

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Fleming For Congress

ADDRESS (number and street) P.O. Box 1236

Check if different than previously reported. (ACC)

Minden LA 71058

2. **FEC IDENTIFICATION NUMBER** C00445015

**IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**

LA 04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on 08 28 2010 in the State of LA

(c) 30-Day **POST**-Election Report for the:

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

Election on in the State of

5. Covering Period 07 01 2010 through 08 08 2010

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

Type or Print Name of Treasurer John Calvin Fleming, III

Signature of Treasurer Electronically Filed by John Calvin Fleming, III Date 08 16 2010

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

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Fleming For Congress

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	45455.00	1254086.29
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	7200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	45455.00	1246886.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	71638.90	827358.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5154.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	71638.90	822203.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	406416.11	
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).....	621587.17	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Fleming For Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
0	8

Y	Y	Y	Y
2	0	1	0

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

13245.00

898743.69

(ii) Unitemized.....

2710.00

49134.00

(iii) TOTAL of contributions

15955.00

947877.69

from individuals..... ▶

0.00

50.56

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

29500.00

306158.04

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

45455.00

1254086.29

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

100.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

100.00

14. OFFSETS TO OPERATING  
EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

5154.97

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

5000.31

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

45455.00

1264341.57

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	71638.90	827358.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	7200.00
(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 20(a), (b), and (c)).....	0.00	7200.00
21. OTHER DISBURSEMENTS.....	0.00	16078.15
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	71638.90	850636.85

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	432600.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	45455.00
25. SUBTOTAL (add Line 23 and Line 24).....	478055.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71638.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	406416.11

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
T Pete Adcock

Mailing Address 302 Ellis Dr

City State Zip Code  
Minden LA 71055-2024

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 200.00

Date of Receipt 08 / 02 / 2010  
**Transaction ID:** 00815.C3600  
 Amount of Each Receipt this Period 10.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Carolyn Beaubouef

Mailing Address 2512 Highway 5

City State Zip Code  
Grand Cane LA 71032-6118

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Primary 2008 800.00

Date of Receipt 08 / 02 / 2010  
**Transaction ID:** 00815.C3579  
 Amount of Each Receipt this Period 500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
John Benton

Mailing Address 1006 Southridge Dr

City State Zip Code  
Minden LA 71055-3092

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Benton & Brown Construction Contractor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00

Date of Receipt 07 / 30 / 2010  
**Transaction ID:** 00810.C3503  
 Amount of Each Receipt this Period 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 1510.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Melvin Bourgeois</p> <p>Mailing Address 3101 Lake Palourde Dr</p> <p>City State Zip Code Morgan City LA 70380-1518</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-Employed Occupation Physician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 0 5 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 00810.C3547</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Kevin Byram</p> <p>Mailing Address 401 Edwards St, Ste 2110</p> <p>City State Zip Code Shreveport LA 71101-3289</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Heritage Energy Occupation Information Requested</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">900.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 7 / 0 2 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 00709.C3455</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">900.00</span></p> <p>Receipt</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Felder Calhoun</p> <p>Mailing Address 3003 Knight St</p> <p>City State Zip Code Shreveport LA 71105-2507</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Interstate Insurance Occupation Insurance</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 7 / 1 4 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> 00810.C3480</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1200.00</span></p> <p>Receipt</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2200.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Louise Cooksey		Date of Receipt MM / DD / YYYY 08 / 03 / 2010
	Mailing Address 10009 Smitherman Drive		Transaction ID: 00810.C3530
	City Shreveport	State LA	Zip Code 71115
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Retired	Occupation Retired	Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 255.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eugene Ducharme		Date of Receipt MM / DD / YYYY 07 / 28 / 2010
	Mailing Address 2601 Centenary Blvd		Transaction ID: 00810.C3496
	City Shreveport	State LA	Zip Code 71104-3329
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Self Employed	Occupation Information Requested	Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Egan		Date of Receipt MM / DD / YYYY 08 / 02 / 2010
	Mailing Address 5621 Mirador Circle		Transaction ID: 00815.C3581
	City Shreveport	State LA	Zip Code 71119
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Self Employed	Occupation Contractor	Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 51

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Joe Farr

Mailing Address PO Box 2110

City State Zip Code  
Monroe LA 71207-2110

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Thomas & Farr Agency Operations Manager

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	1	0

**Transaction ID:** 00810.C3521

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Girard

Mailing Address 9951 SW Stonecreek Dr

City State Zip Code  
Beaverton OR 97007-8564

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  

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

**Transaction ID:** 00713.C3475

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Russ Greer

Mailing Address 2815 Pargoud Blvd

City State Zip Code  
Monroe LA 71201-2334

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Greer Neurosurgery Clinic Surgeon

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 255.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	1	0

**Transaction ID:** 00810.C3511

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 800.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
John Hardin  
Mailing Address 410 Briarwood  
City Shreveport State LA Zip Code 71106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Physician  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
650.00  
Date of Receipt MM / DD / YYYY  
07 / 30 / 2010  
**Transaction ID:** 00810.C3517  
Amount of Each Receipt this Period  
100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mike Harper  
Mailing Address PO Box 917  
City Minden State LA Zip Code 71058-0917  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Harper Motors Occupation Owner  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
1500.00  
Date of Receipt MM / DD / YYYY  
08 / 02 / 2010  
**Transaction ID:** 00815.C3590  
Amount of Each Receipt this Period  
500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Edward Henderson  
Mailing Address 501 Southfield Rd  
City Shreveport State LA Zip Code 71106-2215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General    Other (specify) ▼  
500.00  
Date of Receipt MM / DD / YYYY  
07 / 30 / 2010  
**Transaction ID:** 00810.C3518  
Amount of Each Receipt this Period  
250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 850.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

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

Mailing Address 832 Robinson Pl

City State Zip Code  
Shreveport LA 71104-3030

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

1900.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	0

**Transaction ID:** 00810.C3531

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Helen Hortman

Mailing Address 598 Couchwood Rd

City State Zip Code  
Cotton Valley LA 71018-3017

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

Name of Employer None Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	1	0

**Transaction ID:** 00810.C3555

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
John Kinnebrew

Mailing Address 624 Loch Ridge Dr

City State Zip Code  
Shreveport LA 71106-6829

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

1200.00

Date of Receipt  

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

**Transaction ID:** 00709.C3453

Amount of Each Receipt this Period  
1200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Jerry Kolniak  
Mailing Address 5046 Sweetwater Dr  
City Benton State LA Zip Code 71006-3478  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Notinis Restaurant Occupation Owner  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt 07 / 30 / 2010  
Transaction ID: 00810.C3508  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Bryant Lewis  
Mailing Address 3595 Park Dr  
City Haynesville State LA Zip Code 71038-6227  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Timber Dealer  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00  
Date of Receipt 08 / 02 / 2010  
Transaction ID: 00815.C3589  
Amount of Each Receipt this Period 250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Judith Madden  
Mailing Address 4907 Windermere Blvd  
City Alexandria State LA Zip Code 71303-2459  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00  
Date of Receipt 07 / 07 / 2010  
Transaction ID: 00713.C3472  
Amount of Each Receipt this Period 250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Roy Martin

Mailing Address PO Box 1110

City State Zip Code  
Alexandria LA 71309-1110

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 3 / 2 0 1 0

**Transaction ID:** 00810.C3537

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Johnny May

Mailing Address 4000 Highway 171

City State Zip Code  
Gloster LA 71030-3361

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 335.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 2 / 2 0 1 0

**Transaction ID:** 00815.C3587

Amount of Each Receipt this Period  
35.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael McCarthy

Mailing Address PO Box 37027

City State Zip Code  
Shreveport LA 71133-7027

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

Name of Employer Information Requested Occupation Information Requested  
Curtis H Stout, Inc Chairman

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 3 0 / 2 0 1 0

**Transaction ID:** 00810.C3500

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2035.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Brian McGuire  
 Mailing Address 6015 S Virginia St, Unit E 426  
 City State Zip Code  
 Reno NV 89502-6058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Keystone Corporation CEO  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period  
 500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles McNeely  
 Mailing Address 1276 Highway 494  
 City State Zip Code  
 Natchitoches LA 71457-2810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period  
 25.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Levere Montgomery  
 Mailing Address 321 N Vermont St Ste 101  
 City State Zip Code  
 Covington LA 70433-2811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period  
 250.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **775.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 51  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Philip Mueller

Mailing Address 11826 Elmscourt

City San Antonio State TX Zip Code 78230-2767

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 07 / 09 / 2010  
**Transaction ID:** 00713.C3476  
 Amount of Each Receipt this Period: 250.00  
 Receipt

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

Mailing Address PO Box 536

City Choudrant State LA Zip Code 71227-0536

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

Name of Employer ONeal Gas Occupation Chairman

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 07 / 30 / 2010  
**Transaction ID:** 00810.C3514  
 Amount of Each Receipt this Period: 500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
J.W. Porter

Mailing Address 710 Coachlight Rd

City Shreveport State LA Zip Code 71106

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

Name of Employer Self Employed Occupation Landman

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 08 / 03 / 2010  
**Transaction ID:** 00810.C3536  
 Amount of Each Receipt this Period: 100.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 51  
(check only one)

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

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)  
Fleming For Congress

**A.**

Full Name (Last, First, Middle Initial)  
B. Ted Roberts

Mailing Address 9443 Mansfield Rd

City State Zip Code  
Shreveport LA 71118-3810

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

**Transaction ID:** 00815.C3584

Amount of Each Receipt this Period  
150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Robert Touchstone

Mailing Address 416 Travis St Ste 900

City State Zip Code  
Shreveport LA 71101-5502

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 1 0

**Transaction ID:** 00815.C3582

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Melvin Triay

Mailing Address 5201 Davis Dr

City State Zip Code  
Metairie LA 70003-1031

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

Name of Employer Information Requested Occupation Information Requested  
Parish Anesthesia Assoc Anesthesiologist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

**Transaction ID:** 00709.C3466

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
Fleming For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Mike Unkel	Date of Receipt MM / DD / YYYY 07 / 20 / 2010
	Mailing Address PO Box 400	<b>Transaction ID:</b> 00810.C3481
	City State Zip Code Kinder LA 70648-0400	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Self Employed Farmer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Vozzella	Date of Receipt MM / DD / YYYY 07 / 28 / 2010
	Mailing Address 2601 Centenary Blvd	<b>Transaction ID:</b> 00810.C3497
	City State Zip Code Shreveport LA 71104-3329	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Genuine Explorations, Inc. Vice President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Art Walker	Date of Receipt MM / DD / YYYY 07 / 20 / 2010
	Mailing Address 212 Madonna Dr	<b>Transaction ID:</b> 00810.C3486
	City State Zip Code Benton LA 71006-4217	Amount of Each Receipt this Period 1400.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Caruthers Petroleum Co. Petroleum Engineer	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1475.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 51  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Fred Willis

Mailing Address PO Box 5219

City State Zip Code  
Shreveport LA 71135-5219

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

Name of Employer Self Employed Occupation  
Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 06 / 2010

Transaction ID: 00709.C3463

Amount of Each Receipt this Period  
100.00

Receipt  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	13245.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
America Academy of Family Physicians PAC

Mailing Address 2023 Massachusetts Ave NW

City State Zip Code  
Washington DC 20036-1011

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

**Transaction ID:** 00810.C3551

Amount of Each Receipt this Period  
1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Academy of Ophthalmology PAC

Mailing Address 1101 Vermont Ave NW Ste 700

City State Zip Code  
Washington DC 20005-3526

FEC ID number of contributing federal political committee. **C** C70003785

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

**Transaction ID:** 00810.C3553

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
American Assoc of Clinical Urologist PAC

Mailing Address 1111 N Plaza Dr Ste 550

City State Zip Code  
Schaumburg IL 60173-4946

FEC ID number of contributing federal political committee. **C** C00273003

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

**Transaction ID:** 00810.C3552

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Hospital Association PAC  
Mailing Address 325 7th St NW

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 08 / 02 / 2010  
**Transaction ID:** 00815.C3580  
 Amount of Each Receipt this Period: 4000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Osteopathic Information PAC  
Mailing Address 1090 Vermont Ave NW Ste 510

City Washington State DC Zip Code 20005-4949

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 02 / 2010  
**Transaction ID:** 00815.C3595  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
American Psychiatric Association PAC  
Mailing Address 1000 Wilson Blvd Ste 1825

City Arlington State VA Zip Code 22209-3924

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 08 / 05 / 2010  
**Transaction ID:** 00810.C3554  
 Amount of Each Receipt this Period: 1500.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Society of Anesthesiologists  
Mailing Address 520 N Northwest Hwy  
City Park Ridge State IL Zip Code 60068-2538  
FEC ID number of contributing federal political committee. **C** C00255752  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 07 / 26 / 2010  
Transaction ID: 00810.C3490  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Arch PAC  
Mailing Address 1 Cityplace Dr  
City Saint Louis State MO Zip Code 63141-7014  
FEC ID number of contributing federal political committee. **C** C00167668  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 08 / 06 / 2010  
Transaction ID: 00810.C3558  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Associated General Contractors PAC  
Mailing Address 2300 Wilson Blvd Ste 400  
City Arlington State VA Zip Code 22201-5426  
FEC ID number of contributing federal political committee. **C** C00082917  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 07 / 07 / 2010  
Transaction ID: 00713.C3473  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 21 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Associated General Contractors PAC

Mailing Address 2300 Wilson Blvd Ste 400

City State Zip Code  
Arlington VA 22201-5426

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 07 / 2010

**Transaction ID:** 00713.C3474

Amount of Each Receipt this Period  
1500.00

Receipt

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

Mailing Address 1201 15th St NW

City State Zip Code  
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 12 / 2010

**Transaction ID:** 00810.C3479

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 101 Constitution Ave NW

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2010

**Transaction ID:** 00810.C3492

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Coco-Cola Employee Nonpartisan Committee

Mailing Address 310 North Ave NW

City Atlanta State GA Zip Code 30313-2420

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 07 / 26 / 2010  
**Transaction ID:** 00810.C3493  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Committee for the Advancement

Mailing Address of LA Agriculture PAC  
3000 Kilpatrick Blvd.

City Monroe State LA Zip Code 71201

FEC ID number of contributing federal political committee. **C** C00332973

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 08 / 02 / 2010  
**Transaction ID:** 00815.C3596  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Exxon Mobil Corporation PAC

Mailing Address 5959 Las Colinas Blvd

City Irving State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 07 / 26 / 2010  
**Transaction ID:** 00810.C3489  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Fleming For Congress

**A.** Full Name (Last, First, Middle Initial)  
Franchising PAC  
Mailing Address 1501 K St NW Ste 350

City State Zip Code  
Washington DC 20005-1412

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2010  
**Transaction ID:** 00810.C3494  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Harris Corporation PAC  
Mailing Address 600 Maryland Ave SW Ste 850E

City State Zip Code  
Washington DC 20024-2566

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 02 / 2010  
**Transaction ID:** 00815.C3597  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
NAUS-PAC  
Mailing Address 5535 Hempstead Way

City State Zip Code  
Springfield VA 22151-4010

FEC ID number of contributing federal political committee. **C** C00086348

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2010  
**Transaction ID:** 00810.C3491  
 Amount of Each Receipt this Period  
 500.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 51  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

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

Mailing Address PO Box 619911

City State Zip Code  
Dallas TX 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

**Transaction ID:** 00810.C3549

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
OB-GYNS for Womens Health PAC

Mailing Address PO Box 23498

City State Zip Code  
Washington DC 20026-3498

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 2 / 2 0 1 0

**Transaction ID:** 00815.C3594

Amount of Each Receipt this Period  
2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

**TOTAL** This Period (last page this line number only) ..... ► **29500.00**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)  
Louisiana Dept. of Revenue

Transaction ID: 00810.E1456  
Date of Disbursement

Mailing Address PO Box 201

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

City State Zip Code  
Baton Rouge LA 70821-0201

Amount of Each Disbursement this Period

15.00
-------

Purpose of Disbursement  
Payroll Taxes  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)  
Louisiana Dept. of Revenue

Transaction ID: 00810.E1467  
Date of Disbursement

Mailing Address PO Box 201

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	0

City State Zip Code  
Baton Rouge LA 70821-0201

Amount of Each Disbursement this Period

65.00
-------

Purpose of Disbursement  
Payroll Taxes  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)  
Louisiana Secretary of State

Transaction ID: 00709.E1400  
Date of Disbursement

Mailing Address PO Box 94125

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

City State Zip Code  
Baton Rouge LA 70804-9125

Amount of Each Disbursement this Period

900.00
--------

Purpose of Disbursement  
Candidate Filing Fee  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

CANDIDATE FILING FEE

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

980.00
--------

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Apple Store	Transaction ID: 00810.E1472
	Mailing Address 1100 S Hayes St	Date of Disbursement 07 / 29 / 2010
	City Arlington State VA Zip Code 22202-4907	Amount of Each Disbursement this Period 1077.30
	Purpose of Disbursement Office Equipment	OFFICE EQUIPMENT
	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.	Full Name (Last, First, Middle Initial) Apple Store	Transaction ID: 00810.E1473
	Mailing Address 1100 S Hayes St	Date of Disbursement 08 / 05 / 2010
	City Arlington State VA Zip Code 22202-4907	Amount of Each Disbursement this Period 40.95
	Purpose of Disbursement Office Equipment	OFFICE EQUIPMENT
	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) ▼

C.	Full Name (Last, First, Middle Initial) Best Buy	Transaction ID: 00810.E1463
	Mailing Address 7080 Youree Dr	Date of Disbursement 07 / 14 / 2010
	City Shreveport State LA Zip Code 71105-5109	Amount of Each Disbursement this Period 1828.08
	Purpose of Disbursement Office Equipment	OFFICE EQUIPMENT
	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) .....	▶	2946.33
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 7080 Youree Dr</p> <p>City Shreveport State LA Zip Code 71105-5109</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1479 <b>Date of Disbursement:</b> 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 251.93</p> <p>OFFICE EQUIPMENT</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bistro To Go</p> <p>Mailing Address 8924 Jewella Ave Ste 4S</p> <p>City Shreveport State LA Zip Code 71118-2100</p> <p>Purpose of Disbursement Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1427 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 2998.67</p> <p>EVENT CATERING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Adcock &amp; Associates</p> <p>Mailing Address PO Box 966</p> <p>City Benton State LA Zip Code 71006-0966</p> <p>Purpose of Disbursement Event Flowers Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1431 <b>Date of Disbursement:</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 275.64</p> <p>EVENT FLOWERS EXPENSE</p>

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

3526.24

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 28 / 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)  
National Rifle Association

Mailing Address 11250 Waples Mill Rd

City State Zip Code  
Fairfax VA 22030-7400

Purpose of Disbursement  
Membership Fee  
Candidate Name

Category/  
Type

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

Transaction ID: 00810.E1441  
Date of Disbursement

07 / 12 / 2010

Amount of Each Disbursement this Period

1000.00

MEMBERSHIP FEE

B.

Full Name (Last, First, Middle Initial)  
Holiday Inn Express

Mailing Address 6808 Woodway Dr

City State Zip Code  
Woodway TX 76712-6158

Purpose of Disbursement  
Lodging  
Candidate Name

Category/  
Type

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

Transaction ID: 00810.E1489  
Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

457.31

LODGING

C.

Full Name (Last, First, Middle Initial)  
Holiday Inn Express

Mailing Address 6808 Woodway Dr

City State Zip Code  
Woodway TX 76712-6158

Purpose of Disbursement  
Lodging  
Candidate Name

Category/  
Type

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

Transaction ID: 00810.E1448  
Date of Disbursement

07 / 08 / 2010

Amount of Each Disbursement this Period

415.74

LODGING

SUBTOTAL of Disbursements This Page (optional) ▶

1873.05

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 00709.E1382 Date of Disbursement 07 / 01 / 2010
	Mailing Address PO Box 360001	
	City Fort Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period 186.16
	Purpose of Disbursement Transaction Fees 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) ▼
		TRANSACTION FEES

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 00810.E1474 Date of Disbursement 07 / 27 / 2010
	Mailing Address PO Box 360001	
	City Fort Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period 4.95
	Purpose of Disbursement Transaction Fees 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) ▼
		TRANSACTION FEES

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 00810.E1477 Date of Disbursement 08 / 02 / 2010
	Mailing Address PO Box 360001	
	City Fort Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period 43.52
	Purpose of Disbursement Transaction Fees 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) ▼
		TRANSACTION FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	234.63
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 1923 Main St  City Franklin State LA Zip Code 70538-3117  Purpose of Disbursement Credit Card Fees 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) ▼	Transaction ID: 00810.E1487 Date of Disbursement 07 / 02 / 2010  Amount of Each Disbursement this Period 171.00  CREDIT CARD FEES
B.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 1923 Main St  City Franklin State LA Zip Code 70538-3117  Purpose of Disbursement Travel Expenses 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) ▼	Transaction ID: 00810.E1464 Date of Disbursement 07 / 13 / 2010  Amount of Each Disbursement this Period 1341.27  TRAVEL EXPENSES
C.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address 1923 Main St  City Franklin State LA Zip Code 70538-3117  Purpose of Disbursement Transaction Fees 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) ▼	Transaction ID: 00810.E1478 Date of Disbursement 08 / 02 / 2010  Amount of Each Disbursement this Period 85.56  TRANSACTION FEES

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

1597.83

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Blanchard, Walker, OQuin and Roberts Mailing Address 400 Texas St Ste 1400	Transaction ID: 00810.E1485 Date of Disbursement MM / DD / YYYY 08 / 03 / 2010
	Amount of Each Disbursement this Period 2551.50
City Shreveport State LA Zip Code 71101-3549 Purpose of Disbursement Legal Fees 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:	LEGAL FEES

<b>B.</b> Full Name (Last, First, Middle Initial) Jewel Breard Mailing Address 496 Graham Rd	Transaction ID: 00810.E1468 Date of Disbursement MM / DD / YYYY 07 / 30 / 2010
	Amount of Each Disbursement this Period 461.75
City Leesville State LA Zip Code 71446-6937 Purpose of Disbursement Salary 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:	SALARY

<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE	Transaction ID: 00713.E1428 Date of Disbursement MM / DD / YYYY 07 / 08 / 2010
	Amount of Each Disbursement this Period 130.02
City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Meals 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:	MEALS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3143.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st St SE</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1484 <b>Date of Disbursement</b> 08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 172.10</p> <p><b>MEALS</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Servies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1424 <b>Date of Disbursement</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 900.00</p> <p><b>WEBSITE SERIVES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1421 <b>Date of Disbursement</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><b>WEBSITE SERVICES</b></p>

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

3572.10

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1423</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p> <p><b>WEBSITE SERVICES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1422</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p><b>WEBSITE SERVICES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1451</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p><b>WEBSITE SERVICES</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3550.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brabender Cox</p> <p>Mailing Address 1218 Grandview Ave</p> <p>City Pittsburgh State PA Zip Code 15211-1239</p> <p>Purpose of Disbursement Website Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1450</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p><b>WEBSITE SERVICES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fed Ex Kinko</p> <p>Mailing Address 2020 K St NW</p> <p>City Washington State DC Zip Code 20006-1817</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1488</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="06"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.75"/></p> <p><b>SHIPPING</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fed Ex Kinko</p> <p>Mailing Address 2020 K St NW</p> <p>City Washington State DC Zip Code 20006-1817</p> <p>Purpose of Disbursement Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1446</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.13"/></p> <p><b>COPIES</b></p>

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

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)  
Fed Ex Kinko

Transaction ID: 00810.E1445  
Date of Disbursement

Mailing Address 2020 K St NW

/   /

City Washington State DC Zip Code 20006-1817

Amount of Each Disbursement this Period

Purpose of Disbursement  
Color Copies  
Candidate Name

Category/  
Type

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

COLOR COPIES

B.

Full Name (Last, First, Middle Initial)  
Fed Ex Kinko

Transaction ID: 00810.E1444  
Date of Disbursement

Mailing Address 2020 K St NW

/   /

City Washington State DC Zip Code 20006-1817

Amount of Each Disbursement this Period

Purpose of Disbursement  
Copies  
Candidate Name

Category/  
Type

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

COPIES

C.

Full Name (Last, First, Middle Initial)  
Fed Ex Kinko

Transaction ID: 00810.E1443  
Date of Disbursement

Mailing Address 2020 K St NW

/   /

City Washington State DC Zip Code 20006-1817

Amount of Each Disbursement this Period

Purpose of Disbursement  
Color Copies  
Candidate Name

Category/  
Type

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

COLOR COPIES

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

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Fed Ex Kinko <hr/> Mailing Address 2020 K St NW <hr/> City Washington State DC Zip Code 20006-1817 <hr/> Purpose of Disbursement Copies Candidate Name <hr/> 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) ▼	Transaction ID: 00810.E1442 Date of Disbursement 07 / 07 / 2010
	Amount of Each Disbursement this Period 199.97
	Category/ Type COPIES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Fed Ex Kinko <hr/> Mailing Address 2020 K St NW <hr/> City Washington State DC Zip Code 20006-1817 <hr/> Purpose of Disbursement Shipping Candidate Name <hr/> 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) ▼	Transaction ID: 00810.E1461 Date of Disbursement 07 / 26 / 2010
	Amount of Each Disbursement this Period 13.12
	Category/ Type SHIPPING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Fed Ex Kinko <hr/> Mailing Address 2020 K St NW <hr/> City Washington State DC Zip Code 20006-1817 <hr/> Purpose of Disbursement Shipping Fees Candidate Name <hr/> 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) ▼	Transaction ID: 00810.E1475 Date of Disbursement 08 / 02 / 2010
	Amount of Each Disbursement this Period 24.37
	Category/ Type SHIPPING FEES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	237.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Fleming <hr/> Mailing Address PO Box 1236 <hr/> City Minden State LA Zip Code 71058-1236 <hr/> Purpose of Disbursement Reimbursement for Mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00810.E1460 Date of Disbursement MM / DD / YYYY 07 / 23 / 2010
	Amount of Each Disbursement this Period 185.22
	REIMBURSEMENT FOR MILEAGE
	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Fleming Subway Restaurants <hr/> Mailing Address 119 Homer Rd <hr/> City Minden State LA Zip Code 71055-2731 <hr/> Purpose of Disbursement Fees for Color Copies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00713.E1429 Date of Disbursement MM / DD / YYYY 07 / 08 / 2010
	Amount of Each Disbursement this Period 16.73
	FEES FOR COLOR COPIES
	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Fleming Subway Restaurants <hr/> Mailing Address 119 Homer Rd <hr/> City Minden State LA Zip Code 71055-2731 <hr/> Purpose of Disbursement fees for color copies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00810.E1483 Date of Disbursement MM / DD / YYYY 08 / 03 / 2010
	Amount of Each Disbursement this Period 34.12
	FEES FOR COLOR COPIES
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	236.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gun Owners of America</p> <p>Mailing Address 8001 Forbes Pl Ste 102</p> <p>City Springfield State VA Zip Code 22151-2205</p> <p>Purpose of Disbursement Membership Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1440</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>MEMBERSHIP FEE</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Insty Prints</p> <p>Mailing Address 2605 Mackey Ln</p> <p>City Shreveport State LA Zip Code 71118-2519</p> <p>Purpose of Disbursement Direct Mail Printing and Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1459</p> <p>Date of Disbursement 07 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1663.61</p> <p><b>DIRECT MAIL PRINTING AND POSTAGE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rivergate Investments, LLC</p> <p>Mailing Address 2205 E 70th St</p> <p>City Shreveport State LA Zip Code 71105-5321</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1438</p> <p>Date of Disbursement 07 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1600.00</p> <p><b>OFFICE RENT</b></p>

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

3763.61

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jonathan Kay

Mailing Address 2247 Urbandale St

City State Zip Code  
Shreveport LA 71118-3328

Purpose of Disbursement  
Salary  
Candidate Name

Category/  
Type

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

Transaction ID: 00810.E1469  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

SALARY

**B.**

Full Name (Last, First, Middle Initial)  
The Levatino Group

Mailing Address 2501 Wisconsin Ave NW Apt 304

City State Zip Code  
Washington DC 20007-4543

Purpose of Disbursement  
Fundraising Consulting  
Candidate Name

Category/  
Type

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

Transaction ID: 00713.E1426  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

**C.**

Full Name (Last, First, Middle Initial)  
The Levatino Group

Mailing Address 2501 Wisconsin Ave NW Apt 304

City State Zip Code  
Washington DC 20007-4543

Purpose of Disbursement  
Fundraising Consulting  
Candidate Name

Category/  
Type

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

Transaction ID: 00713.E1425  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

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

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Stephanie McKenzie Mailing Address 188 Grey Eagle Dr City Shreveport State LA Zip Code 71115-2979 Purpose of Disbursement 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) ▼	Transaction ID: 00810.E1470 Date of Disbursement 07 / 30 / 2010
	Amount of Each Disbursement this Period 932.60
	Category/Type SALARY
	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 536216 City Atlanta State GA Zip Code 30353-6216 Purpose of Disbursement Phones 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) ▼	Transaction ID: 00810.E1452 Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 360.89
	Category/Type PHONES
	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 536216 City Atlanta State GA Zip Code 30353-6216 Purpose of Disbursement Phones 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) ▼	Transaction ID: 00810.E1476 Date of Disbursement 08 / 02 / 2010
	Amount of Each Disbursement this Period 25.00
	Category/Type PHONES
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1318.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1486 <b>Date of Disbursement</b> 08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 263.13</p> <p>PHONES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nungesser Consulting</p> <p>Mailing Address 1554 Lobdell Ave</p> <p>City Baton Rouge State LA Zip Code 70806-8243</p> <p>Purpose of Disbursement fundraising consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1482 <b>Date of Disbursement</b> 08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 1201.96</p> <p>FUNDRAISING CONSULTING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Reel 2 Reel Productions</p> <p>Mailing Address 321 N 2nd St</p> <p>City Monroe State LA Zip Code 71201-6725</p> <p>Purpose of Disbursement Commercial Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00713.E1432 <b>Date of Disbursement</b> 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 9195.62</p> <p>COMMERCIAL PRODUCTION</p>

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

10660.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Reel 2 Reel Productions</p> <p>Mailing Address 321 N 2nd St</p> <p>City Monroe State LA Zip Code 71201-6725</p> <p>Purpose of Disbursement Commercial Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1481</p> <p>Date of Disbursement 08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 9195.62</p> <p>COMMERCIAL PRODUCTION</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Rapid Signs</p> <p>Mailing Address 120 W Railroad Ave</p> <p>City Ruston State LA Zip Code 71270-4426</p> <p>Purpose of Disbursement Signs &amp; Campaign Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1437</p> <p>Date of Disbursement 07 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 8172.77</p> <p>SIGNS &amp; CAMPAIGN MATERIALS</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Rapid Signs</p> <p>Mailing Address 120 W Railroad Ave</p> <p>City Ruston State LA Zip Code 71270-4426</p> <p>Purpose of Disbursement Signs &amp; Campaign Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1449</p> <p>Date of Disbursement 07 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 8172.77</p> <p>SIGNS &amp; CAMPAIGN MATERIALS</p>

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

25541.16

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Thrifty Liquor	Transaction ID: 00713.E1430 Date of Disbursement 07 / 08 / 2010
	Mailing Address 3000 E. Texas Street	Amount of Each Disbursement this Period 265.51
	City Bossier City State LA Zip Code 71112-	
	Purpose of Disbursement Event Catering	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) ▼
		EVENT CATERING

B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 00810.E1457 Date of Disbursement 07 / 20 / 2010
	Mailing Address 1500 Pennsylvania Ave	Amount of Each Disbursement this Period 48.93
	City Washington State DC Zip Code 20220-0001	
	Purpose of Disbursement Payroll Taxes	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) ▼
		PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 00810.E1458 Date of Disbursement 07 / 20 / 2010
	Mailing Address 1500 Pennsylvania Ave	Amount of Each Disbursement this Period 123.59
	City Washington State DC Zip Code 20220-0001	
	Purpose of Disbursement Payroll Taxes	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) ▼
		PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>438.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
Fleming For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address 1500 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20220-0001</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1466 <b>Date of Disbursement:</b> 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 709.67</p> <p><b>PAYROLL TAXES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Abby Varnadore</p> <p>Mailing Address 490 Sommersby Dr</p> <p>City Minden State LA Zip Code 71055-6216</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1439 <b>Date of Disbursement:</b> 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 211.11</p> <p><b>SALARY</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Abby Varnadore</p> <p>Mailing Address 490 Sommersby Dr</p> <p>City Minden State LA Zip Code 71055-6216</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00810.E1471 <b>Date of Disbursement:</b> 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 211.38</p> <p><b>SALARY</b></p>

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

1132.16

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 51

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Transaction ID: 00810.E1454

Date of Disbursement

Mailing Address PO Box 660108

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

City Dallas State TX Zip Code 75266-0108

Amount of Each Disbursement this Period

600.17
--------

Purpose of Disbursement  
Phones

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

PHONES

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

600.17

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

71376.93

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
Fleming For Congress
Transaction ID: LS80925.C455

LOAN SOURCE Full Name (Last, First, Middle Initial)
John Fleming - [PERSONAL FUNDS]
Election:
[ ] Primary
[ ] General
[X] Other (specify) Primary 2008
Mailing Address PO Box 1236
City Minden State LA ZIP Code 71058-1236

Original Amount of Loan 649980.00
Cumulative Payment To Date 399980.00
Balance Outstanding at Close of This Period 250000.00

TERMS
Date Incurred 01/25/2008
Date Due ONDEMAND
Interest Rate .0000 % (apr)
Secured: [ ] Yes [X] No

Table with 5 rows for guarantors. Columns: Full Name, Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional) 250000.00
TOTALS This Period (last page in this line only)
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 47 / 51
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
Fleming For Congress

**Transaction ID: LS81028.C568**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary Runoff 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan 275000.00	Cumulative Payment To Date 25000.00	Balance Outstanding at Close of This Period 250000.00
--------------------------------------	--	--

**TERMS**

Date Incurred MM DD YY YY 10 08 2008	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	25000.00
<b>TOTALS</b> This Period (last page in this line only) .....	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**

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

PAGE 48 / 51

FOR LINE NUMBER: (check only one)  13a  13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Fleming For Congress

**Transaction ID: LS81203.C1125**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75500.00	0.00	75500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table> <table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>7</td></tr> </table> <table style="font-size: small;"> <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>8</td></tr> </table>	M	M	1	1	D	D	0	7	Y	Y	Y	Y	2	0	0	8	ONDEMAND	.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
1	1																		
D	D																		
0	7																		
Y	Y	Y	Y																
2	0	0	8																

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="75500.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text"/>
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 49 / 51
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

**LOANS**

NAME OF COMMITTEE (In Full)  
 Fleming For Congress

**Transaction ID: LS90102.C1201**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

**TERMS**

Date Incurred M M 12 D D 11 Y Y Y Y 2008	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	100.00
<b>TOTALS</b> This Period (last page in this line only) .....	575600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**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)  
Fleming For Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> The Fletcher Group			Nature of Debt (Purpose): Direct Marketing
Mailing Address 321 N 2nd St			
City Monroe	State LA	ZIP Code 71201-6725	

Outstanding Balance Beginning This Period <input type="text" value="2413.53"/>		<b>Transaction ID:</b> LS90414.E964	
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="2413.53"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Reel 2 Reel Productions			Nature of Debt (Purpose): Commercial Production
Mailing Address 321 N 2nd St			
City Monroe	State LA	ZIP Code 71201-6725	

Outstanding Balance Beginning This Period <input type="text" value="53348.88"/>		<b>Transaction ID:</b> LS00713.E1432	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="18391.24"/>	Outstanding Balance at Close of This Period <input type="text" value="34957.64"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Fletcher Media			Nature of Debt (Purpose): Media Buy
Mailing Address 321 N 2nd St			
City Monroe	State LA	ZIP Code 71201-6725	

Outstanding Balance Beginning This Period <input type="text" value="616.00"/>		<b>Transaction ID:</b> LS90105.E859	
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="616.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="37987.17"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL 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"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 51 / 51	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Fleming For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Roy Fletcher			Nature of Debt (Purpose): Political Consulting
Mailing Address 220 Delgado Dr			
City Baton Rouge	State LA	ZIP Code 70808-4721	

Outstanding Balance Beginning This Period		<b>Transaction ID: LS90105.E865</b>	
8000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	8000.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	8000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	45987.17
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	575600.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	621587.17