



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		3612.53
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	94307.55									
(c) Total Receipts (from Line 19) .....	58960.07	326426.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	153267.62	330039.10								
7. Total Disbursements (from Line 31) .....	63639.79	240411.27								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	89627.83	89627.83								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	77863.37									

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  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	5400.00	68515.00
(i) Itemized (use Schedule A) .....	3560.07	51792.49
(ii) Unitemized .....	8960.07	120307.49
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	50000.00	169000.00
(c) Other Political Committees (such as PACs) .....	58960.07	289307.49
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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	6195.00
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	30924.08
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	30924.08
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	58960.07	326426.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	58960.07	295502.49

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	5457.22
(ii) Non-Federal Share.....	0.00	30924.08
(b) Other Federal Operating Expenditures.....	50189.10	178984.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	50189.10	215366.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
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 .....	13450.69	25045.03
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	13450.69	25045.03
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	63639.79	240411.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	63639.79	209487.19

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	58960.07	289307.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	58960.07	289307.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50189.10	184442.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	6195.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	50189.10	178247.16

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 40
	<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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Paul Arnold

Mailing Address 119 Magnolia Gardens Dr

City State Zip Code  
Covington LA 70435

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

Name of Employer Occupation  
Best efforts Information Requested

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2006

Transaction ID: 60818.C58285

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles J Boudreaux

Mailing Address 214 Louie

City State Zip Code  
Lafayette LA 70503

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 24 / 2006

Transaction ID: 60818.C58323

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
William Cassidy

Mailing Address 3115 Dalrymple Dr

City State Zip Code  
Baton Rouge LA 70802

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

Name of Employer Occupation  
LSUHSC Physician

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2006

Transaction ID: 60710.C58198

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 40
	<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	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Richard Conkling

Mailing Address 11765 Fairhaven Dr

City State Zip Code  
Baton Rouge LA 70815-6214

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2006

Transaction ID: 60710.C58204

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Vivian Frensilli

Mailing Address 392 Fairfield Ave.

City State Zip Code  
New Iberia LA 70560

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
07 / 24 / 2006

Transaction ID: 60818.C58327

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Richard Griffith

Mailing Address PO Box 91610

City State Zip Code  
Lafayette LA 70509-1610

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
07 / 24 / 2006

Transaction ID: 60818.C58313

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 40
	<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	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Richard Griffith

Mailing Address PO Box 91610

City State Zip Code  
Lafayette LA 70509-1610

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

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 24 / 2006

Transaction ID: 60818.C58322

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Julie Murphy

Mailing Address 450 Woodvine Ave

City State Zip Code  
Metairie LA 70005

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

Name of Employer Wagner Insurance Agency Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: 60818.C58296

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Benita Scott

Mailing Address 1322 Brooklyn Avenue

City State Zip Code  
Metairie LA 70010

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

Name of Employer East Jefferson General Hospital Occupation activities therapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2006

Transaction ID: 60818.C58310

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 40
	<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	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich

Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

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

Name of Employer Occupation  
Out of the Box Designs President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2006

Transaction ID: 60818.C58309

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Wade

Mailing Address 1225 2nd St

City State Zip Code  
New Orleans LA 70130-5722

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

Name of Employer Occupation  
Self author

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2006

Transaction ID: 60710.C58234

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Clark Warden

Mailing Address 24 Cardinal Road

City State Zip Code  
Covington LA 70433

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2006

Transaction ID: 60818.C58278

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 40
	(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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Annette White

Mailing Address 106 Wilree Drive

City State Zip Code  
New Iberia LA 70563

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2006

**Transaction ID:** 60818.C58288

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
George White

Mailing Address 1205 Jefferson Ave.

City State Zip Code  
New Orleans LA 70115

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

Name of Employer Information Requested Occupation Information Requested  
Avondale Ind. Govt. Relations Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2006

**Transaction ID:** 60818.C58295

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 40
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Bobby Jindal

Mailing Address 8850 United Plaza Suite 1001

City	State	Zip Code
Baton Rouge	LA	70809

FEC ID number of contributing federal political committee. **C** C00408823

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
152000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	6

Transaction ID: 60818.C58297

Amount of Each Receipt this Period  
50000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	50000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	50000.00

**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)

PAGE 12 / 40

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. ADT Security Systems</b>		<b>Transaction ID:</b> 60818.E13122
Mailing Address 8683 Siegen Lane		Date of Disbursement 07 / 26 / 2006
City Baton Rouge	State LA	Zip Code 70810-
Purpose of Disbursement SECURITY		Amount of Each Disbursement this Period 34.99
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SECURITY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Blue Cross Blue Shield</b>		<b>Transaction ID:</b> 60818.E13101
Mailing Address PO Box 261798		Date of Disbursement 07 / 19 / 2006
City Baton Rouge	State LA	Zip Code 70826-
Purpose of Disbursement HEALTH INS		Amount of Each Disbursement this Period 370.67
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	HEALTH INS
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Canon Financial Services, Inc</b>		<b>Transaction ID:</b> 60818.E13077
Mailing Address P. O. Box 4004		Date of Disbursement 07 / 14 / 2006
City Carol Stream	State IL	Zip Code 60197-4004
Purpose of Disbursement COPIER RENTAL		Amount of Each Disbursement this Period 335.82
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COPIER RENTAL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>741.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 40

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Cingular Wireless</b>		<b>Transaction ID:</b> 60818.E13102
Mailing Address PO Box 650584		Date of Disbursement MM / DD / YYYY 07 / 19 / 2006
City Dallas	State TX	Zip Code 75265-0584
Purpose of Disbursement CELL PHONE	Amount of Each Disbursement this Period 39.68	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	CELL PHONE	

Full Name (Last, First, Middle Initial) <b>B. Catherine Clifford</b>		<b>Transaction ID:</b> 60818.E13076
Mailing Address 33826 Nancy Drive		Date of Disbursement MM / DD / YYYY 07 / 14 / 2006
City Walker	State LA	Zip Code 70785-
Purpose of Disbursement OFFICE MAINTENANCE	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	OFFICE MAINTENANCE	

Full Name (Last, First, Middle Initial) <b>C. Catherine Clifford</b>		<b>Transaction ID:</b> 60818.E13121
Mailing Address 33826 Nancy Drive		Date of Disbursement MM / DD / YYYY 07 / 26 / 2006
City Walker	State LA	Zip Code 70785-
Purpose of Disbursement OFFICE MAINTENANCE	Amount of Each Disbursement this Period 50.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	OFFICE MAINTENANCE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>139.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Karen Connolly</b>		<b>Transaction ID: 60818.E13049</b> Date of Disbursement 07 / 05 / 2006	
Mailing Address 6880 Christopher			
City Greenwell Springs State LA Zip Code 70739-	Amount of Each Disbursement this Period 836.45		
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Karen Connolly</b>		<b>Transaction ID: 60818.E13092</b> Date of Disbursement 07 / 19 / 2006	
Mailing Address 6880 Christopher			
City Greenwell Springs State LA Zip Code 70739-	Amount of Each Disbursement this Period 836.45		
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Cox Communications</b>		<b>Transaction ID: 60818.E13123</b> Date of Disbursement 07 / 26 / 2006	
Mailing Address P O Box 139004			
City Tyler State TX Zip Code 75713-9004	Amount of Each Disbursement this Period 376.06		
Purpose of Disbursement TELEPHONES	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2048.96</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Jody Crouch</b>		<b>Transaction ID:</b> 60818.E13039 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 212 Loop Dr		Amount of Each Disbursement this Period 320.00
City Slidell State LA Zip Code 70458-1320	Category/ Type  INTERN SERVS	
Purpose of Disbursement INTERN SERVS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jody Crouch</b>		<b>Transaction ID:</b> 60818.E13095 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 212 Loop Dr		Amount of Each Disbursement this Period 288.00
City Slidell State LA Zip Code 70458-1320	Category/ Type  INTERN SALARY	
Purpose of Disbursement INTERN SALARY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ellen Wray Davis</b>		<b>Transaction ID:</b> 60818.E13085 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period 3205.86
City Baton Rouge State LA Zip Code 70810-	Category/ Type  COMMISSION	
Purpose of Disbursement COMMISSION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3813.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. De Lage Landen Financial Svcs</b>		<b>Transaction ID:</b> 60818.E13081 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address P. O. Box 41601		Amount of Each Disbursement this Period 328.19
City Philadelphia State PA Zip Code 19101-1601	Category/ Type  COMPUTER LEASE	
Purpose of Disbursement COMPUTER LEASE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Demco</b>		<b>Transaction ID:</b> 60818.E13075 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address P. O. Box 2153		Amount of Each Disbursement this Period 123.00
City Birmingham State AL Zip Code 35287-1340	Category/ Type  UTILITIES	
Purpose of Disbursement UTILITIES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Direct Mailing Services, Inc</b>		<b>Transaction ID:</b> 60818.E13086 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 12511 East Millburn Avenue		Amount of Each Disbursement this Period 2000.00
City Baton Rouge State LA Zip Code 70815-	Category/ Type  GENERIC FUNDRAISING	
Purpose of Disbursement GENERIC FUNDRAISING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2451.19
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Direct Mailing Services, Inc</b>		<b>Transaction ID:</b> 60818.E13131 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 12511 East Millburn Avenue		Amount of Each Disbursement this Period 2000.00
City Baton Rouge State LA Zip Code 70815-	Category/ Type  GENERIC FUNDRAISING	
Purpose of Disbursement GENERIC FUNDRAISING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Gator Works</b>		<b>Transaction ID:</b> 60818.E13082 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 12232 Industriplex Blvd Ste 1 Suite 1		Amount of Each Disbursement this Period 150.00
City Baton Rouge State LA Zip Code 70809-7105	Category/ Type  WEBSITE UPDATES	
Purpose of Disbursement WEBSITE UPDATES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jacob Gower</b>		<b>Transaction ID:</b> 60818.E13038 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 204 Hermitage Ave.		Amount of Each Disbursement this Period 296.00
City Lafayette State LA Zip Code 70503-	Category/ Type  INTERN SERV	
Purpose of Disbursement INTERN SERV		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2446.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Jacob Gower</b> Full Name (Last, First, Middle Initial) Mailing Address 204 Hermitage Ave. City Lafayette State LA Zip Code 70503-		<b>Transaction ID: 60818.E13094</b> Date of Disbursement 07 / 19 / 2006
Purpose of Disbursement INTERN SALARY Candidate Name		Amount of Each Disbursement this Period 288.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	INTERN SALARY

<b>B. Iberia Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 3700 Essen Ln City Baton Rouge State LA Zip Code 70809-		<b>Transaction ID: 60818.E13034</b> Date of Disbursement 07 / 11 / 2006
Purpose of Disbursement DM ACCT BANK FEES Candidate Name		Amount of Each Disbursement this Period 40.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DM ACCT BANK FEES

<b>C. Iberia Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 3700 Essen Ln City Baton Rouge State LA Zip Code 70809-		<b>Transaction ID: 60818.E13047</b> Date of Disbursement 07 / 12 / 2006
Purpose of Disbursement MERCHANT FEES Candidate Name		Amount of Each Disbursement this Period 118.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MERCHANT FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	446.84
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

**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)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Iberia Bank Visa</b>		<b>Transaction ID:</b> 60818.E13074 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address PO Box 30495		Amount of Each Disbursement this Period 718.00
City Tampa State FL Zip Code 33630-3495	DEBT REPAYMENT	
Purpose of Disbursement DEBT REPAYMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Iberia Bank Visa</b>		<b>Transaction ID:</b> 60818.E13206 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address PO Box 30495		Amount of Each Disbursement this Period 718.00
City Tampa State FL Zip Code 33630-3495	DEBT PAYMENT	
Purpose of Disbursement DEBT PAYMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. La Department of Revenue</b>		<b>Transaction ID:</b> 60818.E13107 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address Withholding Tax		Amount of Each Disbursement this Period 480.00
City Baton Rouge State LA Zip Code 70821-9017	WITHHOLDING	
Purpose of Disbursement WITHHOLDING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1916.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. McDermott, Will &amp; Emory</b>		<b>Transaction ID: 60818.E13073</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 600 Thirteenth St. NW		Amount of Each Disbursement this Period 500.00	
City Washington State DC Zip Code 20005-	Purpose of Disbursement LEGAL FEES Candidate Name	Category/ Type	LEGAL FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. McDermott, Will &amp; Emory</b>		<b>Transaction ID: 60818.E13116</b> Date of Disbursement MM / DD / YYYY 07 / 26 / 2006	
Mailing Address 600 Thirteenth St. NW		Amount of Each Disbursement this Period 500.00	
City Washington State DC Zip Code 20005-	Purpose of Disbursement LEGAL FEES Candidate Name	Category/ Type	LEGAL FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mdi</b>		<b>Transaction ID: 60818.E13032</b> Date of Disbursement MM / DD / YYYY 07 / 24 / 2006	
Mailing Address 21721 Filigree Ct Suite A		Amount of Each Disbursement this Period 6453.31	
City Ashburn State VA Zip Code 20147-6207	Purpose of Disbursement POSTAGE DIRECT MAIL Candidate Name	Category/ Type	POSTAGE DIRECT MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7453.31</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Moreson Conferencing, Inc.</b>		<b>Transaction ID: 60818.E13083</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address P O Box 4096		Amount of Each Disbursement this Period 61.88	
City Montgomery State AL Zip Code 36103-	Purpose of Disbursement PHONE CONFERENCE Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE CONFERENCE	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		<b>Transaction ID: 60818.E13104</b> Date of Disbursement MM / DD / YYYY 07 / 19 / 2006	
Mailing Address 1683 Oneal Ln		Amount of Each Disbursement this Period 98.09	
City Baton Rouge State LA Zip Code 70816-1607	Purpose of Disbursement OFFICE SUPPLY Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE SUPPLY	

Full Name (Last, First, Middle Initial) <b>C. James L Quinn</b>		<b>Transaction ID: 60818.E13048</b> Date of Disbursement MM / DD / YYYY 07 / 05 / 2006	
Mailing Address 419 Northline St		Amount of Each Disbursement this Period 1354.39	
City Metairie State LA Zip Code 70005-4451	Purpose of Disbursement PAYROLL Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1514.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) James L Quinn		<b>Transaction ID:</b> 60818.E13050 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6
Mailing Address 419 Northline St		Amount of Each Disbursement this Period 4053.21
City Metairie State LA Zip Code 70005-4451	Category/ Type MAR-JUN COMMISSION	
Purpose of Disbursement MAR-JUN COMMISSION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) James L Quinn		<b>Transaction ID:</b> 60818.E13091 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 419 Northline St		Amount of Each Disbursement this Period 1354.39
City Metairie State LA Zip Code 70005-4451	Category/ Type PAYROLL	
Purpose of Disbursement PAYROLL		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) R & C Properties		<b>Transaction ID:</b> 60818.E13119 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 16851 Cicero Ave		Amount of Each Disbursement this Period 2385.00
City Baton Rouge State LA Zip Code 70816-1853	Category/ Type RENT	
Purpose of Disbursement RENT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7792.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Response Consulting</b>		<b>Transaction ID:</b> 60818.E13030 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 2401 W Behrend Dr Suite 7		Amount of Each Disbursement this Period 14758.86
City Phoenix State AZ Zip Code 85027-4142		
Purpose of Disbursement GENERIC MAIL PIECE		GENERIC MAIL PIECE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sams Club</b>		<b>Transaction ID:</b> 60818.E13023 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 10444 N Mall Dr		Amount of Each Disbursement this Period 81.74
City Baton Rouge State LA Zip Code 70809-4835		
Purpose of Disbursement GENERIC FUNDRAISER LAFAYETTE		GENERIC FUNDRAISER LAFAYETTE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sams Club</b>		<b>Transaction ID:</b> 60818.E13024 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 10444 N Mall Dr		Amount of Each Disbursement this Period 24.18
City Baton Rouge State LA Zip Code 70809-4835		
Purpose of Disbursement GENERIC FUNDRAISER		GENERIC FUNDRAISER
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14864.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Secretary of State</b>		<b>Transaction ID:</b> 60818.E13090 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address PO Box 94125		Amount of Each Disbursement this Period 500.00
City Baton Rouge	State LA Zip Code 70804-	
Purpose of Disbursement ROOM RENTAL		ROOM RENTAL
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Targeted Creative Communicatio</b>		<b>Transaction ID:</b> 60818.E13072 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 1000 Duke Street		Amount of Each Disbursement this Period 500.00
City Alexandria	State VA Zip Code 22314-	
Purpose of Disbursement DEBT REPAYMENT		DEBT REPAYMENT
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Targeted Creative Communicatio</b>		<b>Transaction ID:</b> 60818.E13115 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 1000 Duke Street		Amount of Each Disbursement this Period 500.00
City Alexandria	State VA Zip Code 22314-	
Purpose of Disbursement DEBT REPAYMENT		DEBT REPAYMENT
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

PAGE 25 / 40

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. US Post Office</b>		<b>Transaction ID:</b> 60818.E13080 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 10380 Perkins Rd		Amount of Each Disbursement this Period 132.00
City Baton Rouge	State LA Zip Code 70810-1601	
Purpose of Disbursement BOX RENTAL		Category/ Type BOX RENTAL
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Vanderbrook CPA</b>		<b>Transaction ID:</b> 60818.E13046 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 4425 Clearview Pkwy 2nd Floor		Amount of Each Disbursement this Period 750.00
City Metairie	State LA Zip Code 70006-2397	
Purpose of Disbursement ACCOUNTING		Category/ Type ACCOUNTING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. William Vanderbrook CPA</b>		<b>Transaction ID:</b> 60818.E13093 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 4425 Clearview Pkwy 2nd Floor		Amount of Each Disbursement this Period 750.00
City Metairie	State LA Zip Code 70006-2397	
Purpose of Disbursement ACCOUNTING		Category/ Type ACCOUNTING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1632.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** William Vanderbrook CPA

Mailing Address 4425 Clearview Pkwy  
2nd Floor

City Metairie State LA Zip Code 70006-2397

Purpose of Disbursement  
ACCOUNTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 60818.E13117

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

500.00

ACCOUNTING

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

500.00

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

49261.06

# 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)

PAGE 27 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Alexandria Office Suites</b>		<b>Transaction ID:</b> 60818.E13118 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 1104 Macarthur Dr		Amount of Each Disbursement this Period 406.35
City Alexandria State LA Zip Code 71303-3122	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. ALLTELL</b>		<b>Transaction ID:</b> 60818.E13045 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address P O Box 530533		Amount of Each Disbursement this Period 170.63
City Atlanta State GA Zip Code 30353-0533	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. ALLTELL</b>		<b>Transaction ID:</b> 60818.E13146 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address P O Box 530533		Amount of Each Disbursement this Period 157.07
City Atlanta State GA Zip Code 30353-0533	FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>734.05</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Sharon &amp; Frank Bonner</b>		<b>Transaction ID:</b> 60818.E13120 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 2401 Jasmine St		Amount of Each Disbursement this Period 500.00
City Monroe State LA Zip Code 71201-4127	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Emily Clayton</b>		<b>Transaction ID:</b> 60818.E13058 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6
Mailing Address 1116 Canterbury Dr		Amount of Each Disbursement this Period 125.00
City Alexandria State LA Zip Code 71303-3054	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Emily Clayton</b>		<b>Transaction ID:</b> 60818.E13136 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address 1116 Canterbury Dr		Amount of Each Disbursement this Period 25.00
City Alexandria State LA Zip Code 71303-3054	Category/ Type  FEA GENERIC VOTER DRIVE	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Blake Cooper</b>		Transaction ID: 60818.E13051 Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 927 Stones Way Dr		Amount of Each Disbursement this Period 1304.35	
City Pineville State LA Zip Code 71360-4008	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		
Full Name (Last, First, Middle Initial) <b>B. Blake Cooper</b>		Transaction ID: 60818.E13089 Date of Disbursement MM / DD / YYYY 07 / 15 / 2006	
Mailing Address 927 Stones Way Dr		Amount of Each Disbursement this Period 1500.00	
City Pineville State LA Zip Code 71360-4008	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		
Full Name (Last, First, Middle Initial) <b>C. Blake Cooper</b>		Transaction ID: 60818.E13134 Date of Disbursement MM / DD / YYYY 07 / 28 / 2006	
Mailing Address 927 Stones Way Dr		Amount of Each Disbursement this Period 1500.00	
City Pineville State LA Zip Code 71360-4008	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA GENERIC VOTER DRIVE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4304.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

PAGE 30 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Cooper Eyre</b>		<b>Transaction ID: 60818.E13060</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 4813 West Gordon		Amount of Each Disbursement this Period 175.00	
City Alexandria State LA Zip Code 71303-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

Full Name (Last, First, Middle Initial) <b>B. Cooper Eyre</b>		<b>Transaction ID: 60818.E13137</b> Date of Disbursement MM / DD / YYYY 07 / 28 / 2006	
Mailing Address 4813 West Gordon		Amount of Each Disbursement this Period 50.00	
City Alexandria State LA Zip Code 71303-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

Full Name (Last, First, Middle Initial) <b>C. Chris McLin</b>		<b>Transaction ID: 60818.E13053</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 14050 Oaklane Loop		Amount of Each Disbursement this Period 200.00	
City Pineville State LA Zip Code 71360-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	425.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Chris McLin</b>		<b>Transaction ID: 60818.E13138</b> Date of Disbursement MM / DD / YYYY 07 / 28 / 2006	
Mailing Address 14050 Oaklane Loop		Amount of Each Disbursement this Period 75.00	
City Pineville State LA Zip Code 71360-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

Full Name (Last, First, Middle Initial) <b>B. Scott Melvin</b>		<b>Transaction ID: 60818.E13055</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 1412 Oaklane Loop		Amount of Each Disbursement this Period 30.00	
City Pineville State LA Zip Code 71360-3512	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

Full Name (Last, First, Middle Initial) <b>C. Allison Norris</b>		<b>Transaction ID: 60818.E13062</b> Date of Disbursement MM / DD / YYYY 07 / 14 / 2006	
Mailing Address 1712 Handy Loop Ext		Amount of Each Disbursement this Period 150.00	
City Pineville State LA Zip Code 71360-	Purpose of Disbursement FEA GENERIC VOTER DRIVE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	255.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Allison Norris</b> Full Name (Last, First, Middle Initial) Mailing Address 1712 Handy Loop Ext City Pineville State LA Zip Code 71360- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60818.E13139</b> Date of Disbursement 07 / 28 / 2006 Amount of Each Disbursement this Period 100.00 FEA GENERIC VOTER DRIVE
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<b>B. Jacob Paul</b> Full Name (Last, First, Middle Initial) Mailing Address 426 Hwy 1206 City Deville State LA Zip Code 71328- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60818.E13063</b> Date of Disbursement 07 / 14 / 2006 Amount of Each Disbursement this Period 105.50 FEA GENERIC VOTER DRIVE
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<b>C. Jacob Paul</b> Full Name (Last, First, Middle Initial) Mailing Address 426 Hwy 1206 City Deville State LA Zip Code 71328- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60818.E13140</b> Date of Disbursement 07 / 28 / 2006 Amount of Each Disbursement this Period 65.00 FEA GENERIC VOTER DRIVE
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	270.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

PAGE 33 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60818.E13061 <b>Date of Disbursement</b> <input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period <input type="text" value="105.50"/>
City Deville State LA Zip Code 71328-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

<b>B.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60818.E13141 <b>Date of Disbursement</b> <input type="text" value="07"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period <input type="text" value="90.00"/>
City Deville State LA Zip Code 71328-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

<b>C.</b> Full Name (Last, First, Middle Initial) Amanda Swanner		<b>Transaction ID:</b> 60818.E13040 <b>Date of Disbursement</b> <input type="text" value="07"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
Mailing Address 3100 Deborah Dr Apt 22		Amount of Each Disbursement this Period <input type="text" value="1500.00"/>
City Monroe State LA Zip Code 71201-2090	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="1695.50"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# 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)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial) <b>A. Amanda Swanner</b>		<b>Transaction ID:</b> 60818.E13088 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 15 / 2006
Mailing Address 3100 Deborah Dr Apt 22		Amount of Each Disbursement this Period 1500.00
City State Zip Code Monroe LA 71201-2090	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial) <b>B. Amanda Swanner</b>		<b>Transaction ID:</b> 60818.E13130 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 28 / 2006
Mailing Address 3100 Deborah Dr Apt 22		Amount of Each Disbursement this Period 1500.00
City State Zip Code Monroe LA 71201-2090	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial) <b>C. Target Stores</b>		<b>Transaction ID:</b> 60818.E13043 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 05 / 2006
Mailing Address 4103 Pecanland Mall Road		Amount of Each Disbursement this Period 43.98
City State Zip Code Monroe LA 71203-	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA GENERIC VOTER DRIVE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3043.98</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)

PAGE 35 / 40

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A. Target Stores**

Mailing Address 4103 Pecanland Mall Road

City State Zip Code  
Monroe LA 71203-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** 60818.E13044

Date of Disbursement

/

Amount of Each Disbursement this Period

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B. Target Stores**

Mailing Address 4103 Pecanland Mall Road

City State Zip Code  
Monroe LA 71203-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** 60818.E13097

Date of Disbursement

/

Amount of Each Disbursement this Period

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C. Target Stores**

Mailing Address 4103 Pecanland Mall Road

City State Zip Code  
Monroe LA 71203-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** 60818.E13109

Date of Disbursement

/

Amount of Each Disbursement this Period

FEA GENERIC VOTER DRIVE

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Target Stores</b> Full Name (Last, First, Middle Initial) Mailing Address 4103 Pecanland Mall Road City Monroe State LA Zip Code 71203- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60818.E13144 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 145.55 FEA GENERIC VOTER DRIVE
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<b>B. Dustin Walker</b> Full Name (Last, First, Middle Initial) Mailing Address 408 Hines Ln City Ball State LA Zip Code 71405-3903 Purpose of Disbursement FEA GENRIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60818.E13057 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 175.00 FEA GENRIC VOTER DRIVE
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<b>C. Dustin Walker</b> Full Name (Last, First, Middle Initial) Mailing Address 408 Hines Ln City Ball State LA Zip Code 71405-3903 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60818.E13143 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 100.00 FEA GENERIC VOTER DRIVE
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	420.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	12481.50

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Baton Rouge Marriott	Nature of Debt (Purpose): Negotiated Settlement
Mailing Address Formerly the B.R. Hilton/Davidson 1755 Lynnfield Road- Suite 142	
City State ZIP Code Memphis TN 38119-	

Outstanding Balance Beginning This Period 181.00	<b>Transaction ID:</b> LS0614200111E5406	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 181.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MCREI Inc	Nature of Debt (Purpose): Campaign Calls
Mailing Address 3937 Pines Rd, Ste 1	
City State ZIP Code Shreveport LA 71119-	

Outstanding Balance Beginning This Period 6019.84	<b>Transaction ID:</b> LS50729.E12245	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6019.84

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Bauer for President	Nature of Debt (Purpose): Ballot Access Fee Refund
Mailing Address P O Box 6616	
City State ZIP Code Arlington VA 22206-0616	

Outstanding Balance Beginning This Period 3500.00	<b>Transaction ID:</b> LS0614200111E5408	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>9700.84</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Thomas Graphics	Nature of Debt (Purpose): Yard Signs-Exempt Activity
Mailing Address P. O. Box 142226	
City State ZIP Code Austin TX 78714-	

Outstanding Balance Beginning This Period 2000.00	<b>Transaction ID:</b> LS50729.E12246	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Targeted Creative Communicatio	Nature of Debt (Purpose): Volunteer Mass Mail
Mailing Address 1000 Duke Street	
City State ZIP Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period 40000.00	<b>Transaction ID:</b> LS50131.E11683	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40000.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Targeted Creative Communicatio	Nature of Debt (Purpose): debt repayment
Mailing Address 1000 Duke Street	
City State ZIP Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period 14000.00	<b>Transaction ID:</b> LS60818.E13072	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 13000.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>55000.00</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 39 / 40
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Jamestown Associates	Nature of Debt (Purpose): FEA Volunteer Mass Mail
Mailing Address 5 Mapleton Rd, Suite 300	
City State ZIP Code Princeton NJ 08540-	

Outstanding Balance Beginning This Period <input type="text" value="3800.00"/>	<b>Transaction ID:</b> LS50131.E11682	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3800.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Iberia Bank Visa	Nature of Debt (Purpose): debt payment
Mailing Address PO Box 30495	
City State ZIP Code Tampa FL 33630-3495	

Outstanding Balance Beginning This Period <input type="text" value="10798.53"/>	<b>Transaction ID:</b> LS60818.E13074	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1436.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9362.53"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="13162.53"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="77863.37"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative  Generic Voter Drive  Public Communications Referencing Party Only