

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Defend Louisiana PAC

ADDRESS (number and street) **P.O. Box 44313**
 Check if different than previously reported. (ACC) **Baton Rouge LA 70804**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00616128 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 Year-End 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 **12 / 10 / 2016** in the State of **LA**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **10 / 20 / 2016** through **11 / 20 / 2016**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Townsend, Taylor, , ,
Type or Print Name of Treasurer _____

Signature of Treasurer Townsend, Taylor, , , [Electronically Filed] Date **01 / 30 / 2017**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Defend Louisiana PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="109586.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="260400.00"/>	<input type="text" value="522800.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="369986.07"/>	<input type="text" value="522800.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="260968.20"/>	<input type="text" value="413782.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="109017.87"/>	<input type="text" value="109017.87"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Defend Louisiana PAC

Report Covering the Period: From: / / To: / /

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).....	255225.00	511925.00
(ii) Unitemized	175.00	175.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	255400.00	512100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	9000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	260400.00	521100.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
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	1700.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	260400.00	522800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	260400.00	522800.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	51918.41	106438.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	51918.41	106438.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	209049.79	304643.72
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
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	2700.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2700.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	260968.20	413782.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	260968.20	413782.13

DETAILED SUMMARY PAGE
of Disbursements

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)	260400.00	521100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	2700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	260400.00	518400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	51918.41	106438.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	51918.41	106438.41

**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 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Defend Louisiana PAC

A. American Electric Power
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 24400
 City Canton State OH Zip Code 44701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **11 / 16 / 2016**
Transaction ID : SA11AI.5277
 Amount of Each Receipt this Period **5000.00**
 Memo Item

B. Bain, Troy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 Dunoreland Circle
 City Shreveport State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11AI.4922
 Amount of Each Receipt this Period **1000.00**
 Memo Item

C. Bancorp South
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1768
 City Shreveport State LA Zip Code 71166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt **11 / 04 / 2016**
Transaction ID : SA11AI.4965
 Amount of Each Receipt this Period **2000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**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 7 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
Defend Louisiana PAC

A. Brown, B. Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8610 Glenhaven Dr.
 City Shreveport State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brown Builders Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11AI.4945
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Brown, B. Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8610 Glenhaven Dr.
 City Shreveport State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brown Builders Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 17 / 2016**
Transaction ID : SA11AI.5252
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. Cameron Telephone Company LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 167
 City Sulphur State LA Zip Code 70664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **11 / 18 / 2016**
Transaction ID : SA11AI.5304
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

**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 8 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
Defend Louisiana PAC

A. Campbell, Howell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1447 Boardwalk Place
 City Gallatin State TN Zip Code 37066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 15 / 2016
Transaction ID : SA11AI.4974
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Campbell, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12019 Kemps Mill Rd.
 City Williamsport State MD Zip Code 21795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spine Institute of LA Occupation (for Individual) Neurosurgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11AI.4935
 Amount of Each Receipt this Period 6500.00
 Memo Item

C. Carmouche, Donald, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17405 Perkins Road
 City Baton Rouge State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Talbot, Carmouche Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11AI.4896
 Amount of Each Receipt this Period 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	34000.00
TOTAL This Period (last page this line number only).....	

**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 9 OF 33
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Defend Louisiana PAC

A. Carmouche, Donald, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17405 Perkins Road
 City Baton Rouge State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Talbot, Carmouche Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11AI.4950
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. Cleco LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 5000
 City Pineville State LA Zip Code 71361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11AI.4924
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Cox, Cox, Filo, Camel & Wilson LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 Broad St.
 City Lake Charles State LA Zip Code 70601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 16 / 2016
Transaction ID : SA11AI.4970
 Amount of Each Receipt this Period 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45000.00
TOTAL This Period (last page this line number only)..... ▶

**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 10 OF 33
	<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	

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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Cox, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 723 Broad Street
 City Lake Charles State LA Zip Code 70601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cox, Cox, Filo, Camel & Wilson Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11AI.4927
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. CP-Tel
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 777
 City Natchitoches State LA Zip Code 71458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 11 / 17 / 2016
Transaction ID : SA11AI.5256
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Cravins Trosclair APLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Drawer 1149
 City Opedlousas State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11AI.4901
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

**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 11 OF 33
	<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	

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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Davison, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 Loblolly Lane
 City Choudrant State LA Zip Code 71227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Davison Transport Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2525.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11AI.4909
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Domengeaux Wright Roy
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3668
 City Lafayette State LA Zip Code 70502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11AI.4925
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. EnergyCoast
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 Citi Place
 City Baton Rouge State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11AI.4910
 Amount of Each Receipt this Period 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30025.00
TOTAL This Period (last page this line number only).....	

**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 12 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
Defend Louisiana PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Engineering & Technical Services LLC

Mailing Address 17237 Joe Sevario Rd.

City Prairieville	State LA	Zip Code 70769
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period
5900.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gladstone, Jones, , ,

Mailing Address 601 Poydras Street Suite 2655

City New Orleans	State LA	Zip Code 70130
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11AI.4921

Amount of Each Receipt this Period
10000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Gordon McKernan Injury Attorneys LLC

Mailing Address 5656 Hilton Ave.

City Baton Rouge	State LA	Zip Code 70808
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11AI.4963

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	17900.00
TOTAL This Period (last page this line number only).....▶	

**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 13 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
Defend Louisiana PAC

A. Grant Farms
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4333 Shreveport Hwy.

City Pineville	State LA	Zip Code 71360
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period
2500.00

Memo Item

B. Gregorio, Sam, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7600 Fern Ave.
Bldg. 700

City Shreveport	State LA	Zip Code 71105
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Gregorio, Chafin & Johnson Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : SA11AI.4937

Amount of Each Receipt this Period
5000.00

Memo Item

C. Guillory, Mark, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 504

City Eunice	State LA	Zip Code 70535
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Guillory Construction Owner

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2016

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

**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 15 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Jones, Ted, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8941 Jefferson Hwy
 Ste. 200
 City Baton Rouge State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **15000.00**

Date of Receipt **10 / 28 / 2016**
Transaction ID : SA11AI.4912
 Amount of Each Receipt this Period **15000.00**
 Memo Item

B. Jones Ponderosa LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2124 Fairfield Ave
 City Shreveport State LA Zip Code 71104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11AI.4943
 Amount of Each Receipt this Period **5000.00**
 Memo Item

C. Jones Walker LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 St. Charles Ave
 City New Orleans State LA Zip Code 70170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 07 / 2016**
Transaction ID : SA11AI.4948
 Amount of Each Receipt this Period **1000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	21000.00
TOTAL This Period (last page this line number only).....	

**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 16 OF 33
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Defend Louisiana PAC

A. Littleton Truck
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7106 Cypress St.

City West Monroe	State LA	Zip Code 71291
---------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	17	/	2016

Transaction ID : SA11AI.5086

Amount of Each Receipt this Period
300.00

Memo Item

B. McNew, Jeff, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Balboa Dr.

City Monroe	State LA	Zip Code 71203
----------------	-------------	-------------------

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

Name of Employer (for Individual) L&R	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period
5000.00

Memo Item

C. Merrill Lynch
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 43247

City Jacksonville	State FL	Zip Code 32231
----------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	17	/	2016

Transaction ID : SA11AI.5296

Amount of Each Receipt this Period
14000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	19300.00
TOTAL This Period (last page this line number only).....▶	

**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 17 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Morrison, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 846 Erie Street
 City Shreveport State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Quality M Transport Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11AI.4893
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Palm Investments LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 4825
 City Monroe State LA Zip Code 71203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11AI.4914
 Amount of Each Receipt this Period 15000.00
 Memo Item

C. Robin & Associates
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81125 Highway 129
 City Covington State LA Zip Code 70435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11AI.4939
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	19500.00
TOTAL This Period (last page this line number only).....▶	

**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 18 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Roy Hendrick A.I.A Architecture

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17372 Hwy. 16

City Amite	State LA	Zip Code 70422
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11AI.4929

Amount of Each Receipt this Period
2000.00

Memo Item

B. Skrivanos, Stephen, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 1492

City Shreveport	State LA	Zip Code 71164
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Skrivanos Engineering	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2016

Transaction ID : SA11AI.5251

Amount of Each Receipt this Period
1500.00

Memo Item

C. Southern Telcom Consultants, LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7266 Tom Drive Suite 200

City Baton Rouge	State LA	Zip Code 70806
---------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2016

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

**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 19 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Stevens, Kamari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1734 Summit St.
 Apt. B4
 City Columbus State OH Zip Code 43201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11AI.4933
 Amount of Each Receipt this Period 3500.00
 Memo Item

B. Ted B. Lyon & Associates
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18601 LBJ Freeway
 Suite 525
 City Mesquite State TX Zip Code 75150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11AI.4891
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. The 546 Company
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 546 Carondelet St.
 City New Orleans State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 18 / 2016
Transaction ID : SA11AI.4978
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

**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 20 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Triple E Farms
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3464 Hwy 29 South
 City Bunkie State LA Zip Code 71322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11AI.4951
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Unite Here Tip Campaign Committee
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 7th Ave
 16th Floor
 City New York State NY Zip Code 10001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2016
Transaction ID : SA11AI.5273
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Veron, Bice, Palmero & Wilson LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2125
 City Lake Charles State LA Zip Code 70602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11AI.4941
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
TOTAL This Period (last page this line number only).....▶	

**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 21 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Defend Louisiana PAC

A. Waguespack, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 250
 City Napoleonville State LA Zip Code 70390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2016
Transaction ID : SA11AI.4903
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Whitehead Law Firm
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11909 Bricksome Ave Suite W-3
 City Baton Rouge State LA Zip Code 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016
Transaction ID : SA11AI.4931
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	255225.00

**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 22 OF 33
<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)
Defend Louisiana PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

Mailing Address 8712 HWY 23

City BELLE CHASSE	State LA	Zip Code 70037
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FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	16	/	2016

Transaction ID : SA11C.4968

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
Defend Louisiana PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4959

Amount of Each Disbursement this Period: 106.11

Memo Item

B. BOLD

Full Name (Last, First, Middle Initial)

Mailing Address 1746 Jackson Ave

City New Orleans State LA Zip Code 70115

Purpose of Disbursement Community Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4886

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. JDE Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 725 Lettsworth Street

City Baton Rouge State LA Zip Code 70802

Purpose of Disbursement Community Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4888

Amount of Each Disbursement this Period: 20000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 30106.11

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"/> 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)
Defend Louisiana PAC

Full Name (Last, First, Middle Initial)

A. NOEL

Mailing Address P.O. Box 58248

City New Orleans State LA Zip Code 70158

Purpose of Disbursement
Community Outreach

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 08 / 2016

FEC Identification Number

Transaction ID : SB21B.4887
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TIPS

Mailing Address 1517 Harrison Ave.

City New Orleans State LA Zip Code 70119

Purpose of Disbursement
Community Outreach

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 08 / 2016

FEC Identification Number

Transaction ID : SB21B.4885
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TIPS

Mailing Address 1517 Harrison Ave.

City New Orleans State LA Zip Code 70119

Purpose of Disbursement
Community Outreach

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 10 / 2016

FEC Identification Number

Transaction ID : SB21B.4962
Amount of Each Disbursement this Period

Memo Item

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

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"/> 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)
Defend Louisiana PAC

A. WWLTV

Full Name (Last, First, Middle Initial)

Mailing Address 1024 N. Rampart St.

City New Orleans State LA Zip Code 70116

Purpose of Disbursement Website Design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4960

Amount of Each Disbursement this Period: 597.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	597.00
TOTAL This Period (last page this line number only).....▶	41703.11

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00616128 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Alegra Printing			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address 1115 Pierremont Rd.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>		
City Shreveport	State LA	Zip Code 71106			
Purpose of Expenditure Printing Literature		Category/Type 004	Transaction ID : SE.4339 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: CAMPBELL, FOSTER LONNNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought 198893.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item APAC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address P.O. Box 50730			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>		
City New Orleans	State LA	Zip Code 70150			
Purpose of Expenditure Community Outreach		Category/Type 003	Transaction ID : SE.4332 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: CAMPBELL, FOSTER LONNNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought 178393.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">11000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Townsend, Taylor, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
01 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ C C00616128
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee BOLD <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1746 Jackson Ave	Amount <input type="text"/> 6000.00 Transaction ID : SE.4265 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code New Orleans LA 70115	
Purpose of Expenditure Community outreach/Canvassing Category/Type <input type="text"/> 004	
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 147893.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee BOLD <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1746 Jackson Ave	Amount <input type="text"/> 6000.00 Transaction ID : SE.4349 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code New Orleans LA 70115	
Purpose of Expenditure Community outreach Category/Type <input type="text"/> 004	
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 257090.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 12000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Townsend, Taylor, , ,

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Date

/ /

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Defend Louisiana PAC
FEC IDENTIFICATION NUMBER
C C00616128

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Jefferson United
Mailing Address: 1901 Manhattan Blvd. Suite 203
City: Harvey State: LA Zip Code: 70058
Purpose of Expenditure: Community outreach
Category/Type: 004
Date of Public Distribution/Dissemination: 10/31/2016
Amount: 10000.00
Transaction ID: SE.4353
Date of Disbursement or Obligation: 10/31/2016

Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, ,
Support Oppose
Office Sought: House Senate State: LA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee: LIFE
Mailing Address: 3720 Hessmer Ave
City: Metairie State: LA Zip Code: 70002
Purpose of Expenditure: Community Outreach
Category/Type: 003
Date of Public Distribution/Dissemination: 10/27/2016
Amount: 7500.00
Transaction ID: SE.4334
Date of Disbursement or Obligation: 10/27/2016

Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, ,
Support Oppose
Office Sought: House Senate State: LA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 17500.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00616128 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item NOEL	Date of Public Distribution/Dissemination 10 / 27 / 2016			
Mailing Address P.O. Box 58248	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2500.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City New Orleans</td> <td style="width:17%; border-bottom: 1px solid black;">State LA</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 70158</td> </tr> </table>		City New Orleans	State LA	Zip Code 70158
City New Orleans		State LA	Zip Code 70158	
Purpose of Expenditure Community Outreach				
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>LA</u>			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
<div style="border: 1px solid black; padding: 2px; width: 150px;">188393.93</div>				

Full Name of Payee <input type="checkbox"/> Memo Item NOEL	Date of Public Distribution/Dissemination 10 / 31 / 2016			
Mailing Address P.O. Box 58248	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City New Orleans</td> <td style="width:17%; border-bottom: 1px solid black;">State LA</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 70158</td> </tr> </table>		City New Orleans	State LA	Zip Code 70158
City New Orleans		State LA	Zip Code 70158	
Purpose of Expenditure Community outreach				
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>LA</u>			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
<div style="border: 1px solid black; padding: 2px; width: 150px;">266090.52</div>				

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">7500.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Townsend, Taylor, , ,

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Date

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00616128 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item OPDEC/ Mele Printing	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 22 / 2016 </div>
Mailing Address 5801 Waterford Blvd	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 25000.00 </div> Transaction ID : SE.4267 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 22 / 2016 </div>
City State Zip Code New Orleans LA 70127	
Purpose of Expenditure Printing Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CAMPBELL, FOSTER LONNNIE II, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 172893.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Campaign Network	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
Mailing Address 140 Bayswater Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 52196.59 </div> Transaction ID : SE.4341 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>
City State Zip Code Boston MA 02128	
Purpose of Expenditure Mail and Robocalls Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CAMPBELL, FOSTER LONNNIE II, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 251090.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 77196.59 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 77196.59 </div>

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Townsend, Taylor, , ,

[Electronically Filed]

Date

 / /
 01 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ C C00616128
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee The Campaign Network <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 140 Bayswater Street	Amount <input type="text"/>
City Boston State MA Zip Code 02128	28553.20
Purpose of Expenditure Mail production and postage Category/Type <input type="text"/> 004	Transaction ID : SE.4360 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 304643.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee TIPS <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1517 Harrison Ave.	Amount <input type="text"/>
City New Orleans State LA Zip Code 70119	4000.00
Purpose of Expenditure Community outreach/Canvassing Category/Type <input type="text"/> 004	Transaction ID : SE.4251 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CAMPBELL, FOSTER LONNIE II, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 120293.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 32553.20
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Townsend, Taylor, , ,

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Defend Louisiana PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00616128 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item TIPS	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1517 Harrison Ave.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 4000.00 </div>
City State Zip Code New Orleans LA 70119	Transaction ID : SE.4350 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure Community outreach	Category/Type 004
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CAMPBELL, FOSTER LONNNIE II, , ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought 261090.52	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item United Ballot PAC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 113 Alfred Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5000.00 </div>
City State Zip Code Lafayette LA 70151	Transaction ID : SE.4337 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure Community Outreach	Category/Type 003
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CAMPBELL, FOSTER LONNNIE II, , ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought 193393.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 9000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 209049.79 </div>

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01 / 30 / 2017

Signature