10/22/2016 18 : 47

Image# 201610229034529379 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sc	hedule E)				FOR SE OF FORM 24/48			
	efend Louisiana PAC				C C00616128			
Check if 🗶 24-hour report 🗌 48-hour report 🗶 New report 🗋 Amends report filed on 🚺 / 🚺 / 💾 /								
	Full Name of Payee			Dat	e of Public Distribution/Dissemination			
	-				10 / D D / Y Y Y Y 22 2016			
	Mailing Address 1746 Jackson Ave			Am	ount			
ŀ	City	State	Zip Code		6000.00			
	New Orleans	LA	70115		nsaction ID : SE.4270 e of Disbursement or Obligation			
	Purpose of Expenditure Community outreach/Canvassing		Category/ Type 004		10 / D D / Y Y Y Y 2016			
	Name of Federal Candidate		X Support	Office Sou	ight: House District: 00			
	CAMPBELL, FOSTER LONNNIE II, , ,		Oppose	Pres	ident X Senate State: LA			
	Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	147893.93	Disbursem 2016	ent For: Primary X General Other (specify)			
- [Full Name of Payee			Dat	te of Public Distribution/Dissemination			
	BOLD				M M / D D / Y Y Y Y 10 22 2016			
	Mailing Address 1746 Jackson Ave			Am	ount			
	City New Orleans	State LA	Zip Code 70115	Tran	20700.00			
-	Purpose of Expenditure			Dat	te of Disbursement or Obligation			
	Postage		Category/ Type 004		10 / 22 / 2016			
	Name of Federal Candidate		X Support	Office Sou	ight: House District: 00			
	CAMPBELL, FOSTER LONNNIE II, , ,		Oppose	Pres	sident X Senate State: LA			
	Calendar Year-To-Date Per Election for Office Sought	· · · · · · · · · · · · · · · · · · ·	116293.93	Disbursem 2016	eent For: Primary X General Other (specify) ►			
((a) SUBTOTAL of Itemized Independent E	Expenditures			26700.00			
((b) SUBTOTAL of Unitemized Independer	nt Expenditures		• •				
(c) TOTAL Independent Expenditures								
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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.								
	Townsend, Taylor, , ,	Flectron	ically Filed] Date					
	Signature		Date	e 10	22 2016			

Image# 201610229034529380 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (in Full Defend Louisiana PAC FEC IDENTIFICATION NUMBER ▼ Check if X 24-hour report Amends report filed on	(Sc	chedule E)					PAGE 2 OF 3 FOR SE OF FORM 24/48		
Clock if ∑24-hour report 48-hour report X New report Amends report filed on 101 / 102 / 100 /						FEC I	DENTIFICATION NUMBER ▼		
Check if ¥ 24-hour report 48-hour report Amends report field on Full Name of Payee Date of Public Distribution/Dissemination Only State Zp Code New Orleans LA 70115 Purpose of Expenditure Category/ UP 0.44 Purpose of Expenditure X Support Office Sought Halling Address 17.46 Jackson Ave Name of Federal Candidate X Support Category/ Preficient Candidate X Support Calendar Year To-Date Primary Full Name of Payee Date of Public Distribution/Dissemination OPDEC/ Mele Printing Date of Public Distribution/Dissemination Op Y 22 / 2016 Name of Federal Candidate Z 2000,00 City State Zip Code New Orleans LA 70127 Predident X Senate Category/ Date of Disbutement Or Obligation Topose of Expenditure Category/ Printing Out- Category/ Date of Disbutement Or Obligation Printing Category/ Opeose Out- Category/ Date of Disbutement Or Obligation City State Zip Code New Orleans <td< td=""><th></th><td>erend Louisiana PAC</td><td></td><td></td><td></td><td>С</td><td>C00616128</td></td<>		erend Louisiana PAC				С	C00616128		
Full Name of Payre BOLD Date of Public Distribution/Dissemination Mailing Address 1746 Jackson Ave 10 ' 22 ' 2016 Amount City State Zip Code Purpose of Expenditure Printing Category/ Opeose 00 ' 22 ' 2016 Name of Federal Candidate X Support 00 ' 22 ' 2016 Category/ President Year-To-Date Per Election for Office Sought House District: 00 10 ' 22 ' 2016 Full Name of Payrea Oppose Distoursement For: Printing Other (specify) Date of Public Distribution/Dissemination Other (specify) Date of Expenditure Purpose of Expenditure X Support Other (specify) Date of Distribution/Dissemination Other (specify) Date of Distribution/Dissemination Other (specify) Date of Distribution/Dissemination Other (specify) Date of Distribution Office Sought Purpose of Expenditure X Support Office Sought	-								
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CAMPBELL, FOSTER LONNNIE II, Oppose Didle Sought						M M			
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Per Election for Office Sought 141893.93 2016 Other (specify) ▶ Full Name of Payee OPDEC/ Mele Printing Date of Public Distribution/Dissemination Mailing Address 5801 Waterford Bivd Amount City State Zip Code New Orleans LA 70127 Purpose of Expenditure Category/ 004 Printing Category/ 004 Name of Federal Candidate Support Office Sought CAMPBELL, FOSTER LONNNIE II, ., Oppose President X Senate State: Category Per Election for Office Sought 172893.93 Disbursement For: Primary (a) SUBTOTAL of Itemized Independent Expenditures 46600.00 46600.00 (b) SUBTOTAL of Unitemized Independent Expenditures 46600.00 46600.00 (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures or agent of either, or (if the reporting entity is not a political party committee or its agent. Inversend, Taylor, ., [Electronically Filed] Date 10 22 2016		CAMPBELL, FOSTER LONNNIE II, , ,		Oppose	Pres	ident	Senate State: LA		
Full Name of Payee Date of Public Distribution/Dissemination Mailing Address 5801 Waterford Bivd Mailing Address 5801 Waterford Bivd Mailing Address 5801 Waterford Bivd City State Zip Code New Orleans LA 70127 Purpose of Expenditure Category/ Type 004 Printing Category/ Type 004 Name of Federal Candidate Support Office Sought CAMPBELL, FOSTER LONNNIE II, Oppose President Calendar Year-To-Date Pisture Disbursement For: Per Election for Office Sought 172893.93 Disbursement For: (a) SUBTOTAL of Itemized Independent Expenditures + 46600.00 (b) SUBTOTAL of Unitemized Independent Expenditures + 46600.00 (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. Index of Display Prelical Pride Of Prelical Pride Of Prelical Pride Of Prelical Pride				141893.93		6			
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City State Zip Code 25000.00 New Orleans LA 70127 Transaction ID: SE.4281 Purpose of Expenditure Category/ Printing 004 10 22 2016 Name of Federal Candidate Support Office Sought: House District: 00 CAMPBELL, FOSTER LONNNIE II, , , Oppose President X Senate State: LA Calendar Year-To-Date Per Election for Office Sought 172893.93 Disbursement For: Primary X General (a) SUBTOTAL of Itemized Independent Expenditures 46600.00 46600.00 (b) SUBTOTAL of Unitemized Independent Expenditures 46600.00 46600.00 (c) TOTAL Independent Expenditures 22 2016 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 or its agent.		Mailing Address 5801 Waterford Blvd							
New Orleans LA 70127 Transaction ID: SE.4281 Date of Disbursement or Obligation Purpose of Expenditure Printing Category/ Type 004 10 22 2016 Name of Federal Candidate Image: Support Office Sought: House District: 00 CAMPBELL, FOSTER LONNNIE II, , , Oppose President Senate State: LA Calendar Year-To-Date Per Election for Office Sought 172893.93 Disbursement For: Primary General (a) SUBTOTAL of Itemized Independent Expenditures + 46600.00 + 46600.00 (b) SUBTOTAL of Unitemized 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. Townsend, Taylor, [Electronically Filed] Date 10 22 2016						ount			
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Printing Odd 10 22 2016 Name of Federal Candidate Support Office Sought: House District: 00 CAMPBELL, FOSTER LONNNIE II, , Oppose President Senate State: LA Calendar Year-To-Date President Senate State: LA Disbursement For: Primary X General 2016 0ther (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures 46600.00 (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.			LA	70127					
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Per Election for Office Sought 172893.93 2016 Other (specify) > (a) SUBTOTAL of Itemized Independent Expenditures > 46600.00 (b) SUBTOTAL of Unitemized Independent Expenditures > - 46600.00 (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.		CAMPBELL, FOSTER LONNNIE II, , ,		Oppose	Pres	sident	X Senate State: LA		
(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. Townsend, Taylor, . , [Electronically Filed] Date 10 22 2016			· · · · · · · ·	172893.93					
(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. Townsend, Taylor, . , [Electronically Filed] Date 10 22 2016	Γ				_				
(c) TOTAL Independent Expenditures	(a) SUBTOTAL of Itemized Independent Expenditures + 46600.00								
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.	(b) SUBTOTAL of Unitemized Independent Expenditures								
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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.		(c) IOIAL Independent Expenditures			▶				
[Electronically Filed] Date 10 22 2016	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								
		Townsend, Taylor, , ,			M				
		Signature	[Electron	Date Date	e 10	22	2016		

Image# 201610229034529381 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	FOR SE OF FORM 24/48							
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V							
Defend Louisiana PAC								
	C C00616128							
Check if X 24-hour report 48-hour report New report Amends report filed on								
Full Name of Payee	Date of Public Distribution/Dissemination							
TIPS	10 22 2016							
Mailing Address 1517 Harrison Ave.	Amount							
City State Zip Code	4000.00							
	Transaction ID : SE.4274 Date of Disbursement or Obligation							
Purpose of Expenditure Category/ Community outreach/Canvassing 004	10 / D D / Y Y Y Y 2016							
Name of Federal Candidate Support Office	Sought: House District: 00							
CAMPBELL, FOSTER LONNNIE II, , ,	President Senate State: LA							
Calendar Year-To-Date Per Election for Office Sought 120293.93	sement For: Primary X General Other (specify) ►							
Full Name of Payee	Date of Public Distribution/Dissemination							
	M = M / D = D / Y = Y = Y							
Mailing Address	Amount							
City State Zip Code								
	Date of Disbursement or Obligation							
Purpose of Expenditure Category/ Type								
Name of Federal Candidate Support Office	Sought: House District:							
	President Senate State:							
	sement For: Primary General							
Calendar Year-To-Date Per Election for Office Sought	Other (specify) ►							
(a) SUBTOTAL of Itemized Independent Expenditures	4000.00							
(b) SUBTOTAL of Unitemized Independent Expenditures								
(c) TOTAL Independent Expenditures	77300.00							
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.								
Townsend, Taylor, , ,	M / D D / Y Y Y Y							
[Electronically Filed] Date 10 Signature	22 2016							
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