

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 228 Saint Charles Avenue  
Suite 1024  
 Check if different than previously reported. (ACC)  
New Orleans LA 70130

2. **FEC IDENTIFICATION NUMBER** C00144170  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Hans Sternberg  
Signature of Treasurer Electronically Filed by Hans Sternberg Date 08 24 2010

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		126756.08
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	126756.08									
(c) Total Receipts (from Line 19) .....	25197.30	25197.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	151953.38	151953.38								
7. Total Disbursements (from Line 31) .....	8737.50	8737.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	143215.88	143215.88								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

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) .....	21940.00	21940.00
(ii) Unitemized .....	2529.00	2529.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	24469.00	24469.00
(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) .....	24469.00	24469.00
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.) .....	728.30	728.30
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)) .....	25197.30	25197.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25197.30	25197.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	6737.50	6737.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6737.50	6737.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	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))..	8737.50	8737.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8737.50	8737.50

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	24469.00	24469.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24469.00	24469.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6737.50	6737.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6737.50	6737.50

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 19  
(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

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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Darryl Berger

Mailing Address 100 Conti Street

City State Zip Code  
New Orleans LA 70130

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

Name of Employer Occupation  
Darryl Berger Companies Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.4737

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. Dore Binder

Mailing Address 6417 Province Lane

City State Zip Code  
Baton Rouge LA 70808

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.4751

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Lisa Binder

Mailing Address 6417 Province Lane

City State Zip Code  
Baton Rouge LA 70808

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.4752

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**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 / 19
	<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)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Cahn	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address Post Office Box 52005	<b>Transaction ID:</b> SA11AI.4741
	City State Zip Code New Orleans LA 70152	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Dixie Mill Supply Co., Inc. Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Simon Davidson	Date of Receipt MM / DD / YYYY 03 / 24 / 2010
	Mailing Address 4107 Trent Lane	<b>Transaction ID:</b> SA11AI.4784
	City State Zip Code Lake Charles LA 70605	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Davidson LA, Inc. Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Diane Franco	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 809 Jefferson Highway	<b>Transaction ID:</b> SA11AI.4742
	City State Zip Code New Orleans LA 70121	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Professional Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5750.00
<b>TOTAL</b> 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 8 / 19  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Reuben Friedman

Mailing Address 993 Crystal Street

City State Zip Code  
New Orleans LA 70124

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2010

**Transaction ID:** SA11AI.4771

Amount of Each Receipt this Period  
375.00

**B.** Full Name (Last, First, Middle Initial)  
Dov Glazer

Mailing Address 3525 Prytania Street Suite 312

City State Zip Code  
New Orleans LA 70115

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2010

**Transaction ID:** SA11AI.4768

Amount of Each Receipt this Period  
1200.00

**C.** Full Name (Last, First, Middle Initial)  
Bill Goldring

Mailing Address 5101 St. Charles Avenue

City State Zip Code  
New Orleans LA 70170

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

Name of Employer Republic Beverage Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 19 / 2010

**Transaction ID:** SA11AI.4750

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2575.00**

**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 9 / 19

(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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
George Haas

Mailing Address 1750 St. Charles Avenue  
Apt. 544

City State Zip Code  
New Orleans LA 70130

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.4756

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
William Hess

Mailing Address 8 Garden Lane

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Occupation  
Self-Employed Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.4769

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Katz

Mailing Address 365 Canal Street  
Suite 2700

City State Zip Code  
New Orleans LA 70130

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.4777

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**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 / 19
	<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)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Herman Kohlmeyer	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 900 State Street	<b>Transaction ID:</b> SA11AI.4766
	City State Zip Code New Orleans LA 70118	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation A. G. Edwards & Sons Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Levy	Date of Receipt MM / DD / YYYY 01 / 04 / 2010
	Mailing Address 1214 Nashville Avenue	<b>Transaction ID:</b> SA11AI.4735
	City State Zip Code New Orleans LA 70115	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Lipsey	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 1 Lakewood Point Drive	<b>Transaction ID:</b> SA11AI.4779
	City State Zip Code Baton Rouge LA 70810	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Lipsey's Inc Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3300.00
<b>TOTAL</b> 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 11 / 19

(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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Manshel	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 7523 Garnet Street	<b>Transaction ID:</b> SA11AI.4774
	City State Zip Code New Orleans LA 70124	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self-Employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Murov	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 435 Forest Avenue	<b>Transaction ID:</b> SA11AI.4778
	City State Zip Code Shreveport LA 71104	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Furniture Rental Services, Inc	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) Ron Nierman	Date of Receipt MM / DD / YYYY 01 / 13 / 2010
	Mailing Address 246 Winterwood Drive	<b>Transaction ID:</b> SA11AI.4736
	City State Zip Code Shreveport LA 71106	Amount of Each Receipt this Period 365.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer A. A. Gilbert Pipe & Supply Co	Occupation Production Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

1465.00

**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 12 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Judy Roheim

Mailing Address 333 Lee Drive  
Apt. 331

City State Zip Code  
Baton Rouge LA 70808

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2010

**Transaction ID:** SA11AI.4772

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Paul Rosenblum

Mailing Address 2424 Edenborne Avenue  
Suite 108

City State Zip Code  
Metairie LA 70001

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

Name of Employer Self-Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2010

**Transaction ID:** SA11AI.4749

Amount of Each Receipt this Period  
1100.00

**C.** Full Name (Last, First, Middle Initial)  
Lester Shapiro

Mailing Address 225 Girod Street  
Apt. 303

City State Zip Code  
New Orleans LA 70130

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

Name of Employer Self-Employed Occupation Antique Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2010

**Transaction ID:** SA11AI.4782

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2350.00

**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 13 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Billy Sizeler

Mailing Address 6117 Annunciation Street

City State Zip Code  
New Orleans LA 70118

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

Name of Employer Occupation  
Sizeler Architects Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2010

**Transaction ID:** SA11AI.4783

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Donna Sternberg

Mailing Address 2375 Kleinert Avenue

City State Zip Code  
Baton Rouge LA 70806

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

Name of Employer Occupation  
Starmount Life Insurance Co Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2010

**Transaction ID:** SA11AI.4748

Amount of Each Receipt this Period  
625.00

**C.** Full Name (Last, First, Middle Initial)  
Hans Sternberg

Mailing Address 2375 Kleinert Avenue

City State Zip Code  
Baton Rouge LA 70806

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

Name of Employer Occupation  
Starmount Life Insurance Co Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2010

**Transaction ID:** SA11AI.4746

Amount of Each Receipt this Period  
625.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

**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 14 / 19
	(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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) Thomas Wahlder		Date of Receipt MM / DD / YYYY 02 / 19 / 2010
Mailing Address 1740 Jackson Street		<b>Transaction ID:</b> SA11AI.4753
City Alexander	State LA	Zip Code 71301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Marc Winston		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 629 S. Claiborne Avenue		<b>Transaction ID:</b> SA11AI.4770
City New Orleans	State LA	Zip Code 70113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Marco Outdoor Advertising	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	21940.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 19

(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"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
First NBC

Mailing Address 210 Baronne Street

City State Zip Code  
New Orleans LA 70112

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
253.35

Date of Receipt

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

Transaction ID: SA17.4788

Amount of Each Receipt this Period

253.35
--------

Interest Income

**B.**

Full Name (Last, First, Middle Initial)  
First NBC

Mailing Address 210 Baronne Street

City State Zip Code  
New Orleans LA 70112

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
468.76

Date of Receipt

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

Transaction ID: SA17.4787

Amount of Each Receipt this Period

215.41
--------

Interest Income

**C.**

Full Name (Last, First, Middle Initial)  
First NBC

Mailing Address 210 Baronne Street

City State Zip Code  
New Orleans LA 70112

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
728.30

Date of Receipt

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

Transaction ID: SA17.4789

Amount of Each Receipt this Period

259.54
--------

Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

728.30
--------

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

728.30
--------

**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 16 / 19

<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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lynda Ernest</p> <p>Mailing Address 228 Saint Charles Avenue Suite 1024</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Administrative Expenses</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4806</p> <p>Date of Disbursement MM / DD / YYYY 01 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1800.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lynda Ernest</p> <p>Mailing Address 228 Saint Charles Avenue Suite 1024</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Postage &amp; Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4808</p> <p>Date of Disbursement MM / DD / YYYY 01 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 184.48</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lynda Ernest</p> <p>Mailing Address 228 Saint Charles Avenue Suite 1024</p> <p>City New Orleans State LA Zip Code 70130</p> <p>Purpose of Disbursement Administrative Expenses</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4803</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 1800.00</p>

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

**3784.48**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ferdie's Printing Service	Transaction ID: SB21B.4800 Date of Disbursement 01 / 04 / 2010
	Mailing Address 3751 Spencer Street	Amount of Each Disbursement this Period 173.31
	City Harvey State LA Zip Code 70058	
	Purpose of Disbursement Printing Envelopes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ferdie's Printing Service	Transaction ID: SB21B.4809 Date of Disbursement 02 / 22 / 2010
	Mailing Address 3751 Spencer Street	Amount of Each Disbursement this Period 244.71
	City Harvey State LA Zip Code 70058	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB21B.4801 Date of Disbursement 03 / 08 / 2010
	Mailing Address IRS Service Center	Amount of Each Disbursement this Period 1359.00
	City Austin State TX Zip Code	
	Purpose of Disbursement Federal Tax	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1777.02
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Carol I Speer	Transaction ID: SB21B.4805 Date of Disbursement 01 / 04 / 2010
	Mailing Address 2044 Lake Hills Parkway	Amount of Each Disbursement this Period 500.00
	City Baton Rouge State LA Zip Code 70808	
	Purpose of Disbursement Administrative Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carol I Speer	Transaction ID: SB21B.4802 Date of Disbursement 03 / 31 / 2010
	Mailing Address 2044 Lake Hills Parkway	Amount of Each Disbursement this Period 500.00
	City Baton Rouge State LA Zip Code 70808	
	Purpose of Disbursement Administrative Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U. S. Postal Service	Transaction ID: SB21B.4804 Date of Disbursement 03 / 31 / 2010
	Mailing Address Main Branch	Amount of Each Disbursement this Period 176.00
	City New Orleans State LA Zip Code	
	Purpose of Disbursement Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1176.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6737.50</b>

**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 19 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF TREY GRAYSON	Transaction ID: SB23.4798 Date of Disbursement 03 / 05 / 2010
	Mailing Address PO BOX 175726	Amount of Each Disbursement this Period 1000.00
	City FT MITCHELL State KY Zip Code 41017	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) NITA LOWEY FOR CONGRESS	Transaction ID: SB23.4791 Date of Disbursement 02 / 09 / 2010
	Mailing Address PO Box 271	Amount of Each Disbursement this Period 1000.00
	City White Plains State NY Zip Code 10605	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2000.00

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

2000.00