

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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
Republican Party of Louisiana

ADDRESS (number and street) 530 Lakeland Drive
Suite 215
 Check if different than previously reported. (ACC)
Baton Rouge LA 70802

2. **FEC IDENTIFICATION NUMBER** C00187450
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 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 Mr. Dan Kyle

Signature of Treasurer Electronically Filed by Mr. Dan Kyle Date 01 31 2011

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

Office Use Only								
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Republican Party of Louisiana

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		110806.29
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	62094.46									
(c) Total Receipts (from Line 19)	36852.32	789707.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	98946.78	900514.23								
7. Total Disbursements (from Line 31)	91271.56	892839.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7675.22	7675.22								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	31819.90									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Republican Party of Louisiana

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	16800.00	460382.87
(ii) Unitemized	0.00	35886.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16800.00	496269.61
(b) Political Party Committees	0.00	2098.00
(c) Other Political Committees (such as PACs)	1000.00	27550.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17800.00	525917.61
12. Transfers From Affiliated/Other Party Committees	7500.00	120100.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	18496.78
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	5757.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	11552.32	119436.05
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	11552.32	119436.05
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36852.32	789707.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25300.00	670271.89

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3070.90	31531.51
(ii) Non-Federal Share.....	11552.32	118618.31
(b) Other Federal Operating Expenditures.....	73798.34	196511.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	88421.56	346661.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	240.00	438267.55
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	2610.00	107409.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	2610.00	107409.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	91271.56	892839.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79719.24	774220.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17800.00	525917.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17800.00	525917.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	76869.24	228043.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	18496.78
38. Net Operating Expenditures (subtract Line 37 from Line 36)	76869.24	209546.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) Dr. Keith Desonier, Jr.		Date of Receipt
	Mailing Address 917 Contraband Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Lake Charles	LA	70605-1434
	FEC ID number of contributing federal political committee.		Transaction ID: AC401DF93FFCC4B62979
Name of Employer		Occupation	Amount of Each Receipt this Period
		Physician	<input type="text"/> 400.00
Receipt For:		Aggregate Year-to-Date	Generic Foundation Membership
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 3400.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Russell Plaisance		Date of Receipt
	Mailing Address 126 W. 103rd St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Cut Off	LA	70345-3558
	FEC ID number of contributing federal political committee.		Transaction ID: A1E2DCC3F91324C298C5
Name of Employer		Occupation	Amount of Each Receipt this Period
Louisiana Carriers, LLC		Owner	<input type="text"/> 1000.00
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Michael A. Worley		Date of Receipt
	Mailing Address PO Box 249		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Hammond	LA	70404-0249
	FEC ID number of contributing federal political committee.		Transaction ID: AEE959417BAF44343A68
Name of Employer		Occupation	Amount of Each Receipt this Period
Self		Construction	<input type="text"/> 10000.00
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 10000.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 11400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Mr. Lee Mallett

Mailing Address PO Box 1967

City State Zip Code
Iowa LA 70647-1967

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

Name of Employer Occupation
Mallett, Inc Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7300.00

Date of Receipt
MM / DD / YYYY
12 / 02 / 2010

Transaction ID: AABF74E038888457C8BD

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Dr. Keith Desonier, Jr.

Mailing Address 917 Contraband Ln

City State Zip Code
Lake Charles LA 70605-1434

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

Name of Employer Occupation
Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3800.00

Date of Receipt
MM / DD / YYYY
12 / 20 / 2010

Transaction ID: A151C042A58154673A55

Amount of Each Receipt this Period
400.00

generic Foundation Member-ship

SUBTOTAL of Receipts This Page (optional) ► **5400.00**

TOTAL This Period (last page this line number only) ► **16800.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 54
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Republican Party of Louisiana
--

A.	Full Name (Last, First, Middle Initial) Trinity Industries Emp PAC SF, Inc	Date of Receipt
	Mailing Address 2525 Stemmons Frwy	<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City State Zip Code Dallas TX 75207	Transaction ID: A3D9E5986674648DF804
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation	Generic Donation
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 54	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Republican Party of Louisiana
--

A.

Full Name (Last, First, Middle Initial) Republican National Committee		Date of Receipt
Mailing Address 310 First Street, SE		<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: A46F3E23A0C2E4208B01
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="7500.00"/>
	<input type="text" value="37198.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7500.00"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 54

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) US Post Office</p> <p>Mailing Address Bluebonnet Blvd</p> <p>City Baton Rouge State LA Zip Code 70809</p> <p>Purpose of Disbursement 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>Transaction ID: B8E9169EFCCCF4629A6F</p> <p>Date of Disbursement 11 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 22.16</p>
<p>B. Full Name (Last, First, Middle Initial) Liquid Ventures</p> <p>Mailing Address 12232 Industriplex Blvd Ste 1</p> <p>City Baton Rouge State LA Zip Code 70809-7105</p> <p>Purpose of Disbursement Management consulting</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>Transaction ID: B67D50A406651400F9C9</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Office Depot Credit Plan</p> <p>Mailing Address P. O. Box 9020</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement Office Supplies</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>Transaction ID: B720EA294461340F5AD6</p> <p>Date of Disbursement 12 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 208.13</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7730.29

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 54

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: B0558D51955234795926
	Mailing Address PO Box 105184	Date of Disbursement 12 / 02 / 2010
	City Atlanta State GA Zip Code 30348	Amount of Each Disbursement this Period 367.90
	Purpose of Disbursement Internet Serv	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Liquid Ventures	Transaction ID: BEBEB59E9D4C944DEB9B
	Mailing Address 12232 Industriplex Blvd Ste 1	Date of Disbursement 12 / 07 / 2010
	City Baton Rouge State LA Zip Code 70809-7105	Amount of Each Disbursement this Period 9500.00
	Purpose of Disbursement Management Consulting	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Direct Mailing Services, Inc	Transaction ID: B1590DA7539AB4976B44
	Mailing Address 12562 N Lakeshore Dr	Date of Disbursement 12 / 07 / 2010
	City Walker State LA Zip Code 70785	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Consulting Fees	Category/ Type
	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:	

SUBTOTAL of Disbursements This Page (optional) ▶

12867.90

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 54

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Budget Rent A Car Mailing Address City Hanover State MD Zip Code Purpose of Disbursement Repayment of Debt 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: BF6127D75B1FB4082B90 Date of Disbursement 12 / 30 / 2010
	Amount of Each Disbursement this Period 191.78
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GCR & Associates, Inc. Mailing Address 2021 Lakeshore Drive Suite 500 City New Orleans State LA Zip Code 70122-3529 Purpose of Disbursement GOTV Robo Calls 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: BE43607DA46964036AD9 Date of Disbursement 12 / 03 / 2010
	Amount of Each Disbursement this Period 13895.40
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Chevron Gas Station Mailing Address 510 Saint Ferdinand St City Baton Rouge State LA Zip Code 70802 Purpose of Disbursement Repayment of Debt 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: B197A56952CB84D59925 Date of Disbursement 12 / 30 / 2010
	Amount of Each Disbursement this Period 122.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	14209.18
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 54

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Italian Pie</p> <p>Mailing Address 11748 Coursey Blvd</p> <p>City Baton Rouge State LA Zip Code 70816-4401</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: B8E5FFE4F74214542876</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 147.91</p>
<p>B. Full Name (Last, First, Middle Initial) Hilton Hotels</p> <p>Mailing Address 7930 Jones Branch Dr Ste 1100</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: B97F877B2614B43479DC</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 73.75</p>
<p>C. Full Name (Last, First, Middle Initial) Domino's Pizza</p> <p>Mailing Address 7865 Jefferson Hwy</p> <p>City Baton Rouge State LA Zip Code 70809</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: BF4216653E8FD4CF5B89</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 188.51</p>

SUBTOTAL of Disbursements This Page (optional)	410.17
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) Best Buy Mailing Address Mall of Louisiana City Baton Rouge State LA Zip Code 70809 Purpose of Disbursement Repayment of Debt 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: B50D1DE9FE303496BA76 Date of Disbursement 12 / 30 / 2010 Amount of Each Disbursement this Period 217.99
B.	Full Name (Last, First, Middle Initial) Continental Airlines Mailing Address 900 Grand Plaza Drive City Houston State TX Zip Code 77067 Purpose of Disbursement Repayment of Debt 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: B69DD5A4F1BC1405B991 Date of Disbursement 12 / 30 / 2010 Amount of Each Disbursement this Period 38.00
C.	Full Name (Last, First, Middle Initial) La Political Review Mailing Address PO Box 6 City Baton Rouge State LA Zip Code 70821 Purpose of Disbursement Repayment of Debt 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: B4F548DE96003454BA7F Date of Disbursement 12 / 30 / 2010 Amount of Each Disbursement this Period 145.00

SUBTOTAL of Disbursements This Page (optional) ▶	400.99
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Will Vanderbrook Cpa</p> <p>Mailing Address 2900 Clearview Pkwy Suite 206</p> <p>City Metairie State LA Zip Code 70006-6532</p> <p>Purpose of Disbursement Debt payment</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>Transaction ID: BB1CFA34020624955A3A</p> <p>Date of Disbursement 12 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 1615.00</p>
<p>B. Full Name (Last, First, Middle Initial) Courtyard By Marriot Navyyard</p> <p>Mailing Address 140 L Street SE</p> <p>City Washington State DC Zip Code 20003-3335</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: BFB88E9FDE7DF4368B08</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 303.27</p>
<p>C. Full Name (Last, First, Middle Initial) Innovative Advertising, Llc</p> <p>Mailing Address 405 North Columbia Street</p> <p>City Covington State LA Zip Code 70433</p> <p>Purpose of Disbursement Debt Payment</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>Transaction ID: B8CA847B36591467DA33</p> <p>Date of Disbursement 12 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>5918.27</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) Fls Connect Llc	Transaction ID: B1E85D5A836484CFBDDF
	Mailing Address 7300 Hudson Blvd N Ste 270	Date of Disbursement MM / DD / YYYY 12 / 03 / 2010
	City Saint Paul State MN Zip Code 55128-7141	Amount of Each Disbursement this Period 1162.85
	Purpose of Disbursement Voter ID Calls	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) East Buffet	Transaction ID: BF182F9865E2841B19D2
	Mailing Address 2750 Severn Avenue	Date of Disbursement MM / DD / YYYY 12 / 30 / 2010
	City Metairie State LA Zip Code 70002	Amount of Each Disbursement this Period 141.74
	Purpose of Disbursement Repayment of Debt	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) ▼

C.	Full Name (Last, First, Middle Initial) Hilton Hotels	Transaction ID: B932A83D3E3FA4228A8E
	Mailing Address 7930 Jones Branch Dr Ste 1100	Date of Disbursement MM / DD / YYYY 12 / 30 / 2010
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period 24.00
	Purpose of Disbursement Repayment of Debt	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) ▼

SUBTOTAL of Disbursements This Page (optional) ► **1328.59**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hilton Hotels</p> <p>Mailing Address 7930 Jones Branch Dr Ste 1100</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: BCE965FE747684970825</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 104.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Will Vanderbrook Cpa</p> <p>Mailing Address 2900 Clearview Pkwy Suite 206</p> <p>City Metairie State LA Zip Code 70006-6532</p> <p>Purpose of Disbursement Debt payment</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>Transaction ID: B0CFD2CA292E642B0B68</p> <p>Date of Disbursement 12 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 9025.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Exxon</p> <p>Mailing Address 4527 Perkins Rd</p> <p>City Baton Rouge State LA Zip Code 70808-3036</p> <p>Purpose of Disbursement Repayment of Debt</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>Transaction ID: BB786419C91874006B6C</p> <p>Date of Disbursement 12 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 331.94</p>

SUBTOTAL of Disbursements This Page (optional)	9460.94
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Drago's Restaurant <hr/> Mailing Address 3232 N Arnoult Rd <hr/> City Metairie State LA Zip Code 70002 <hr/> Purpose of Disbursement Repayment of Debt 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: BEFD49EFE610B439AA53 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 153.85
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Halekulani Hotel <hr/> Mailing Address 2199 Kalia Road <hr/> City Honolulu State HI Zip Code 96815 <hr/> Purpose of Disbursement Repayment of Debt 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: BB8640A8EEBA640E1B47 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 254.66
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Acme Oyster House <hr/> Mailing Address 3000 Veterans Blvd <hr/> City Metairie State LA Zip Code 70002 <hr/> Purpose of Disbursement Repayment of Debt 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: B7DBEC3F5FD6E46D69EF Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 161.52
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

570.03

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)
MRI Inc.

Transaction ID: B773F69E946B0442EAC3

Date of Disbursement

Mailing Address PO Box 24134

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

City State Zip Code
New Orleans LA 70184

Amount of Each Disbursement this Period

20500.00

Purpose of Disbursement
Debt Repayment

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

20500.00

TOTAL This Period (last page this line number only)

73396.36

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 54

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Christopher Trahan <hr/> Mailing Address 18621 Hosmer Mill Rd <hr/> City Covington State LA Zip Code 70435-7625 <hr/> Purpose of Disbursement GOTV worker 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: BD2DA1B8063D04611B09 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Chris Comeaux <hr/> Mailing Address 13170 Dutchtown Pte Ave 1732 <hr/> City Gonzales State LA Zip Code 70737 <hr/> Purpose of Disbursement GOTV Activity 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: BF382F8D2EE1B45049E5 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1610.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

2610.00

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

2610.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

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

Outstanding Balance Beginning This Period 3800.00	Transaction ID: D639C2E9CBC5841199BF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crescent City Brewhouse	Nature of Debt (Purpose): Meals
Mailing Address 527 Decatur Street	
City State ZIP Code New Orleans LA 70130	

Outstanding Balance Beginning This Period 88.00	Transaction ID: D2201137A48C647659C6	
Amount Incurred This Period 0.00	Payment This Period 88.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Budget Rent A Car	Nature of Debt (Purpose): Travel
Mailing Address	
City State ZIP Code Hanover MD	

Outstanding Balance Beginning This Period 191.78	Transaction ID: D68F7E43FADD6485A936	
Amount Incurred This Period 0.00	Payment This Period 191.78	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	3800.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Texaco			Nature of Debt (Purpose): auto gasoline
Mailing Address Jefferson Hwy			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period		Transaction ID: DF162E44ED1B64CD0B0C	
31.18			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	31.18	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ruth's Chris Steakhouse			Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 4836 Constitution Ave			
City Baton Rouge	State LA	ZIP Code 70808	

Outstanding Balance Beginning This Period		Transaction ID: D030E05F0BF6E42BDAB4	
360.79			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	360.79	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Halekulani Hotel			Nature of Debt (Purpose): Travel
Mailing Address 2199 Kalia Road			
City Honolulu	State HI	ZIP Code 96815	

Outstanding Balance Beginning This Period		Transaction ID: D9252A2905D4D4B2C902	
254.66			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	254.66	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	391.97
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mystic Krewe of LA	Nature of Debt (Purpose): Casting fees
Mailing Address PO Box 65122	
City State ZIP Code Baton Rouge LA 70896	

Outstanding Balance Beginning This Period 715.00	Transaction ID: DA740B2E7EF954F809BB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 715.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Post Office	Nature of Debt (Purpose): Postage
Mailing Address Bluebonnet Blvd	
City State ZIP Code Baton Rouge LA 70809	

Outstanding Balance Beginning This Period 112.00	Transaction ID: D612CC811E0BD4422B74	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 112.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paypal	Nature of Debt (Purpose): bank fees
Mailing Address	
City State ZIP Code CA	

Outstanding Balance Beginning This Period 1.95	Transaction ID: D64EF5167332D471CBA1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.95

1) SUBTOTALS This Period This Page (optional).....	828.95
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Winn Dixie Store	Nature of Debt (Purpose): Meals snacks
Mailing Address Coursey Blvd	
City Baton Rouge State LA ZIP Code 70816	

Outstanding Balance Beginning This Period 95.75	Transaction ID: DD0F5C31C33264CB1933	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 95.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Premium Parking	Nature of Debt (Purpose): Auto parking
Mailing Address 900 St Charles Ave	
City New Orleans State LA ZIP Code 70130	

Outstanding Balance Beginning This Period 13.00	Transaction ID: D6E000AC5F42445ED99C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crown Trophy	Nature of Debt (Purpose): supplies- nameplates
Mailing Address 4215 S Sherwood Forest Blvd	
City Baton Rouge State LA ZIP Code 70816-4323	

Outstanding Balance Beginning This Period 26.16	Transaction ID: D0F32C58585484FCE95D	
Amount Incurred This Period 0.00	Payment This Period 26.16	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	108.75
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Ups Store	Nature of Debt (Purpose): Generic Postage
Mailing Address 2851 Johnston St	
City State ZIP Code Lafayette LA 70503	

Outstanding Balance Beginning This Period 63.78	Transaction ID: DE500892612A8488981B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 63.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wendy's Hamburgers	Nature of Debt (Purpose): meals
Mailing Address Sherwood Forest Blvd	
City State ZIP Code Baton Rouge LA 70816	

Outstanding Balance Beginning This Period 54.33	Transaction ID: D90FB67465A6E4FB4B29	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 54.33

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shoney's Metairie	Nature of Debt (Purpose): meals
Mailing Address 759 Veteran's Memorial Blvd	
City State ZIP Code Metairie LA 70005	

Outstanding Balance Beginning This Period 44.39	Transaction ID: DFBACE0FE2BAB47EC861	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44.39

1) SUBTOTALS This Period This Page (optional).....	▶	162.50
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Courtyard By Marriot Navyyard			Nature of Debt (Purpose): Travel
Mailing Address 140 L Street SE			
City Washington	State DC	ZIP Code 20003-3335	

Outstanding Balance Beginning This Period <input type="text" value="303.27"/>		Transaction ID: D294298D038FC482DA79	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="303.27"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Auto Parking
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="24.00"/>		Transaction ID: D6BF10546BA394C58BBA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="24.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor La Political Review			Nature of Debt (Purpose): Subscription
Mailing Address PO Box 6			
City Baton Rouge	State LA	ZIP Code 70821	

Outstanding Balance Beginning This Period <input type="text" value="145.00"/>		Transaction ID: D28826217F9EF4DB1ADA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="145.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Walk On's Bistreaux			Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 3838 Burbank			
City Baton Rouge	State LA	ZIP Code 70808	

Outstanding Balance Beginning This Period		Transaction ID: D86530EAD1A454CAB92A	
83.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	83.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor At&t			Nature of Debt (Purpose): Cellphone
Mailing Address PO Box 945800			
City Maitland	State FL	ZIP Code 32794-5800	

Outstanding Balance Beginning This Period		Transaction ID: D95D955D698B44B66A56	
184.74			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	184.74	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Auto Parking
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period		Transaction ID: DAE50EAA1917A482FA98	
104.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	104.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	267.74
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Generic Travel
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="1300.82"/>		Transaction ID: DC816E81D2E9C41B59AC	
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="1300.82"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chevron Gas Station			Nature of Debt (Purpose): auto gasoline
Mailing Address 510 Saint Ferdinand St			
City Baton Rouge	State LA	ZIP Code 70802	

Outstanding Balance Beginning This Period <input type="text" value="122.00"/>		Transaction ID: D9295EFAE5DC04E0B892	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="122.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor R&O's Pizza			Nature of Debt (Purpose): Meals
Mailing Address 216 Metairie Hammond Hwy			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period <input type="text" value="352.93"/>		Transaction ID: DE95158326F1A4359AB9	
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="352.93"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1653.75"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson News			Nature of Debt (Purpose): Travel
Mailing Address New Orleans Airport			
City Kenner	State LA	ZIP Code 70065	

Outstanding Balance Beginning This Period		Transaction ID: DB9148B76A2E642AA843	
6.63			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	6.63	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Continental Airlines			Nature of Debt (Purpose): Travel
Mailing Address 900 Grand Plaza Drive			
City Houston	State TX	ZIP Code 77067	

Outstanding Balance Beginning This Period		Transaction ID: D275D506D213B4F459AF	
38.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	38.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor New South Parking Systems			Nature of Debt (Purpose): Travel
Mailing Address Louis Armstrong Airport			
City Kenner	State LA	ZIP Code 70065	

Outstanding Balance Beginning This Period		Transaction ID: DBD6CE29CCE1247CDBA5	
54.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	54.00	

1) SUBTOTALS This Period This Page (optional).....	▶	54.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 30 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mulate's Restaurant	Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 201 Julia St	
City State ZIP Code New Orleans LA 70130	

Outstanding Balance Beginning This Period 113.25	Transaction ID: DBC7CFB1D57B74374BC7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 113.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TJ Ribs	Nature of Debt (Purpose): Meals & Entertainment
Mailing Address Acadian Thruway	
City State ZIP Code Baton Rouge LA 70808	

Outstanding Balance Beginning This Period 105.84	Transaction ID: D04D76C27753B46B98BF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 105.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marriott Hotel	Nature of Debt (Purpose): Travel
Mailing Address 10400 Fernwood Rd	
City State ZIP Code Bethesda MD 20817	

Outstanding Balance Beginning This Period 111.87	Transaction ID: D5BBD8CE00EB348E1902	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 111.87

1) SUBTOTALS This Period This Page (optional).....	▶	330.96
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Italian Pie			Nature of Debt (Purpose): Meals
Mailing Address 11748 Coursey Blvd			
City Baton Rouge	State LA	ZIP Code 70816-4401	

Outstanding Balance Beginning This Period		Transaction ID: D8E5D92C0B0D24FA2B79	
147.91			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	147.91	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shell Oil Corporation			Nature of Debt (Purpose): Auto Gasolione
Mailing Address One Shell Square			
City Houston	State TX	ZIP Code 77002	

Outstanding Balance Beginning This Period		Transaction ID: D9A9742BF0CBB47C5B70	
217.07			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	217.07	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sylvester Management			Nature of Debt (Purpose): Training
Mailing Address PO Box 986			
City Irmo	State SC	ZIP Code 29063	

Outstanding Balance Beginning This Period		Transaction ID: D90905C0E35064F03983	
1100.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1100.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1317.07
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Semolina			Nature of Debt (Purpose): meals
Mailing Address 4506 Jamestown Ave			
City Baton Rouge	State LA	ZIP Code	

Outstanding Balance Beginning This Period <input type="text" value="70.87"/>		Transaction ID: DA4E6B722076C494EA69	
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="70.87"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Grocery			Nature of Debt (Purpose): Meals
Mailing Address 701 Spanish Town Road			
City Baton Rouge	State LA	ZIP Code	

Outstanding Balance Beginning This Period <input type="text" value="32.84"/>		Transaction ID: D8B97455FCE0E4ADFA70	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="32.84"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NewsMax Magazine			Nature of Debt (Purpose): Subscription
Mailing Address PO Box 20989			
City West Palm Beach	State FL	ZIP Code 33416	

Outstanding Balance Beginning This Period <input type="text" value="54.00"/>		Transaction ID: DEE5CA476E5DC46E1BAA	
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="54.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="124.87"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 33 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Albertson's	Nature of Debt (Purpose): supplies- snacks
Mailing Address 9990 Bluebonnet Rd	
City State ZIP Code Baton Rouge LA 70820	

Outstanding Balance Beginning This Period 46.95	Transaction ID: D36772175EE414B3DB35	
Amount Incurred This Period 0.00	Payment This Period 46.95	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Racetrac	Nature of Debt (Purpose): auto gasoline
Mailing Address 3425 S Sherwood Forest Blvd	
City State ZIP Code Baton Rouge LA 70816	

Outstanding Balance Beginning This Period 39.79	Transaction ID: D59F893BCB86748DC83D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 39.79

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wyndham Hotels	Nature of Debt (Purpose): Travel
Mailing Address 1910 8th Ave NE	
City State ZIP Code Aberdeen SD 57401	

Outstanding Balance Beginning This Period 94.08	Transaction ID: DD55A875E37834238880	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 94.08

1) SUBTOTALS This Period This Page (optional).....	▶	133.87
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Travel
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period		Transaction ID: D8B5D528FB7BE43FEABB	
73.75			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	73.75	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Crescent Spoon			Nature of Debt (Purpose): meals
Mailing Address 3120 Cleary Ave			
City Metairie	State LA	ZIP Code 70002	

Outstanding Balance Beginning This Period		Transaction ID: DF38238E76A73408195A	
26.73			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	26.73	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Republican National Committee			Nature of Debt (Purpose): fees
Mailing Address 310 First Street, SE			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period		Transaction ID: D9832197165124FD598E	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	

1) SUBTOTALS This Period This Page (optional).....	▶	226.73
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Villere's Florist			Nature of Debt (Purpose): Benevolence
Mailing Address 750 Martin Behrman			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period <input type="text" value="134.19"/>		Transaction ID: D2A478061B5754085968	
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="134.19"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Domino's Pizza			Nature of Debt (Purpose): Meals
Mailing Address 7865 Jefferson Hwy			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period <input type="text" value="188.51"/>		Transaction ID: DF6AF01634F7549559D9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="188.51"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Best Buy			Nature of Debt (Purpose): Supplies
Mailing Address Mall of Louisiana			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period <input type="text" value="217.99"/>		Transaction ID: D798E94D7001F42FB926	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="217.99"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="134.19"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 36 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Premiere Marketing	Nature of Debt (Purpose): Supplies-books
Mailing Address 109 International Dr	
City State ZIP Code Franklin TN 37067	

Outstanding Balance Beginning This Period 50.00	Transaction ID: DCA5F8BFAEC424DBB90D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Exxon	Nature of Debt (Purpose): auto gasoline
Mailing Address 4527 Perkins Rd	
City State ZIP Code Baton Rouge LA 70808-3036	

Outstanding Balance Beginning This Period 331.94	Transaction ID: D30732137DAFC41FC8AB	
Amount Incurred This Period 0.00	Payment This Period 331.94	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fury's	Nature of Debt (Purpose): Meals
Mailing Address 724 Martin Behrmann	
City State ZIP Code Metairie LA 70005	

Outstanding Balance Beginning This Period 90.39	Transaction ID: D68AA863E9A3A4290BF1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.39

1) SUBTOTALS This Period This Page (optional).....	▶	140.39
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cafe Marigny			Nature of Debt (Purpose): Meals
Mailing Address 640 Frenchmen St			
City New Orleans	State LA	ZIP Code 70116	

Outstanding Balance Beginning This Period		Transaction ID: DEBFB2ECFAFE94AF791F	
82.24			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	82.24	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drago's Restaurant			Nature of Debt (Purpose): meals
Mailing Address 3232 N Arnoult Rd			
City Metairie	State LA	ZIP Code 70002	

Outstanding Balance Beginning This Period		Transaction ID: D8D19D3B52A1C447581F	
153.85			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	153.85	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Circle K			Nature of Debt (Purpose): auto gasoline
Mailing Address 9110 Airline Hwy			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period		Transaction ID: D13033851ECE245B5BB5	
40.62			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	40.62	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor East Buffet	Nature of Debt (Purpose): Meals
Mailing Address 2750 Severn Avenue	
City Metairie State LA ZIP Code 70002	

Outstanding Balance Beginning This Period 141.74	Transaction ID: D1DE2A07F255A4BFB8E2	
Amount Incurred This Period 0.00	Payment This Period 141.74	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Acme Oyster House	Nature of Debt (Purpose): Meals
Mailing Address 3000 Veterans Blvd	
City Metairie State LA ZIP Code 70002	

Outstanding Balance Beginning This Period 161.52	Transaction ID: D08FAE847AFE74807855	
Amount Incurred This Period 0.00	Payment This Period 161.52	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Will Vanderbrook Cpa	Nature of Debt (Purpose): Accounting Services
Mailing Address 2900 Clearview Pkwy Suite 206	
City Metairie State LA ZIP Code 70006-6532	

Outstanding Balance Beginning This Period 1615.00	Transaction ID: D059CF35BF30349B082E	
Amount Incurred This Period 0.00	Payment This Period 1615.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International	Nature of Debt (Purpose): Software Hosting	
Mailing Address 205 Pennsylvania Ave SE		
City Washington State DC ZIP Code 20003		

Outstanding Balance Beginning This Period 7200.00	Transaction ID: D0331390CF1564350925	
Amount Incurred This Period 0.00	Payment This Period 2400.00	Outstanding Balance at Close of This Period 4800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Papa John's Pizza	Nature of Debt (Purpose): Meals & Entertainment	
Mailing Address 1580 Nicholson Dr		
City Baton Rouge State LA ZIP Code 70802		

Outstanding Balance Beginning This Period 186.67	Transaction ID: DE466ECFCC25045CC92A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 186.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Generic Postage	
Mailing Address Veteran's Blvd		
City Metairie State LA ZIP Code 70005		

Outstanding Balance Beginning This Period 228.80	Transaction ID: D5D6C8BF97D0140849B9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 228.80

1) SUBTOTALS This Period This Page (optional).....	▶	5215.47
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 40 / 54
 FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Olsen & Shulov
 Nature of Debt (Purpose):
 Generic Direct Mail Printing

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code
 Austin TX 78701-1022

Outstanding Balance Beginning This Period **Transaction ID:** DFFA2A98A133441C79D0

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Olsen & Shulov
 Nature of Debt (Purpose):
 Generic Direct Mail Postage

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code
 Austin TX 78701-1022

Outstanding Balance Beginning This Period **Transaction ID:** D151679745D854CD0B88

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Iberia Bank Visa
 Nature of Debt (Purpose):
 Jan- Jun finance fees

Mailing Address PO Box 30495

City State ZIP Code
 Tampa FL 33630-3495

Outstanding Balance Beginning This Period **Transaction ID:** DA18CC9AE747E4AA5B6E

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional).....	▶	<input type="text" value="16928.69"/>
2) TOTALS This Period (last page this line number only).....	▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fls Connect Llc			Nature of Debt (Purpose): Voter ID phone calls
Mailing Address 7300 Hudson Blvd N Ste 270			
City Saint Paul	State MN	ZIP Code 55128-7141	

Outstanding Balance Beginning This Period <input type="text" value="1162.85"/>		Transaction ID: DC41EE077408F4E60924	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1162.85"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Will Vanderbrook Cpa			Nature of Debt (Purpose): Fec reporting
Mailing Address 2900 Clearview Pkwy Suite 206			
City Metairie	State LA	ZIP Code 70006-6532	

Outstanding Balance Beginning This Period <input type="text" value="9025.00"/>		Transaction ID: D9F139F51B1E24D488B7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="9025.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GCR & Associates, Inc.			Nature of Debt (Purpose): Gotv robo calls
Mailing Address 2021 Lakeshore Drive Suite 500			
City New Orleans	State LA	ZIP Code 70122-3529	

Outstanding Balance Beginning This Period <input type="text" value="13895.40"/>		Transaction ID: DD69F2D04A9434DF98C6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="13895.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 42 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Innovative Advertising, Llc	Nature of Debt (Purpose): GOTV Mail Design
Mailing Address 405 North Columbia Street	
City State ZIP Code Covington LA 70433	

Outstanding Balance Beginning This Period 4000.00	Transaction ID: D9193D70B878544EFAC0	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MRI Inc.	Nature of Debt (Purpose): phone calls ,H8LA02112'un-
Mailing Address PO Box 24134	
City State ZIP Code New Orleans LA 70184	

Outstanding Balance Beginning This Period 20500.00	Transaction ID: D12BC37C17B21489191A	
Amount Incurred This Period 0.00	Payment This Period 20500.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	31819.90
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	31819.90

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

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

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

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

or

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

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
RPL-Federal	M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0	11552.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	11552.32	Transaction ID: HBA91227935584640B95
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	11552.32
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	11552.32

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Crayon Campus

Mailing Address
9715 Lawndale Dr

City State Zip Code
Baton Rouge LA 70818

Purpose of Disbursement:
Employee Benefits

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

136386.67

Date / /

Transaction ID: HD5D858D303FF475D920

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.75		217.25		275.00

B. Full Name (Last, First, Middle Initial)
At&t

Mailing Address
PO Box 945800

City State Zip Code
Maitland FL 32794-5800

Purpose of Disbursement:
Office Telephones

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

136386.67

Date / /

Transaction ID: H3EC2480D0EF04F1687C

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.86		462.21		585.07

C. Full Name (Last, First, Middle Initial)
Karen Connolly

Mailing Address
6880 Christopher Ave

City State Zip Code
Greenwell Springs LA 70739-4253

Purpose of Disbursement:
Salary

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

137569.95

Date / /

Transaction ID: H379AF3C1CB214BC1998

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.49		934.79		1183.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
429.10		1614.25		2043.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Myra S Myers Prp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7344 Meadowview Ave			Allocated Activity or Event Year-To-Date 140843.73		
City Baton Rouge	State LA	Zip Code 70810-2023	Date MM / DD / YYYY 12 / 02 / 2010		
Purpose of Disbursement: Meetings Expense			Transaction ID: HAA47E31384C845AE9A1		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

B. Full Name (Last, First, Middle Initial) Kimbria Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1050 E 11th St Suite 200			Allocated Activity or Event Year-To-Date 140843.73		
City Austin	State TX	Zip Code 78702	Date MM / DD / YYYY 12 / 02 / 2010		
Purpose of Disbursement: Credit Card Chgs			Transaction ID: HAE8ECA84DB0F4F3095E		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.42		88.09		111.51

C. Full Name (Last, First, Middle Initial) Kentwood Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11465 Reiger Rd			Allocated Activity or Event Year-To-Date 140843.73		
City Baton Rouge	State LA	Zip Code 70809	Date MM / DD / YYYY 12 / 02 / 2010		
Purpose of Disbursement: Water Service			Transaction ID: HEA61C1EF9D5F426B971		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.46		46.87		59.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.38		253.46		320.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) CIT Technology Fin Serv Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 21146 Network Place			Allocated Activity or Event Year-To-Date 140843.73	
City	State	Zip Code	Category/ Type	
Chicago	IL	60673		
Purpose of Disbursement: Copier Lease			Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	
Activity or Event Identifier: Admin			Transaction ID: H3701C778F7E540D2964	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.70		416.42		527.12

B. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 94515			Allocated Activity or Event Year-To-Date 140843.73	
City	State	Zip Code	Category/ Type	
Palatine	IL	60094-4515		
Purpose of Disbursement: Postage			Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	
Activity or Event Identifier: Admin			Transaction ID: H5BAE0DFBE1D143B787A	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.42		20.40		25.82

C. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 Pennsylvania Ave SE			Allocated Activity or Event Year-To-Date 140843.73	
City	State	Zip Code	Category/ Type	
Washington	DC	20003		
Purpose of Disbursement: Computer Servs			Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	
Activity or Event Identifier: Admin			Transaction ID: HBF88C5F16D5A4939B76	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
504.00		1896.00		2400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
620.12		2332.82		2952.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Internal Revenue Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1210			Allocated Activity or Event Year-To-Date 142141.26		
City Charlotte	State NC	Zip Code 28201-1210	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 1 0		
Purpose of Disbursement: Payroll Taxes			Transaction ID: H2BE27DDCF37B4364927		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.38		817.76		1035.14

B. Full Name (Last, First, Middle Initial) At&t			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 945800			Allocated Activity or Event Year-To-Date 142141.26		
City Maitland	State FL	Zip Code 32794-5800	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 1 0		
Purpose of Disbursement: Cell Phone			Transaction ID: H0D9230AAB3634B90A88		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.21		136.23		172.44

C. Full Name (Last, First, Middle Initial) Cybersource			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1295 Charleston Road			Allocated Activity or Event Year-To-Date 142141.26		
City Mountainview	State CA	Zip Code 94043	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 1 0		
Purpose of Disbursement: Credit Card Fees			Transaction ID: H05F4F32734084A5DAA2		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.89		71.06		89.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.48		1025.05		1297.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address
Veteran's Blvd

City State Zip Code
Metairie LA 70005

Purpose of Disbursement:
Stamps

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142517.04

Date 12 / 13 / 2010

Transaction ID: HDF593A6910B745328C5

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.24		34.76		44.00

B. Full Name (Last, First, Middle Initial)
Shell Oil Corporation

Mailing Address
One Shell Square

City State Zip Code
Houston TX 77002

Purpose of Disbursement:
Auto gasoline

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142517.04

Date 12 / 13 / 2010

Transaction ID: H6F7496FF0D6940FA811

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.33		99.03		125.36

C. Full Name (Last, First, Middle Initial)
Exxon

Mailing Address
4527 Perkins Rd

City State Zip Code
Baton Rouge LA 70808-3036

Purpose of Disbursement:
Auto gasoline

Category/
Type

Activity or Event Identifier:
Admin

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142517.04

Date 12 / 13 / 2010

Transaction ID: HF1EEED007BEB4BA88B0

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.67		13.79		17.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.24		147.58		186.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Iberia Bank Visa
Mailing Address
PO Box 30495
City State Zip Code
Tampa FL 33630-3495
Purpose of Disbursement:
Finance Charges
Activity or Event Identifier:
Admin

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
142517.04
Date 12 / 13 / 2010
Transaction ID: HA8640A872C5547BB81F

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.59		66.15		83.74

B. Full Name (Last, First, Middle Initial)
Uline
Mailing Address
12575 Uline Dr
City State Zip Code
Pleasant Prarie WI 53158
Purpose of Disbursement:
Supplies
Activity or Event Identifier:
Admin

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
142517.04
Date 12 / 13 / 2010
Transaction ID: H9BAAB33D846E4D6FA4C

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		30.06		38.05

C. Full Name (Last, First, Middle Initial)
Iberia Bank Visa
Mailing Address
PO Box 30495
City State Zip Code
Tampa FL 33630-3495
Purpose of Disbursement:
Finance Chgs
Activity or Event Identifier:
Admin

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
142517.04
Date 12 / 13 / 2010
Transaction ID: HFC76D9B098A1408B842

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.11		53.06		67.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.69		149.27		188.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Iberia Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3700 Essen Ln			Allocated Activity or Event Year-To-Date 142746.36		
City Baton Rouge	State LA	Zip Code 70809-2134	Date <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Bank Fees			Transaction ID: H3607C88B2F184D99849		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.16		181.16		229.32

B. Full Name (Last, First, Middle Initial) Karen Connolly			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6880 Christopher Ave			Allocated Activity or Event Year-To-Date 146696.15		
City Greenwell Springs	State LA	Zip Code 70739-4253	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H131CD83931484A8AA98		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.49		934.79		1183.28

C. Full Name (Last, First, Middle Initial) Aaron Baer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11155 Southfork Dr Apt 3023			Allocated Activity or Event Year-To-Date 146696.15		
City Baton Rouge	State LA	Zip Code 70816	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H47B007FC2FAD4A84AE2		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.59		1367.80		1731.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
660.24		2483.75		3143.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Internal Revenue Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1210			Allocated Activity or Event Year-To-Date 146696.15		
City Charlotte	State NC	Zip Code 28201-1210	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Taxes			Transaction ID: H56768B9A0B2D47139AC		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.38		817.74		1035.12

B. Full Name (Last, First, Middle Initial) LA Department of Revenue			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 617 N 3rd St.			Allocated Activity or Event Year-To-Date 146960.15		
City Baton Rouge	State LA	Zip Code 70802-5428	Date M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 1 0		
Purpose of Disbursement: Taxes			Transaction ID: H34706D4BCD52430B870		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.44		208.56		264.00

C. Full Name (Last, First, Middle Initial) Aaron Baer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11155 Southfork Dr Apt 3023			Allocated Activity or Event Year-To-Date 148691.54		
City Baton Rouge	State LA	Zip Code 70816	Date M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: HFCFD6CFD77534E9DAE9		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.59		1367.80		1731.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
636.41		2394.10		3030.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)
Karen Connolly

Mailing Address
6880 Christopher Ave

City State Zip Code
Greenwell Springs LA 70739-4253

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150149.82

Activity or Event Identifier:
Admin

Date 12 / 31 / 2010

Transaction ID: H33BC86B9DAED4C558E3

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.49		934.79		1183.28

B. Full Name (Last, First, Middle Initial)
Crayon Campus

Mailing Address
9715 Lawndale Dr

City State Zip Code
Baton Rouge LA 70818

Purpose of Disbursement:
Employee Benefits

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150149.82

Activity or Event Identifier:
Admin

Date 12 / 31 / 2010

Transaction ID: HD77E1F9D9D994E2A8DA

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.75		217.25		275.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.24		1152.04		1458.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
3070.90	11552.32	14623.22