Rate  Y 08/24/14  0.00	
List All Endorsers or Guarantors (			
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (c	ptional)	······	101.68
FOTALS This Period (last page in this	line only)		
Carry outstanding balance only to LIN	E 3. Schedule D. for this lin	e. If no Schedule D. carry forv	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 20 OF

	13a
abla	13h

OANS		Detailed Summary Pag	
AME OF COMMITTEE (In Full)		Transac	etion ID : SC/10.4151
Committee to Elect Gary King			
LOAN SOURCE Full Name (Last, Fi	rst, Middle Initial)		Election: 2012
Kathy Rougelot			Primary
Mailing Address			General Other (specify) ▼
5537 Canal Blvd			Other (specify)
City	State ZIP	Code	
New Orleans	LA 701.	24	
Original Amount of Loan	Cumulative Payment	To Date Bala	ance Outstanding at Close of This Period
250.0	00	0.00	250.00
TERMS  Date Incurred	Date D	ue Interest Rate	e Secured:
M 09 / D 28 D / Y Ž01Ž	Y M M / D D /	0.00	% (apr) Yes No
List All Endorsers or Guarantors (if	any) to Loan Source		100 110
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	state ZIP Code	Guaranteed Outstanding:	9 1 9 1 9
SUBTOTALS This Period This Page (op	tional)		250.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3. Schedule D. for this line. If no Schedule D. carry forward to appropriate line of Summary.			