04/15/2010 09:03

Image# 10930567639

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An A	Autnorizea Comm	ittee	Office Use	Only
	USE FEC MAILING LABI OR TYPE OR PRINT	EL Example:If typi over the lines	ng, type		
Louisiana Values PAC		1 1 1 1 1 1 1 1			
ADDRESS (number and street)	PO Box 325				
Check if different than previously reported. (ACC)	Minden			LA 710	058
2. FEC IDENTIFICATION NUME	BER ₩	CITY 🛕	SI	ΓΑΤΕ Α Ζ	ZIPCODE 🛕
C00466904	3	S. IS THIS X	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report(Q1) July 15 Quarterly Report(Q2) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE)	(c) 12-Day PRE-Election Report for the	Primary (1	2P)	General (12G) Special (12G)	Runoff (12R) in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)	Post -Election Report for the		90G)		Special (30S) in the State of
5. Covering Period 0 1	01 2010	through	0 3	31 2010	
I certify that I have examined this Re Type or Print Name of Treasurer	eport and to the best of my Abby Varnadore	y knowledge and belief it	is true, correct ar	d complete.	
Signature of Treasurer Electroni	cally Filed by Abby Var	nadore	Dat	te 04 15	2010
NOTE : Submission of false, errone	eous, or incomplete inform	nation may subject the pe	erson signing this	Report to the penalties o	of 2 U.S.C 437g.
Office Use					FORM 3X

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/15

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Louisiana Values PAC D " D 2010 0 1 0 1 2010 0.3 31 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 6799.93 January 1 (b) Cash on Hand at 6799.93 Begining of Reporting Period 12700.00 12700.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 19499.93 19499.93 6(a) and 6(c) for Column B) 13353.43 13353.43 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 6146.50 6146.50 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 06/2004) 3 / 15

Write or Type Committee Name Louisiana Values PAC

Report Covering the Period:

From: 0 1

D D 0

2010

o. 03

D D 3 1

Y Y Y Y 2 0 1 0

I. Receip	ts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than (a) Individuals/Persons			
Than Political Comm (i) Itemized (use S	nittees chedule A)	5550.00	5550.00
(ii) Unitemized		0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) ar	nd (ii)	5550.00	5550.00
(b) Political Party Comm		0.00	0.00
(c) Other Political Communication(such as PACs)(d) Total Contributions		5500.00	5500.00
11(a)(iii),(b) and (c)) Totals to Line 33, pa		11050.00	11050.00
12. Transfers From Affiliated Party Committees		0.00	0.00
13. All Loans Received		0.00	0.00
 Loan Repayments Received Offsets To Operating Exp 		0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, 16. Refunds of Contributions		1650.00	1650.00
to Federal candidates and Political Committees	d Other	0.00	0.00
 Other Federal Receipts (Dividends, Interest, etc.) 		0.00	0.00
18. Transfers from Non-Fede			
(a) Non-Federal Account (from Schedule H3)		0.00	0.00
(b) Levin Funds (from Sc	hedule H5)	0.00	0.00
(c) Total Transfer (add 18	3(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 12, 13, 14, 15, 16, 17, an	1 /	12700.00	12700.00
20. Total Federal Receipts (subtract Line 18(c) from	Line 19)	12700.00	12700.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 15

	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)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	11050.10	11050.10
	Expenditures	11353.43	11353.43
	(c) Total Operating Expenditures	11050.10	11050.40
_	(add 21(a)(i), (a)(ii) and (b))	11353.43	11353.43
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	2000.00	2000.00
1.	Independent Expenditure		
	(use Schedule E)	0.00	0.00
j.	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
6.	Loan Repayments Made	0.00	0.00
_		0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
Ο.	(a) Individuals/Persons Other	0.00	0.00
	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
9.	Other Disbursements	0.00	0.00
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13353.43	13353.43
	Total Federal Disbursements		
2.			
2.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 15

	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)	11050.00	11050.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	11050.00	11050.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11353.43	11353.43
37.	Offsets to Operating Expenditures (from Line 15, page 3)	1650.00	1650.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	9703.43	9703.43

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Louisiana Values PAC		
<u></u>	Full Name (Last, First, Middle Initial) Helen Black		Date of Receipt
	Mailing Address 3406 Fox Run Circle		01 26 2010
	City	State Zip Code	Transaction ID: SA11AI.4169
	Haughton	LA 71037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer ElDorado Resorts Casino	Occupation Director of Community Developmen	-
	Shreve Receipt For:	Aggregate Year-to-Date ▼	t
	Primary General Other (specify) ▼	300.00	
	Full Name (Last, First, Middle Initial) Dr. Josephine Futrell		Date of Receipt
	Mailing Address 10875 Belle Cour Wa	ay	0 1 2 6 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.4167
	Shreveport	LA 71106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2000.00
	Name of Employer Ark-La-Tex Dermatology	Occupation Dermatologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00	
	Full Name (Last, First, Middle Initial) Margaret Shehee		Date of Receipt
	Mailing Address 7717 Creswell Road	NBR 25	0 1 1 4 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.4153
	Shreveport	LA 71106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Kilpatrick Life Insurance Comp	Occupation Insurance Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
Г			2800.00

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 15 (check only one) X
or for commerc	ial purposes, other than using the	statements may name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	COMMITTEE (In Full) Values PAC			
Full Name (Virginia Shel				Date of Receipt
	ress Post Office Box 88		7: 0 1	01 14 2010
City <u>Shrevepo</u> i	rt	State LA	Zip Code 71161	Transaction ID: SA11AI.4151 Amount of Each Receipt this Period
FEC ID nun	nber of contributing ical committee.	C		500.00
Name of En Kilpatrick Li Comp	nployer fe Insurance	Occupation Chair of the	n the Board	
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 500.00	
B. Katherine Sr				Date of Receipt
Mailing Add	ress 3540 Rue du Lac			01 06 7 4 4 4
City		State	Zip Code	Transaction ID: SA11AI.4144
	nber of contributing ical committee.	C	71107	Amount of Each Receipt this Period 250.00
Name of En Self	nployer	Occupation Nurse	n	
Receipt For			e Year-to-Date ▼	
Prima Other	ry	0 0	250.00	
Full Name (Steve White	Last, First, Middle Initial)			Date of Receipt
Mailing Add	ress 4830 Line Avenue #13	5		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	v+	State LA	Zip Code	Transaction ID: SA11AI.4155
	nber of contributing ical committee.	C	71106	Amount of Each Receipt this Period 2000.00
Name of En	nployer ted	Occupation info requi		
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 2000.00	
SUBTOTAL o	of Receipts This Page (optional)	1		2750.00
	Period (last page this line number		<u> </u>	5550.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 / 15
	•		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
	Any information copied from such Reports and State or for commercial purposes, other than using the n	atements may	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Louisiana Values PAC			
Α.	Full Name (Last, First, Middle Initial) ARPAC			Date of Receipt
	Mailing Address 401 9th Street NW Suite 610 South			0 1 1 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11C.4158
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C coo	0226472	500.00
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL POLITICAL ACT	ION COMMIT	TEE	Date of Receipt
	Mailing Address 101 Constitution Ave. N' Suite 500 West	W		03 / 31 / 2010
	City	State	Zip Code	Transaction ID: SA11C.4196
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C coo	0096156	5000.00
	Name of Employer	Occupation	n	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General	' '	5000.00	
	Other (specify)			

SUBTOTAL of Receipts This Page (optional)	•	5500.00
TOTAL This Period (last page this line number only)	•	5500.00

CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 / 15									
ITEMIZED RECEIPTS	-,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 X 15 16 17									
Any information copied from such Reports at or for commercial purposes, other than using												
NAME OF COMMITTEE (In Full)												
Louisiana Values PAC												
Full Name (Last, First, Middle Initial) Hilton Hotels			Date of Receipt									
Mailing Address 1919 Connecticut A	Ave., NW		02 19 2010									
City	State	Zip Code	Transaction ID: SA15.4201									
Washington	DC	20009	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		1650.00									
Name of Employer	Occupatio	n	Refund for Overpayment for Lodging									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1650.00	7									

SUBTOTAL of Receipts This Page (optional)	>	1650.00
TOTAL This Period (last page this line number only)	•	1650.00

В.

C.

00UEDU E D /EE0 E 0V)			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	s and address of any pointed		
Louisiana Values PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4145
American Airlines			Date of Disbursement
Mailing Address 4255 Amon Carter Blvd.	MD 2400		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 7 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code		Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement	TX 76155		562.80
Plane Ticket			
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	
Senate Stagnic	Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) American Airlines			Transaction ID: SB21B.4147 Date of Disbursement
1			M M / D D / Y Y Y Y
Mailing Address 4255 Amon Carter Blvd.	MD 2400		01 07 2010
,	State Zip Code		Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement	TX 76155		719.80
Plane Ticket			
Candidate Name		Category/ Type	
9 🗎 –	ement For:		
Senate President	Primary General Other (specify) ▼		
State: District:	, (1 <i>)</i> / \		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4187
JOHN CALVIN JR. C. FLEMING, Jr.			Date of Disbursement
Mailing Address P.O. Box 1236			$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 5 \\ 0 & 1 & 5 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 & 1 \\ 0 & 2 & 0 & 1 & 0 \end{bmatrix}$
City Minden	State Zip Code LA 71058		Amount of Each Disbursement this Period
Purpose of Disbursement	71000		1025.39
Lodging Reimbursement			
Candidate Name		Category/ Type	
Office Sought: X House Disburse	ement For:	. ,,,,	
Senate	Primary General		
State: LA District: 04	Other (specify)		
State. Di Biotriot. 07			
SUBTOTAL of Disbursements This Page (optional)			2307.99

TOTAL This Period (last page this line number only)

	CHEDULE B (FEC Form 3X)	Use separat	e schedule(s)		_									15	
IT	EMIZED DISBURSEMENTS	for each cat Detailed Su	egory of the mmary Page	2	X :	21b 27	y one) 22 23 24 25 28a 28b 28c 29								
	ny Information copied from such Reports and Statem														S
	NAME OF COMMITTEE (In Full) Louisiana Values PAC		or any pontion o									3011	-		
	Full Name (Last, First, Middle Initial) Hilton Hotels										_		3.41	73	
	Mailing Address 1919 Connecticut Ave., N	٧W							′	^D 2	^D	/	Ž	0 1 (O Y
	City Washington		Cip Code 20009				Amo	ount (of E	ach	Disb	urse	-	-	
	Purpose of Disbursement Lodging												18	31.17	7
	Candidate Name			Cate	ego ype										
	Senate President	ement For: Primary Other (specif	General y) ▼												
	State: District: Full Name (Last, First, Middle Initial)						Tues			ın.		2011	2 44	75	
	Hilton Hotels						Date	of E		urse	men				V
	Mailing Address 1919 Connecticut Ave., N	١W							<u> </u>	້2	6	Ĺ	2	010	ט '
	City Washington		Zip Code 20009				Amo	ount o	of E	ach	Disb	urse	men	t this I	Period
	Purpose of Disbursement Lodging								_				15	55.66	5
	Candidate Name			Cate	ego ype	ry/									
	Senate President	ement For: Primary Other (specif	General ▼												
	State: District: Full Name (Last, First, Middle Initial) Hilton Hotels							sacte of E					3.41	76	
	Mailing Address 1919 Connecticut Ave., N	NW					o ^M 2	2 M	′	^D 0	1 1	/	Ž	0 1 (O Y
	City Washington		Zip Code 20009				Amo	ount (of E	ach	Disb	urse	men	t this I	Period
	Purpose of Disbursement Event Room Fee												21	09.25	5
	Candidate Name		Category/ Type												
	Senate President	ement For: Primary Other (specif	General y) ▼												
	State: District:														
١,	SUBTOTAL of Disbursements This Page (optional)					•		. —					549	96.08	3

В.

C.

age# 10930567650			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check onl	NUMBER: PAGE 12 / 15 y one) 22
	Detailed Summary Fage	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Louisiana Values PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4202
Hilton Hotels			Date of Disbursement
Mailing Address 1919 Connecticut Ave.,	NW		02 15 7 2010
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement	20003		1025.39
Reimbursement for Lodgin Candidate Name		Category/	
Candidate Name		Type	
Office Sought: House Disburs	ement For:		[MEMO ITEM]
Senate	Primary General		
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4200
Hilton Hotels			Date of Disbursement
Mailing Address 1919 Connecticut Ave.,	NW		02
City	State Zip Code		Amount of Each Disbursement this Period
Washington	DC 20009		
Purpose of Disbursement			33.95
Lodging Candidate Name		Category/	
		Type	
	ement For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Cirici (Specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4198
Martin's Wine & Spirits			Date of Disbursement
Mailing Address 1919 Florida Ave NW			$ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement	20009		554.43
Event Catering			
Candidate Name		Category/ Type	
Office Sought: House Disburs	ement For:		
Senate	Primary General		
President State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			588.38
(-			

TOTAL This Period (last page this line number only)

A.

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE	PAGE 13/15		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	rone) ☐ 22	□ 24 □	7 25	☐ 26	
	Detailed Suffilliary Fage	27	28a 28b	28c	29	30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	e and address of any political c	COMMITTILLE LO SOI	neit continbutions no	ili sucii con	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		
Louisiana Values PAC							
<u> </u>							
Full Name (Last, First, Middle Initial) Sondra Mott			Transaction ID: Date of Disburse		193		
			0 2 1		ž 0 1 0	Υ	
Mailing Address 1717 Conneticut Ave NW			0 2	3	2010		
City Washington	State Zip Code DC 20009		Amount of Each	Disburseme	nt this F	Period	
Purpose of Disbursement Reimbursement for Meals					542.14		
Candidate Name		Category/					
Office Sought: House Disburse	ment For:	Туре					
Senate	Primary General						
President State: District:	Other (specify)						
Full Name (Last, First, Middle Initial)			Transaction ID:	SB21B 4	195		
Sondra Mott			Date of Disburse	ment		_	
Mailing Address 1717 Conneticut Ave NW	1		0 3 0	2 / Y	ž 0 Ť 0	Y	
City	State Zip Code		Amount of Each	Disburseme	nt this F	eriod	
Washington	DC 20009			1	500.00		
Purpose of Disbursement Fundraising Consulting				13	300.00		
Candidate Name		Category/ Type					
°	ment For:						
Senate President	Primary General Other (specify) ▼						
State: District:	Caner (opening)						
Full Name (Last, First, Middle Initial) Regions Bank			Transaction ID: Date of Disburse		166		
Mailing Address 401 Main Street			01 2	^D / Y	ž o ž o	Y	
	State Zip Code		Amount of Each	Disburseme	nt this F	Period	
Minden	LA 70155				400.00		
Purpose of Disbursement Cash for Event Fees and Tips					100.00		
Candidate Name		Category/ Type					
	ment For:						
Senate President	Primary General Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)				24	42.14		
TOTAL This Period (last page this line number only)							
· · · · · · · · · · · · · · · · · · ·							

Image# 10930567652

State:

A.

District:

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER: PAGE 14 / 15 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 23 26 27 28a 28b 29 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 Values PAC Full Name (Last, First, Middle Initial) Transaction ID: SB21B.4191 Abby Varnadore Date of Disbursement 1 2 0 2 2010 Mailing Address 490 Sommersby Drive City State Zip Code Amount of Each Disbursement this Period Minden LA 71555 250.85 Purpose of Disbursement Meals Reimbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	250.85
TOTAL This Period (last page this line number only)	•	11085.44

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE (check only 21b 27)	NUMBER: PAGE 15 / 15 y one) 22
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Louisiana Values PAC	, , , , , , , , , , , , , , , , , , , ,	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) CHESTER T KELLEY FOR CONGRESS Mailing Address 4022 GREENWOOD RO	AD	Transaction ID: SB23.4182 Date of Disbursement O 2
7	itate Zip Code _A 71109 012 Category/ Type	Amount of Each Disbursement this Period 2000.00
Office Sought: X House Senate President State: LA District: 04 Disburser	* * * * * * * * * * * * * * * * * * * *	

		2000.00
SUBTOTAL of Disbursements This Page (optional)		2000.00
TOTAL This Period (last page this line number only)	•	2000.00