

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

LOUISIANA TRUTH PAC

ADDRESS (number and street)

516 ST PHILIP STREET

Check if different than previously reported. (ACC)

NEW ORLEANS

LA

70116

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00485854

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 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 James S Burland

Signature of Treasurer Electronically Filed by James S Burland Date 05 16 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.

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This is an Independent Expenditure only PAC as designated in our Form 1 and Form 99 filings. AMENDED:
This report has been amended to correct an erroneous entry for Stuart Smith that was previously reported on the original Oct. Quarterly report, in response to an FEC request letter dated April 11, 201-1.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
LOUISIANA TRUTH PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0	<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>0.00</td></tr></table>	0.00
X	Y	Y	Y									
2	0	1	0									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1"><tr><td>115975.00</td></tr></table>	115975.00	<table border="1"><tr><td>115975.00</td></tr></table>	115975.00								
115975.00												
115975.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1"><tr><td>115975.00</td></tr></table>	115975.00	<table border="1"><tr><td>115975.00</td></tr></table>	115975.00								
115975.00												
115975.00												
7. Total Disbursements (from Line 31)	<table border="1"><tr><td>103872.13</td></tr></table>	103872.13	<table border="1"><tr><td>103872.13</td></tr></table>	103872.13								
103872.13												
103872.13												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1"><tr><td>12102.87</td></tr></table>	12102.87	<table border="1"><tr><td>12102.87</td></tr></table>	12102.87								
12102.87												
12102.87												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
LOUISIANA TRUTH PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	115975.00	115975.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	115975.00	115975.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	115975.00	115975.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
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)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	115975.00	115975.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	115975.00	115975.00

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11030.00	11030.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11030.00	11030.00
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 Expenditure (use Schedule E)	92842.13	92842.13
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	103872.13	103872.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103872.13	103872.13

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)	115975.00	115975.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	115975.00	115975.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11030.00	11030.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11030.00	11030.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 TRUTH PAC

A. Full Name (Last, First, Middle Initial)
Barry J Cooper

Mailing Address 100 S. Pointe Drive
Suite 3304

City State Zip Code
Miami Beach FL 33139

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

Name of Employer self Occupation
self attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2010

Transaction ID: SA11AI.4124

Amount of Each Receipt this Period
5000.00

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

Mailing Address 931 Rue St. Louis Street

City State Zip Code
New Orleans LA 70130

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

Name of Employer retired Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.4191

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Steve Murray, Sr.

Mailing Address 650 Poydras Street
Suite 1100

City State Zip Code
New Orleans LA 70130

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

Name of Employer self Occupation
self attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2010

Transaction ID: SA11AI.4129

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 10100.00

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 / 17
(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 TRUTH PAC

A.

Full Name (Last, First, Middle Initial) Stuart H Smith		Date of Receipt MM / DD / YYYY 07 / 20 / 2010
Mailing Address 100 S. Pointe Drive Suite 3304		Transaction ID: SA11AI.4126
City Miami	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer SmithStag, LLC	Occupation attorney	contribution (personal check)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) Stuart H Smith		Date of Receipt MM / DD / YYYY 08 / 25 / 2010
Mailing Address 100 S. Pointe Drive Suite 3304		Transaction ID: SA11AI.4160
City Miami	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer SmithStag, LLC	Occupation attorney	cash contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) Stuart H Smith		Date of Receipt MM / DD / YYYY 09 / 11 / 2010
Mailing Address 100 S. Pointe Drive Suite 3304		Transaction ID: SA11AI.4195
City Miami	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35000.00
Name of Employer SmithStag, LLC	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40000.00	

SUBTOTAL of Receipts This Page (optional)	▶	65000.00
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 / 17	
	(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

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 TRUTH PAC

A.	Full Name (Last, First, Middle Initial) Stuart H Smith		Date of Receipt
	Mailing Address 100 S. Pointe Drive Suite 3304		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2010
	City	State	Zip Code
	Miami	FL	33139
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4228
Name of Employer SmithStag, LLC		Occupation attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 35875.00
		<input type="text"/> 75875.00	contributions via personal credit card, Stuart Smith

B.	Full Name (Last, First, Middle Initial) Mike Stag		Date of Receipt
	Mailing Address 1127 Phillip Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 11 / 2010
	City	State	Zip Code
	New Orleans	LA	70130
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4127
Name of Employer self		Occupation attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
		<input type="text"/> 5000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 40875.00
TOTAL This Period (last page this line number only)	<input type="text"/> 115975.00

**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

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 TRUTH PAC

A.

Full Name (Last, First, Middle Initial)
Burland & Associates, Inc.

Transaction ID: SB21B.4205
Date of Disbursement

Mailing Address 13144 Perkins Road
Suite B

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	0

City Baton Rouge State LA Zip Code 70810

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
paid preparer services paid by Stuart Smith business credit card

001

Category/
Type

Candidate Name
LOUISIANA TRUTH PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Bess Carrick

Transaction ID: SB21B.4210
Date of Disbursement

Mailing Address 706 Lowerline Street

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	0

City New Orleans State LA Zip Code 70118

Amount of Each Disbursement this Period

9500.00

Purpose of Disbursement
media consulting services

004

Category/
Type

Candidate Name
LOUISIANA TRUTH PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

11000.00

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

11000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC	FEC IDENTIFICATION NUMBER C C00485854
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Direct Mail Plus, LLC

Mailing Address
POB 292

City State Zip Code
Metairie LA 70004

Purpose of Expenditure
postcard printing, production, mailing list rental services

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought **0.00**

Date
M M / D D / Y Y Y Y
08 / 19 / 2010

Amount
18204.01

Transaction ID: SE.4136

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Direct Mail Plus, LLC

Mailing Address
POB 292

City State Zip Code
Metairie LA 70004

Purpose of Expenditure
mail piece production, postage, in-kind from Stuart Smith, cr

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought **0.00**

Date
M M / D D / Y Y Y Y
08 / 24 / 2010

Amount
16171.00

Transaction ID: SE.4142

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34375.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stuart H Smith
Signature

Date M M / D D / Y Y Y Y
05 / 16 / 2011

A. Form/Schedule : **SE**

Transaction ID : **SE.4136**

This is an in-kind payment to Direct Mail Plus from Stuart Smith; however, the in-kind box was not checked on line 11(a) because doing so would not allow the software to add it to Form 24 for electronic filing purposes. J. Burland, preparer.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC	FEC IDENTIFICATION NUMBER C C00485854
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Don Burrell Services

Mailing Address
1400 Buford Highway

City State Zip Code
Sugarhill GA 30518

Purpose of Expenditure
polling and robo-call services--PAC check

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought
0.00

Date
08 / 28 / 2010

Amount
3440.00

Transaction ID: SE.4184

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Gulf South Media

Mailing Address
7818 St. Charles Ave

City State Zip Code
New Orleans LA 70118

Purpose of Expenditure
website design, research, setup services--PAC check

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought
0.00

Date
08 / 20 / 2010

Amount
10000.00

Transaction ID: SE.4138

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	13440.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stuart H Smith
Signature

Date 05 / 16 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC	FEC IDENTIFICATION NUMBER C C00485854
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Newswatch 15 Cable News Station

Mailing Address
1024 N. Rampart St

City New Orleans	State LA	Zip Code 70116
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Purpose of Expenditure TV media buys--PAC check	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought	0.00
---	------

Date
08 / 24 / 2010

Amount
4187.50

Transaction ID: SE.4143

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Newswatch 15 Cable News Station

Mailing Address
1024 N. Rampart St

City New Orleans	State LA	Zip Code 70116
---------------------	-------------	-------------------

Purpose of Expenditure in-kind payment via cc by Stuart Smith to News15 for media buys & production costs	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought	0.00
---	------

Date
08 / 27 / 2010

Amount
1250.00

Transaction ID: SE.4183

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5437.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stuart H Smith
Signature

Date 05 / 16 / 2011

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC	FEC IDENTIFICATION NUMBER C C00485854
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Ralph Madison Productions

Mailing Address
3219 St. Thomas St

City New Orleans	State LA	Zip Code 70115
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Purpose of Expenditure
TV ad production, studio time, related services--PAC check

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought **0.00**

Date
M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Amount
4400.00

Transaction ID: SE.4147

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
WDSU TV

Mailing Address
846 Howard Ave

City New Orleans	State LA	Zip Code 70113
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Purpose of Expenditure
TV media buys--PAC check

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Calendar Year-To-Date Per Election for Office Sought **0.00**

Date
M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Amount
3868.75

Transaction ID: SE.4151

Office Sought: House State: LA
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8268.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stuart H Smith
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC	FEC IDENTIFICATION NUMBER C C00485854
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
WVUE Fox 8 TV

Date
MM / DD / YYYY
08 / 24 / 2010

Mailing Address
1025 S. Jefferson Davis Parkway

Amount
2800.87

City State Zip Code
New Orleans LA 70125

Transaction ID: SE.4149
Office Sought: House State: LA
 Senate District: 02
 Presidential

Purpose of Expenditure
TV media buys--PAC check

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
0.00

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
WWL TV

Date
MM / DD / YYYY
08 / 24 / 2010

Mailing Address
1024 N. Rampart St

Amount
18520.00

City State Zip Code
New Orleans LA 70116

Transaction ID: SE.4145
Office Sought: House State: LA
 Senate District: 02
 Presidential

Purpose of Expenditure
TV media buys--PAC check

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
CEDRIC L RICHMOND

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
0.00

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	21320.87
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stuart H Smith
Signature

Date MM / DD / YYYY
05 / 16 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LOUISIANA TRUTH PAC		FEC IDENTIFICATION NUMBER C C00485854	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee WWL TV		Date M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 1 0	
Mailing Address 1024 N. Rampart St		Amount 10000.00	
City State Zip Code New Orleans LA 70116		Transaction ID: SE.4182	
Purpose of Expenditure in-kind payment via cc by Stuart Smith to WWL-TV for media Days & Production Costs CEDRIC L RICHMOND		Office Sought: <input checked="" type="checkbox"/> House State: LA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
0.00			

(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	92842.13
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Stuart H Smith Signature	Date M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 1 1