

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Jeff Landry for Congress

ADDRESS (number and street)

101 Arbor Lane

Check if different
than previously
reported. (ACC)

New Iberia

LA

70563

2. FEC IDENTIFICATION NUMBER ▼

C

C00472712

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

LA

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

2014

through

M M /

D D /

Y Y Y Y

2014

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. Benjamin Layne Landry

Signature of Treasurer Mr. Benjamin Layne Landry

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

15

2014

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**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 15

Write or Type Committee Name

Jeff Landry for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....		2331490.66
(b) Total Contribution Refunds (from Line 20(d))		12100
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		2319390.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14457.9	2411898.09
(b) Total Offsets to Operating Expenditures (from Line 14).....		729.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	14457.9	2411168.21
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5615.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	28738.56	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

Write or Type Committee Name

Jeff Landry for Congress

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01		01		2014

To:

M M	/	D D	/	Y Y Y Y
03		31		2014

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

1912753.34

(ii) Unitemized.....

39012.6

(iii) TOTAL of contributions from individuals ▶

1951765.94

(b) Political Party Committees.....

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

379724.72

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

2331490.66

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES**13. LOANS:**

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

26884.79

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

26884.79

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

729.88

15. OTHER RECEIPTS (Dividends, Interest, etc.)

6.23

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

2359111.56

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14457.9	2411898.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		80146.23
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		80146.23
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		12100
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		12100
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14457.9	2504144.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	20073.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	
25. SUBTOTAL (add Line 23 and Line 24).....	20073.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14457.9
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5615.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 15

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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

NAME OF COMMITTEE (In Full)

Jeff Landry for Congress

Full Name (Last, First, Middle Initial)

A. UST STAFFING

Mailing Address P. O. BOX 990

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
BROUSSARD	LA	70518

Amount of Each Disbursement this Period

699.84

Purpose of Disbursement
payroll

001

Transaction ID : SB17-EX1067

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

payroll

State: District:

Full Name (Last, First, Middle Initial)

B. Christopher Gary

Mailing Address 933 Myra St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
New Iberia	LA	70563

Amount of Each Disbursement this Period

699.84

Purpose of Disbursement
payroll

001

Transaction ID : SB17-EX1068

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

[MEMO ITEM]

State: District:

Full Name (Last, First, Middle Initial)

C. TRAIL BLAZER

Mailing Address 620 Mendelssohn Ave. N. Suite 18

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

City	State	Zip Code
Golden Valley	MN	55427

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
license renewal

001

Transaction ID : SB17-EX1069

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

license renewal

State: District:

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

949.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Jeff Landry for Congress

Full Name (Last, First, Middle Initial)

A. Community 1st Bank (GENERAL)

Mailing Address 801 Alberston Parkway

City	State	Zip Code
Broussard	LA	70518

Purpose of Disbursement
bank fees for jan & feb

001

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17-EX1070

bank fees for jan & feb

Full Name (Last, First, Middle Initial)

B. Jeff Landry

Mailing Address P.O.Box 13816

City	State	Zip Code
New Iberia	LA	70562

Purpose of Disbursement

001

Candidate Name

Jeffrey Martin Landry

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

State: LA

District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17-EX1065

Administrative/Salary/Overhead Expenses

Full Name (Last, First, Middle Initial)

c. B L Landry

Mailing Address P.O. Box 990

City	State	Zip Code
Broussard	LA	70518

Purpose of Disbursement
accounting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) RUNOFF 2012

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17-EX1066

accounting

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

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

1309.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 8 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN1

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Jeffrey Landry

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

20000

Cumulative Payment To Date

7000.00

Balance Outstanding at Close of This Period

13000.00

TERMS

Date Incurred

M 12 / D 29 / Y 2009

Date Due

M 12 / D 31 / Y 2012

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

13000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 9 OF 15

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN2

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Jeffrey Landry

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000

.00

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 08 D

Y 2009 Y

M 12 M

D 08 D

Y 2012 Y

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 10 OF 15

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN3

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Jeffrey Landry

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3000

.00

3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M / D / Y
06 / 04 / 2010M / D / Y
09 / 12 / 2012M / D / Y
09 / 12 / 2012M / D / Y
09 / 12 / 2012M / D / Y
09 / 12 / 2012

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 11 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN5

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Jeffrey Landry

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

8000

5000.00

3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M / D / Y
09 / 19 / 2010M / D / Y
12 / 01 / 2011M / D / Y
09 / 19 / 2010M / D / Y
12 / 01 / 2011M / D / Y
09 / 19 / 2010M / D / Y
12 / 01 / 2011

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN6

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Jeffrey Landry

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

25000

Cumulative Payment To Date

24160.44

Balance Outstanding at Close of This Period

839.56

TERMS

Date Incurred

M / D / Y
10 / 19 / 2010

Date Due

M / D / Y
10 / 19 / 2012

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

839.56

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN7

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Jeffrey Landry

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

20000

Cumulative Payment To Date

18000.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M 01 / D 26 / Y 2011

Date Due

M 01 / D 26 / Y 2012

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN8

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Jeffrey Landry

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000

.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 02 /

D 02 /

Y 2012 Y

M 02 /

D 02 /

Y 2012 Y

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 15

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN10

Jeff Landry for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Jeffrey Landry

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

101 Arbor Ln

City

State

ZIP Code

New Iberia

LA

70563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

899

.00

899.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 01 / 2012M M / D D / Y Y Y Y
10 10 / 2012M M / D D / Y Y Y Y
10 10 / 2012

0.00

% (apr)

☐ Yes☒ No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

899.00

TOTALS This Period (last page in this line only)..... ►

28738.56

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