

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> NEIL RISER CAMPAIGN INC			
ADDRESS (number and street) PO BOX 1376			
CITY, STATE, and ZIP CODE WEST MONROE LA 71294			
<b>2. NAME OF CANDIDATE</b> NEIL HARTWELL RISER Jr.		<b>3. OFFICE SOUGHT</b> (State and District) House LA 05	
		<b>4. FEC IDENTIFICATION NUMBER</b> C00548107	
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
RICHARD BREEN 701 HENDERSON RD WEST MONROE LA 71291		Name of Employer RICK BREEN'S RAPID LUBE & WASH <b>Transaction ID : F6.5967</b> Occupation OWNER	Date (month, day, year) 11/11/2013 Amount 1000.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
A. HARRIS BROWN P.O. BOX 2470 MONROE LA 71207		Name of Employer CUBA FARM AIRPORT <b>Transaction ID : F6.5973</b> Occupation OWNER	Date (month, day, year) 11/11/2013 Amount 1000.00
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
JACKIE L CLOWERS 105 TURNBERRY CT CALHOUN LA 71225		Name of Employer INFO REQUESTED PER BEST EFFORT <b>Transaction ID : F6.5964</b> Occupation INFO REQUESTED PER BEST EFFO	Date (month, day, year) 11/11/2013 Amount 1000.00
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
RANDY DENMON P.O. BOX 8460 MONROE LA 71211		Name of Employer LOUISIANA ASSOCIATED GENERAL CONTRACTO <b>Transaction ID : F6.5966</b> Occupation PROJECT ENGINEER	Date (month, day, year) 11/11/2013 Amount 1000.00
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
HARVEY HALES 3408 LOOP RD MONROE LA 71201		Name of Employer HARVEY HALES INSURANCE <b>Transaction ID : F6.5969</b> Occupation OWNER	Date (month, day, year) 11/11/2013 Amount 1000.00
<b>SIGNATURE (optional)</b> BRADLEY CRATE		DATE 11/13/2013	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
		<i>[Electronically Filed]</i>	

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

## FEC FORM 6

(Revised 07/2011)

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<b>CITY, STATE, and ZIP CODE</b> WEST MONROE LA 71294			
<b>2. NAME OF CANDIDATE</b> NEIL HARTWELL RISER Jr.	<b>3. OFFICE SOUGHT</b> (State and District) House LA 05	<b>4. FEC IDENTIFICATION NUMBER</b> C00548107	

**5. IS THIS AN AMENDMENT?**
 NO, THIS IS A NEW FILING
  YES, IT AMENDS THE NOTICE FILED ON \_\_\_\_ / \_\_\_\_ / \_\_\_\_

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
ROBERT F. MEREDITH III  P.O. BOX 1149  COLUMBIA LA 71418	HOGAN EXPLORATION  <b>Transaction ID : F6.5962</b> Occupation CEO	11/11/2013	1000.00
RONNIE MYRICK  3202 MONTIEGNE CIRCLE  MONROE LA 71201	CAPITAL BANK  <b>Transaction ID : F6.5963</b> Occupation BANKER	11/11/2013	1500.00
THOMAS G PARKER MD  1804 N 7TH STREET  WEST MONROE LA 71291	HAIK-HUMBLE EYE CENTER  <b>Transaction ID : F6.5960</b> Occupation DOCTOR	11/11/2013	1000.00
BRIAN WOODARD  148 TWIN CREEKS BEND  CHOUDRANT LA 71227	FIRST NATIONAL BANK  <b>Transaction ID : F6.5958</b> Occupation PRESIDENT	11/11/2013	1000.00
LEO YOUNG  P.O. BOX 1850  FERRIDAY LA 71334	YOUNG FUNERAL HOME  <b>Transaction ID : F6.5971</b> Occupation OWNER	11/11/2013	1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
HCA INC. GOOD GOVERNMENT FUND  PO BOX 550 ONE PARK PLAZA NASHVILLE TN 37203	Transaction ID : F6.5974 Occupation	11/11/2013	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		