

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Louisiana Reform PAC

ADDRESS (number and street) PO Box 1542

Check if different than previously reported. (ACC) Shreveport LA 71165-1542

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

C C00409631 3. IS THIS REPORT NEW (N) OR AMENDED (A)  (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Jan 31 (YE)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on [M M] / [D D] / [Y Y Y Y Y Y] in the State of [ ]

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on [M M] / [D D] / [Y Y Y Y Y Y] in the State of [ ]

5. Covering Period [M M] / [D D] / [Y Y Y Y Y Y] 11 / 23 / 2010 through [M M] / [D D] / [Y Y Y Y Y Y] 12 / 31 / 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John Schmidt

Signature of Treasurer John Schmidt [Electronically Filed] Date [M M] / [D D] / [Y Y Y Y Y Y] 10 / 31 / 2011

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Louisiana Reform PAC

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="2010"/>	<input type="text" value="9605.73"/>	<input type="text" value="9605.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10251.89"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5400"/>	<input type="text" value="85745.6"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="15651.89"/>	<input type="text" value="95351.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8995.13"/>	<input type="text" value="88694.57"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6656.76"/>	<input type="text" value="6656.76"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**Louisiana Reform PAC**

Report Covering the Period: From:  /  /  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).....	5400	24300
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5400	24300
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	59000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5400	83300
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	2445.6
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5400	85745.6
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5400	85745.6

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	2495.13	47694.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2495.13	47694.57
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500	41000
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8995.13	88694.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8995.13	88694.57

**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) .....	5400	83300
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5400	83300
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2495.13	47694.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2495.13	47694.57

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

Form/Schedule: F3XA  
Transaction ID :

Contribution to Miller Baker for State Senate on December 22, 2010 was inadvertently entered as \$250.00 instead of \$2,500.00. Therefore, the ending cash balance was overstated by \$2,250.

Form/Schedule:  
Transaction ID:

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

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

NAME OF COMMITTEE (In Full)  
**Louisiana Reform PAC**

Full Name (Last, First, Middle Initial)  
**A. Donald Bollinger**

Mailing Address PO Box 250

City Lockport State LA Zip Code 70374-0250

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

Name of Employer Bolinger Shipyards Occupation Self-employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-328-918-c**

Amount of Each Receipt this Period  
300

Washington Mardi Gras

Full Name (Last, First, Middle Initial)  
**B. Kenneth Wright**

Mailing Address 9301 Melissa Way

City Shreveport State LA Zip Code 71115-2527

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

Name of Employer Self-employed Occupation Self-employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-495-920-c**

Amount of Each Receipt this Period  
300

Washington Mardi Gras

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

Mailing Address 2771 Point Drive

City Monroe State LA Zip Code 71201-2435

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

Name of Employer Self-employed Occupation Philanthropist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-496-921-c**

Amount of Each Receipt this Period  
900

Washington Mardi Gras

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 14
	(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)  
**Louisiana Reform PAC**

**A. Elwood Cahill Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 909 Poydras Street  
 Floor 28  
 City New Orleans State LA Zip Code 70112-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Sher Garner Cahill Richter Klein & Hil Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2010  
**Transaction ID : SA11AI-497-922-c**  
 Amount of Each Receipt this Period  
**300**  
 Washington Mardi Gras

**B. Charles Belair**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8768 Highway 23  
 City Belle Chasse State LA Zip Code 70037-2228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Realtor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2010  
**Transaction ID : SA11AI-499-932-c**  
 Amount of Each Receipt this Period  
**300**  
 Washington Mardi Gras

**C. Keith Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 Willow Drive  
 City Gretna State LA Zip Code 70053-4838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stone Pigman W W, LLC Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2010  
**Transaction ID : SA11AI-500-933-c**  
 Amount of Each Receipt this Period  
**300**  
 Washington Mardi Gras

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 14
	(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)  
**Louisiana Reform PAC**

**A. Donna Sternberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 2375 Keinert Avenue

City Baton Rouge State LA Zip Code 70806

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

Name of Employer Starmount Life Insurance Com Occupation Executive VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-501-934-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

**B. Richard Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 W Causeway Approach

City Mandeville State LA Zip Code 70471-3034

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

Name of Employer RCL Consultants, LLC Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-502-935-c**

Amount of Each Receipt this Period  
**1200**

Washington Mardi Gras

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

Mailing Address PO Box 888

City Loreauville State LA Zip Code 70552-0888

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

Name of Employer Breaux Brothers Ent, Inc Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-503-936-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 14
	(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)  
**Louisiana Reform PAC**

**A. Larry Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 17573 Wildwood Drive

City Bogalusa State LA Zip Code 70427-8403

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

Name of Employer Bogalusa Main St Program Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-504-937-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

**B. Adolphe Guidry**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Oak Avenue

City Westwego State LA Zip Code 70094-3014

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**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-505-938-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

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

Mailing Address 2005 Charvais Drive

City Lake Charles State LA Zip Code 70601-5605

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

Name of Employer SSVCS, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2010

**Transaction ID : SA11AI-506-939-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Louisiana Reform PAC**

**A. David Perry**  
Full Name (Last, First, Middle Initial)

Mailing Address 2003 Charvais Drive

City Lake Charles State LA Zip Code 70601-5605

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

Name of Employer The Perry Agency, Inc Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2010**

**Transaction ID : SA11AI-507-940-c**

Amount of Each Receipt this Period  
**300**

Washington Mardi Gras

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>5400.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Louisiana Reform PAC**

Full Name (Last, First, Middle Initial)

**A. CompleteCampaigns.com**

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
December software maintenance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2010

Transaction ID : SB21B-164-913-e

Amount of Each Disbursement this Period

403

Full Name (Last, First, Middle Initial)

**B. Courtney Guastella**

Mailing Address 7449 Garfield Street

City New Orleans State LA Zip Code 70118-3636

Purpose of Disbursement  
December retainer-no candidate benefitted

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

003

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2010

Transaction ID : SB21B-103-914-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C. Jeffrey Landry**

Mailing Address 101 AUBOR LANE

City NEW IBERIA State LA Zip Code 70563

Purpose of Disbursement  
Saints tickets-no candidate benefitted

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

003

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2010

Transaction ID : SB21B-492-912-e

Amount of Each Disbursement this Period

710

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

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

2113.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Louisiana Reform PAC**

Full Name (Last, First, Middle Initial)

**A. Monica Schmidt**

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement  
December admin

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2010

**Transaction ID : SB21B-165-915-e**

Amount of Each Disbursement this Period

250

Full Name (Last, First, Middle Initial)

**B. Regions Bank**

Mailing Address 333 Texas Street

City Shreveport State LA Zip Code 71101-3666

Purpose of Disbursement  
December analysis charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2010

**Transaction ID : SB21B-403-916-e**

Amount of Each Disbursement this Period

23.83

Full Name (Last, First, Middle Initial)

**C. CompleteCampaigns.com**

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Credit card fee-no candidate benefitted

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2010

**Transaction ID : SB21B-164-923-e**

Amount of Each Disbursement this Period

90

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

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

363.83

2476.83

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Louisiana Reform PAC**

Full Name (Last, First, Middle Initial)

**A. Landry For Louisiana**

Mailing Address PO Box 13816

City State Zip Code  
New Iberia LA 70562-3816

Purpose of Disbursement  
Political Contribution: Debt retirement

Candidate Name  
**Jeffrey M Landry**

Office Sought:  House  Senate  President  
State: LA District: 03  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼ Retire Debt - G2010

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2010

**Transaction ID : SB23-493-911-e**

Amount of Each Disbursement this Period

4000
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Full Name (Last, First, Middle Initial)

**B. Miller Baker for State Senate**

Mailing Address PO Box 158

City State Zip Code  
Clifton VA 20124-0158

Purpose of Disbursement  
Political Contribution: PAC Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2010

**Transaction ID : SB23-498-931-e**

Amount of Each Disbursement this Period

2500
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

6500.00
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6500.00
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