

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Louisiana Reform PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">16187.78</td></tr></table>	16187.78
Y	Y	Y	Y									
2	0	0	8									
16187.78												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">16187.78</td></tr></table>	16187.78										
16187.78												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">16634.49</td></tr></table>	16634.49	<table border="1" style="width: 100%;"><tr><td align="right">16634.49</td></tr></table>	16634.49								
16634.49												
16634.49												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">32822.27</td></tr></table>	32822.27	<table border="1" style="width: 100%;"><tr><td align="right">32822.27</td></tr></table>	32822.27								
32822.27												
32822.27												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">22233.62</td></tr></table>	22233.62	<table border="1" style="width: 100%;"><tr><td align="right">22233.62</td></tr></table>	22233.62								
22233.62												
22233.62												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">10588.65</td></tr></table>	10588.65	<table border="1" style="width: 100%;"><tr><td align="right">10588.65</td></tr></table>	10588.65								
10588.65												
10588.65												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">.00</td></tr></table>	.00										
.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">.00</td></tr></table>	.00										
.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
Louisiana Reform PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	16000.00	16000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	16000.00	16000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16000.00	16000.00
12. Transfers From Affiliated/Other Party Committees00	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)	634.49	634.49
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	0.00
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 Transfer (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))	16634.49	16634.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16634.49	16634.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	21733.62	21733.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	21733.62	21733.62
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 Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	500.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	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))..	22233.62	22233.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22233.62	22233.62

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)	16000.00	16000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16000.00	16000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21733.62	21733.62
37. Offsets to Operating Expenditures (from Line 15, page 3)	634.49	634.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21099.13	21099.13

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 / 14
	<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	

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)
Louisiana Reform PAC

A.	Full Name (Last, First, Middle Initial) William Walters	Date of Receipt MM / DD / YYYY 02 / 05 / 2008
	Mailing Address 1685 Hunting Creek Drive	Transaction ID: SA11AI-336-493-c
	City State Zip Code Alexandria VA 22314-6220	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Pac Contribution
	Name of Employer Occupation Acute Long Term Hosp Assoc CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Wade Webster	Date of Receipt MM / DD / YYYY 01 / 29 / 2008
	Mailing Address 4614 Carondelet Street	Transaction ID: SA11AI-180-495-c
	City State Zip Code New Orleans LA 70115-4822	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Middleberg, Riddle & Gian- na Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) William Ulm, Sr.	Date of Receipt MM / DD / YYYY 03 / 07 / 2008
	Mailing Address 1240 Ramser Drive	Transaction ID: SA11AI-335-492-c
	City State Zip Code Bogart GA 30622-2472	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation ULM Services, Inc. Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

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: PAGE 7 / 14	
	(check only one)	
<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)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial) Patrick Waring		Date of Receipt																				
Mailing Address 223 Focis Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
City	State	Zip Code																				
Metairie	LA	70005-3431																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI-337-494-c																				
C		Amount of Each Receipt this Period																				
		3500.00																				
Name of Employer Self Employed	Occupation Physician	PAC Contribution																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																					
	3500.00																					

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	16000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial) Bestbuy		Date of Receipt	
Mailing Address PO Box 9312		M M / D D / Y Y Y Y 03 / 17 / 2008	
City	State	Zip Code	Transaction ID: SA15-339-520-e
Minneapolis	MN	55440-9312	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		634.49	
Name of Employer	Occupation	Computer Equipment Returned	
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		634.49	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	634.49
TOTAL This Period (last page this line number only)	▶	634.49

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.	Full Name (Last, First, Middle Initial) CompleteCampaigns.com	Transaction ID: SB21B-164-511-e Date of Disbursement
	Mailing Address 610 Gateway Center Way Suite K	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City San Diego State CA Zip Code 92102-4548	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly service fee Candidate Name	<input type="text" value="350.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Monica Schmidt	Transaction ID: SB21B-165-503-e Date of Disbursement
	Mailing Address 10010 Winding Ridge Drive	<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Shreveport State LA Zip Code 71106-7684	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly admin fee Candidate Name	<input type="text" value="250.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kapitol Kidders	Transaction ID: SB21B-340-510-e Date of Disbursement
	Mailing Address 2900 Clearview Parkway Suite 206	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Metairie State LA Zip Code 70006-6532	Amount of Each Disbursement this Period
	Purpose of Disbursement Washington Mardi Gras-no candidate benefited Candidate Name	<input type="text" value="7600.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8200.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 10 / 14

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.	Full Name (Last, First, Middle Initial) Bestbuy	Transaction ID: SB21B-339-507-e
	Mailing Address PO Box 9312	Date of Disbursement MM / DD / YYYY 02 / 27 / 2008
	City Minneapolis State MN Zip Code 55440-9312	Amount of Each Disbursement this Period 667.26
	Purpose of Disbursement Computer Equipment Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Monica Schmidt	Transaction ID: SB21B-165-499-e
	Mailing Address 10010 Winding Ridge Drive	Date of Disbursement MM / DD / YYYY 01 / 06 / 2008
	City Shreveport State LA Zip Code 71106-7684	Amount of Each Disbursement this Period 266.25
	Purpose of Disbursement Monthly admin fee + postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Monica Schmidt	Transaction ID: SB21B-165-509-e
	Mailing Address 10010 Winding Ridge Drive	Date of Disbursement MM / DD / YYYY 03 / 05 / 2008
	City Shreveport State LA Zip Code 71106-7684	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Monthly admin fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1183.51
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 11 / 14

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

<p>A. Full Name (Last, First, Middle Initial) Dotster, Inc.</p> <p>Mailing Address PO Box 821066</p> <p>City Vancouver State WA Zip Code 98682-0024</p> <p>Purpose of Disbursement Computer help</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-341-512-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="216.30"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Monthly service fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-164-501-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Monthly service fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-164-497-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="350.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="916.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.	Full Name (Last, First, Middle Initial) Courtney Guastella	Transaction ID: SB21B-103-500-e Date of Disbursement
	Mailing Address 7449 Garfield Street	<input type="text" value="01"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City New Orleans State LA Zip Code 70118-3636	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly retainer - no candidate benefited Candidate Name	<input type="text" value="3500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Courtney Guastella	Transaction ID: SB21B-103-502-e Date of Disbursement
	Mailing Address 7449 Garfield Street	<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City New Orleans State LA Zip Code 70118-3636	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly retainer - no candidate benefited Candidate Name	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Courtney Guastella	Transaction ID: SB21B-103-508-e Date of Disbursement
	Mailing Address 7449 Garfield Street	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City New Orleans State LA Zip Code 70118-3636	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly retainer - no candidate benefited Candidate Name	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 14

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

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)
Louisiana Reform PAC

A.	Full Name (Last, First, Middle Initial) Bestbuy	Transaction ID: SB21B-339-506-e Date of Disbursement 02 / 08 / 2008
	Mailing Address PO Box 9312	Amount of Each Disbursement this Period 1487.86
	City Minneapolis State MN Zip Code 55440-9312	
	Purpose of Disbursement Computer Equipment Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB21B-344-515-e Date of Disbursement 03 / 24 / 2008
	Mailing Address PO Box 619612	Amount of Each Disbursement this Period 243.50
	City Dfw Airport State TX Zip Code 75261-9612	
	Purpose of Disbursement MCO-MSY-Orlando Event-no candidate benefited Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bestbuy	Transaction ID: SB21B-339-517-e Date of Disbursement 03 / 20 / 2008
	Mailing Address PO Box 9312	Amount of Each Disbursement this Period 634.49
	City Minneapolis State MN Zip Code 55440-9312	
	Purpose of Disbursement Computer Equipment Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2365.85
TOTAL This Period (last page this line number only)	21165.66

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

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

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Hunter Carter

Transaction ID: SB29-343-514-e
Date of Disbursement

Mailing Address PO Box 2

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	0	8

City Greensburg State LA Zip Code 70441-0002

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Campaign Contribution

011
Category/ Type

Candidate Name
Hunter Carter

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

500.00
