FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED)

(Revised 02/2003)

. NAME OF		
COMMITTEE	(in	full)

Only

TYPE OR PRINT W

COMMITTEE (in full)		er the lines.	TSEE ALEC W	ALLICENTER
$[\underline{G_{l}}\underline{A_{l}}\underline{R_{l}}\underline{Y_{l-1}}\underline{C_{l-1}}\underline{L_{l}}\underline{A_{l}}\underline{N_{l}}\underline{D_{l}}\underline{R_{l}}\underline{I_{l}}\underline{E_{l}}\underline{U}$	C _i A _i M _i P _i A _i I	$_{1}G_{1}N_{1}$ $_{1}L_{1}L_{1}C_{1}$		
ADDRESS (number and street)	8, C,H,E,F,	$M_1 E_1 N_1 T_1 E_1 U_1 R$,H,W,Y,,,,	
Check if different				
than previously reported. (ACC)	$O_1R_1L_1E_1A_1N_1S$	1 1 1 1 1 1	L _A 7 ₀	1,2,9]-
7 2. FEC IDENTIFICATION NUMBER ▼	CITY ▲		STATE A	ZIP CODE
G0.0.5.4.0.2.3.7	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT L_A 0,2
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) 12-Day PRE	-Election Report for t	he:	
April 15 Quarterly Report (Q1)		Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	Election on	M 'M / D 'I) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	in the State of
January 31 Year-End Report (YE)	(c) 30-Day POS	General (30G)	the:	Special (30S)
Termination Report (TER)	Election on	M V M / D V C) \ \[\(\tilde{\	in the State of
5. Covering Period 111 / 14 / 2012 through 06 / 30 / 2013				
I certify that I have examined this Report and Type or Print Name of Treasurer / GARY	to the best of my lo	_	t is true, correct and cor	mplete.
Signature of Treasurer	Mm		Date 06 '	3 0 (2 0 1 3
NOTE: Submission of false, errorgous, or incom	plete information, may	subject the person sig	ning this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use			.	EC FORM 3 .

FEC Form 3 (Revised 02/2003)

Schedule C and/or Schedule D)

SUMMARY PAGE

of Receipts and Disbursements

Page 2

Write or Type Committee Name

GARY C. LANDRIEU CAMPAIGN, LLC

14 / 2012 Report Covering the Period: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** 8.2.5.0.0.0 (other than loans) (from Line 11(e)) Z (b) Total Contribution Refunds M (from Line 20(d)) ¢٥ O Net Contributions (other than loans) 8.2,5,0.0,0 (subtract Line 6(b) from Line 6(a)) **p-4** М (7) Net Operating Expenditures M (a) Total Operating Expenditures (from Line 17) (b) Total Offsets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures 9.4.3.3.5.4 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on

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

Page 3

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(Carry Total to Line 24, page 4).....

Write or Type Committee Name

GARY	C. 1	LAND	RIFU	CAMP	AIGN.	LLC
OVNI	U. 1	$\boldsymbol{\omega}$	KILV	CANTAIL .	GIUI1)	

From: Report Covering the Period: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than **Political Committees** 5 0 0 0 0 0 0 (i) Itemized (use Schedule A)...... Ln 0 (ii) Uniternized..... ¢o (iii) TOTAL of contributions 0 from Individuals M O 0 (b) Political Party Committees..... M Other Political Committees 0 0 (such as PACs) (d) The Candidate **TOTAL CONTRIBUTIONS** (other than loans) 0 0 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 13. LOANS: (a) Made ar Guaranteed by the 3 2 5 0 0 0 Candidate..... 0 (b) All Other Loans..... TOTAL LOANS 3,2,5,0,0,0 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0 (Refunds, Rabates, etc.) 15. OTHER RECEIPTS 0 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 8, 2, 5, 0, 0, 0

DETAILED SUMMARY PAGE

of Disbursements

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bursements Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
	OPERATING EXPENDITURES TRANSFERS TO OTHER		
10.	AUTHORIZED COMMITTEES	0	0
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		1,90,0,0,0
20. -1 -1 -1 -1	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
 사기	(b) Political Party Committees		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		
21.	OTHER DISBURSEMENTS		9,0,0,0
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)		2,80,0,0,0
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	0
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	
25.	SUBTOTAL (add Line 23 and Line 24)		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		

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	HEDULE C (FEG Form 3) ANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 6 FOR LINE NUMBER: (check only one) 13a 13b	
VΑ	ME OF COMMITTEE (In Fuil)				
G.	ARY C. LANDRIEU CAMPAIGI	N, LLC			
	LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)	1 🗆	lection:	
	GARY C. LANDRIEU			X Primary General	
	Mailing Address 23008 CHEF MENTEUR HWY.			Other (specify) ▼	
	City	State ZIP Cod	9		
	NEW ORLEANS	LA 70129			
	Original Amount of Loan	Cumulative Payment To I		e Outstanding at Close of This Period	
	3,2,5,0,0,0	1,	90000	1,3,5,0,0	
	TERMS Date Incurred	Date Due	Interest Rate	Secured:	
		12'31'2	ĎĺŠ	0 % (apr) Yes No	
	List All Endorsers or Guarantors (if any) to	o Loan Source			
	Full Name (Last, First, Middle Initial)		Name of Employer		
'	Mailing Address		Occupation		
		-	Amount		
i	City State	ZIP Code	Guaranteed Outstanding:		
	2. Full Name (Last, First, Middle Initial)		Name of Employer		
	Mailing Address		Occupation		
		<u> </u>	Amount [
	City State	ZIP Code	Guaranteed Outstanding:		
	3. Full Name (Last, First, Middle Initial)		Name of Employer		
	Mailing Address		Occupation		
	City State	ZIP Code	Amount Guaranteed		
		ZIF COUR	Outstanding:		
	4. Full Name (Last, First, Middle Initial)		Name of Employer		
	Mailing Address		Occupation		
	City State	ZIP Code	Amount Guaranteed Outstanding:	~~•~~	
s	SUBTOTALS This Period This Page (optional)				
T	OTALS This Period (last page in this line only	/)		1,3,5,0,0,0	

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

ARY C. LANDRIEU CAMPAIG		
A: Full Name (Last, First, Middle Inha) of Del	tifor of Creditor	Nature of Debt (Purpose):
GARY C. LANDRIEU		ODER ATTIVO
Mailing Address 23008 CHEF MENTEUR HWY.		OPERATING EXPENSES
City State	Zip Code	7
NEW ORLEANS, LA	70129	
Outstanding Balance Beginning This Period		
1.3.5.0.0.0		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Perio
0		0 1 3 5 0 0 0
B. Full Name (Last, First, Middle Initial) of Deb Mailing Address	otor or Creditor	Nature of Debt (Purpose):
Mailing Address		Nature of Debt (Purpose):
	zip Code	Nature of Debt (Purpose):
Mailing Address City State Outstanding Balance Beginning This Period		Nature of Debt (Purpose):
Mailing Address City State		Nature of Debt (Purpose):
Mailing Address City State Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Mailing Address City State Outstanding Balance Beginning This Period	Zip Code	
Mailing Address City State Outstanding Balance Beginning This Period	Zip Code	Outstanding Balance at Close of This Period
Mailing Address City State Outstanding Balance Beginning This Period	Zip Code Payment This Period	Outstanding Balance at Close of This Perio
Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period	Zip Code Payment This Period	Outstanding Balance at Close of This Period
Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period C. Full Name (Last, First, Middle Initial) of Del	Zip Code Payment This Period	Outstanding Balance at Close of This Period
Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period	Zip Code Payment This Period	Outstanding Balance at Close of This Peri

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NAME OF COMMITTEE (In Full)

Excluding Loans

SCHEDULE D (FEC Form 3)

Outstanding Balance Beginning This Period

Amount Incurred This Period

DEBTS AND OBLIGATIONS

1)	SUBTOTALS This Period This Page (optional)	•	
2)	TOTALS This Period (last page this line number only)	>	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	- ▶	1,3,5,0,0,0
4)	ADD 2) and 3) and carry forward to aperopriate line of Summary Page (last page only)	•	1 3 5 0 0 0

Payment This Period

Outstanding Balance at Close of This Period

PAGE 6

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

numbered line)

OF 6

9

10

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **PREPARER** DATE PREPARED