

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

FRIENDS OF EDWIN W EDWARDS

ADDRESS (number and street)

7901 WRENWOOD BLVD

Check if different  
than previously  
reported. (ACC)

BATON ROUGE

LA

70809

2. FEC IDENTIFICATION NUMBER ▼

C

C00560268

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

LA

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2014

through

M M / D D / Y Y Y Y  
06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer RACHELLE MARKS

Signature of Treasurer

RACHELLE MARKS

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 15 / 2014

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 74

Write or Type Committee Name

**FRIENDS OF EDWIN W EDWARDS**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	177305.00	210476.42
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	177305.00	210476.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	63344.43	69134.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	63344.43	69134.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	141342.20	
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) .....	3121.42	

**For further information contact:**

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 74

Write or Type Committee Name

**FRIENDS OF EDWIN W EDWARDS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2014

To:

M M / D D / Y Y Y Y  
06 / 30 / 2014

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

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

161340.00

194261.42

(ii) Unitemized.....

7265.00

7515.00

(iii) TOTAL of contributions from individuals ▶

168605.00

201776.42

**(b) Political Party Committees.....**

0.00

0.00

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

8700.00

8700.00

**(d) The Candidate.....**

0.00

0.00

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

177305.00

210476.42

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

177305.00

210476.42

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 74

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	63344.43	69134.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	63344.43	69134.22

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	27381.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	177305.00
25. SUBTOTAL (add Line 23 and Line 24).....	204686.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	63344.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	141342.20

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 5 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	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)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

VERDI ADAM

A.

Mailing Address 9357 INTERLINE AVENUE

City

BATON ROUGE

State

LA

Zip Code

70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

G.E.C.

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4403

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ADVERTISING &amp; ENTERTAINING SERVICES LLC

B.

Mailing Address 173 SCHEXNAYDRE LN

City

DESTREHAN

State

LA

Zip Code

70047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2014

Transaction ID : SA11AI.4628

Amount of Each Receipt this Period

500.00

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

MARK R ANDERSEN

C.

Mailing Address PO BOX 183

City

ROSEDALE

State

LA

Zip Code

70772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2014

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period

500.00

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

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

3500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 6 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

ALEX L ANDRUS

Mailing Address 306 E NORTH ST

City

OPELOUSAS

State

LA

Zip Code

70570

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4349

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RICHARD E ARNOULT

Mailing Address 4909 HENICAN PL.

City

METAIRIE

State

LA

Zip Code

70003

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESSMAN/ENTREPRENEUR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RALPH ARTALL

Mailing Address PO BOX 534

City

MELVILLE

State

LA

Zip Code

71353

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMING

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4357

Amount of Each Receipt this Period

250.00

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

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

2250.00

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

PAGE 7 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**B&A INSURANCE AGENCY**

Mailing Address 4736 W. NAPOLEON AVE STE 300

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4606

Amount of Each Receipt this Period

250.00

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

**PETER BABIN III**

Mailing Address 68 INLET DR

City

SLIDELL

State

LA

Zip Code

70458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**DANIEL E BECNEL JR**

Mailing Address PO DRAWER H

City

RESERVE

State

LA

Zip Code

70084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : SA11AI.4288

Amount of Each Receipt this Period

1000.00

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

1550.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 8 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

JEFF BENHARD III

A.

Mailing Address PO BOX 212

City

PALMETTO

State

LA

Zip Code

71358

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BRUCE C BETZER

B.

Mailing Address 3129 BORE ST

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

340.00

Amount of Each Receipt this Period

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4620

Full Name (Last, First, Middle Initial)

LAVERNE K BIMAH

C.

Mailing Address 305 PRICE LANE

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THIBODAUX REGIONAL MEDICAL CENTEROccupation  
NURSE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period

300.00

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

550.00

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



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 9 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

RILEY J. BLANCHET

A.

Mailing Address PO BOX 289

City

ROSEDALE

State

LA

Zip Code

70772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RJ'S TRANSPORTATION, LLC

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JANET S BOLES

B.

Mailing Address 7323 BOCAGE BOULEVARD

City

BATON ROUGE

State

LA

Zip Code

70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JANET S-BOLES LAW FIRM

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

JOHN BREAU

C.

Mailing Address 2550 M STREET, NW

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PATTON BOGGS LLP

Occupation

SENIOR COUNSEL

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period

2600.00

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

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

5600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 10 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**JOHN BREAU**

Mailing Address 2550 M STREET, NW

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATTON BOGGS LLPOccupation  
SENIOR COUNSEL

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**BYRON BRIGGS**

Mailing Address 146 CAMELLIA DRIVE

City

OPELOUSAS

State

LA

Zip Code

70570

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4353

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**WILLIAM C BROADHURST**

Mailing Address 524 EAST 4TH STREET

City

CROWLEY

State

LA

Zip Code

70526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2014

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period

250.00

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

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

3350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 11 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

ANTHONY F BULTMAN IV

A.

Mailing Address PO BOX 4688

City

COVINGTON

State

LA

Zip Code

70434

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANTHONY F BULTMAN IV ARCHITECT

Occupation

ARCHITECT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		12		2014

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BRAD BURKE

B.

Mailing Address 4736 W NAPOLEON AVE  
STE 300

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ELYSIAN INSURANCE AGENCY LLC

Occupation

INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4604

Amount of Each Receipt this Period

250.00

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

GARY BURKE

C.

Mailing Address 4736 W. NAPOLEON AVE STE 300

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B&amp;A INSURANCE AGENCY

Occupation

INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4608

Amount of Each Receipt this Period

250.00

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

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

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

500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 12 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

RONALD G BURKE

Mailing Address 922 EVERGREEN DRIVE

City

GRETN A

State

LA

Zip Code

70053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ORLEANS PARISH CRIMINAL COURT

Occupation

MINUTE CLERK "L"

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KRYSTAL BUSHNELL

Mailing Address 1912 SUTHERLAND RD

City

LAKE CHARLES

State

LA

Zip Code

70611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J &amp; K TRUCKING LLC

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		21		2014

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PETER A BUSINELLE

Mailing Address 641 79 PINES LN

City

MORGAN CITY

State

LA

Zip Code

70380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		28		2014

Transaction ID : SA11AI.4347

Amount of Each Receipt this Period

500.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**JOSEPH C CANIZARO****A.**

Mailing Address 909 POYDRAS STREET, SUITE 1700

City

NEW ORLEANS

State

LA

Zip Code

70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**A. J. CANNATA****B.**

Mailing Address PO BOX 1636

City

MORGAN CITY

State

LA

Zip Code

70381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TANKS-A-LOTOccupation  
OWNER/PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**PAUL A CARROLL****C.**

Mailing Address PO BOX 766

City

BAKER

State

LA

Zip Code

70704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period

500.00

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

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 74

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ROY M CARUBBA</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 105 NORTHLINES STREET			<b>Transaction ID : SA11AI.4252</b>	
City METAIRIE	State LA	Zip Code 70005	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer CARUBBA ENGINEER INC		
Occupation ENGINEER (SELF-EMPLOYED)		Election Cycle-to-Date _____ 500.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>ROY M CARUBBA</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014	
Mailing Address 105 NORTHLINES STREET			<b>Transaction ID : SA11AI.4303</b>	
City METAIRIE	State LA	Zip Code 70005	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer CARUBBA ENGINEER INC		
Occupation ENGINEER (SELF-EMPLOYED)		Election Cycle-to-Date _____ 750.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>EDWARD J CASTAING JR</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 601 POYDRAS ST. SUITE 2323			<b>Transaction ID : SA11AI.4236</b>	
City NEW ORLEANS	State LA	Zip Code 70130	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C _____		Name of Employer CRULL, CASTING & LILLY		
Occupation ATTORNEY		Election Cycle-to-Date _____ 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____				
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 1000.00	
<b>TOTAL</b> This Period (last page this line number only).....			_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 74

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>KENNETH C CEFALU</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 304 OPUS ONE DR			<b>Transaction ID : SA11AI.4428</b>	
City	State	Zip Code		
BROUSSARD	LA	70518		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>BERNARD L CHARBONNET JR</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014	
Mailing Address 17603 CROSSING BLVD.			<b>Transaction ID : SA11AI.4307</b>	
City	State	Zip Code		
BATON ROUGE	LA	70810		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOHN CUMMINGS</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 416 GRAVIER ST			<b>Transaction ID : SA11AI.4377</b>	
City	State	Zip Code		
NEW ORLEANS	LA	70130		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2500.00	
Name of Employer REQUESTED		Occupation REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			3250.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 16 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

CYPRESS INC OF LULING LLC

A.

Mailing Address 12275 HWY 90

City

LULING

State

LA

Zip Code

70070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : SA11AI.4614

Amount of Each Receipt this Period

1000.00

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

KATE B DAIGLE

B.

Mailing Address 821 COUNTRY CLUB BLVD

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

QUICKRETE

N. AM. MANS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4440

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

LENNY J DARTEZ

C.

Mailing Address PO DRAWER 512

City

MORGAN CITY

State

LA

Zip Code

70381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED/BUSINESS OWNER

WINSTON SERVICE CONTRACTORS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period

500.00

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

1750.00

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



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 17 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

ANDREW B DAY JR

Mailing Address PO BOX 439

City

WATSON

State

LA

Zip Code

70786

FEC ID number of contributing federal political committee.

C

Name of Employer  
DTD BUILDERS, LLCOccupation  
BUILDING CONSTRUCTION

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MARK DELESDERNIER JR

Mailing Address 600 PORT OF NEW ORLEANS PLACE STE

City

NEW ORLEANS

State

LA

Zip Code

70512

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.4313

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

JOSEPH A DELPIT

Mailing Address 2323 IOWA ST

City

BATON ROUGE

State

LA

Zip Code

70802

FEC ID number of contributing federal political committee.

C

Name of Employer  
JD ENTERPRISESOccupation  
BUSINESSMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.4392

Amount of Each Receipt this Period

500.00

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

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

4100.00

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

PAGE 18 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**WILLIAM DOBSON****A.**

Mailing Address 540 JACKSON AVE

City

MANDEVILLE

State

LA

Zip Code

70448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

APPLIED MARINE TECH

Occupation

INVESTIGATOR

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

**Transaction ID : SA11AI.4345**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WAYNE C DUCOTE****B.**

Mailing Address 601 POYDRAS STREET, SUITE 2625

City

NEW ORLEANS

State

LA

Zip Code

70130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE INVESTMENT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

**Transaction ID : SA11AI.4302**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GARY J DUHON****C.**

Mailing Address 53 MARQUIS MANOR

City

MORGAN CITY

State

LA

Zip Code

70380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAG CONSTRUCTION

Occupation

CONSTRUCTION

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

**Transaction ID : SA11AI.4343**

Amount of Each Receipt this Period

300.00

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

2300.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 19 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

ELYSIAN INSURANCE AGENCY LLC

A.

 Mailing Address 4736 W NAPOLEON AVE  
 STE 300

City	State	Zip Code
METAIRIE	LA	70001

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4602

Amount of Each Receipt this Period

250.00

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

D JEAN FAIL

B.

Mailing Address 192 WINTER QUARTERS DR

City	State	Zip Code
HOUMA	LA	70360

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

CIS

MD

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4436

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

RONALD F FALGOUT

C.

Mailing Address PO BOX 14145

City	State	Zip Code
BATON ROUGE	LA	70898

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period

1000.00

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

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

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 20 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

EDGAR L FEINBERG II

A.

Mailing Address 827 POINT ST.

City

HOUMA

State

LA

Zip Code

70360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SURGEON

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4438

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

GEORGE A FISCHER

B.

Mailing Address 8282 GOODWOOD BLVD

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

G.E.C.

Occupation

CHAIRMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4405

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

WAYNE A FLETCHER

C.

Mailing Address 112 RUE ACADIAN

City

SLIDELL

State

LA

Zip Code

70461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2014

Transaction ID : SA11AI.4242

Amount of Each Receipt this Period

2600.00

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

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

7100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 21 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

WAYNE A FLETCHER

A.

Mailing Address 112 RUE ACADIAN

City

SLIDELL

State

LA

Zip Code

70461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		21		2014

Transaction ID : SA11AI.4243

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

WAYNE A FLETCHER

B.

Mailing Address 112 RUE ACADIAN

City

SLIDELL

State

LA

Zip Code

70461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Other

Election Cycle-to-Date

7800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		21		2014

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

GAIL LEONARD FRIEDMAN

C.

Mailing Address 111 BIRCHFIELD LANE

City

BERWICK

State

LA

Zip Code

70342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period

300.00

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

5500.00

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

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 22 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

JEFFREY GOLDRING

A.

Mailing Address 524 METAIRIE RD

City

METAIRIE

State

LA

Zip Code

70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAGNOLIA LIQUOROccupation  
SALES

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

WALTON VETTER GOLDRING

B.

Mailing Address 6041 LAUREL ST.

City

NEW ORLEANS

State

LA

Zip Code

70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAGNOLIA LIQUOROccupation  
SALES

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

MARIE T GRAVOIS

C.

Mailing Address 3964 HWY 1

City

NAPOLEONVILLE

State

LA

Zip Code

70390

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EUGENE GRAVOIS INCOccupation  
GENERAL MANAGER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4442

Amount of Each Receipt this Period

2600.00

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

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

7600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**MARIE T GRAVOIS****A.**

Mailing Address 3964 HWY 1

City

NAPOLEONVILLE

State

LA

Zip Code

70390

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EUGENE GRAVOIS INCOccupation  
GENERAL MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4443**

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**JOHN A GREZAFFI****B.**

Mailing Address 14330 LA HWY 417

City

BATCHELOR

State

LA

Zip Code

70715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BUCKHORN STOCK FARM (SELF-EMPLOYED)Occupation  
FARMER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2014

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**HOLLEY R GUIDRY****C.**

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation  
HOUSEWIFE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

**Transaction ID : SA11AI.4367**

Amount of Each Receipt this Period

2600.00

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

3250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 24 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

HOLLEY R GUIDRY

A.

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

HOUSEWIFE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4368

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

HOLLEY R GUIDRY

B.

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

HOUSEWIFE

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General Other

Election Cycle-to-Date

7800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4369

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

SHANE J GUIDRY

C.

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARVEY GULF MARINE INC (SELF-EMPLOYE

Occupation

CEO

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period

2600.00

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

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

7800.00



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

PAGE 25 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**SHANE J GUIDRY****A.**

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARVEY GULF MARINE INC (SELF-EMPLOYE

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4364

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**SHANE J GUIDRY****B.**

Mailing Address 701 POYDRAS STREET

City

NEW ORLEANS

State

LA

Zip Code

70139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARVEY GULF MARINE INC (SELF-EMPLOYE

Occupation

CEO

Receipt For: 2014

☐ Primary  
☒ Other (specify)
☐ General  
Other

Election Cycle-to-Date

7800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**ROBERT G HARVEY SR.****C.**

Mailing Address 600 N. CARROLLTON AVE

City

NEW ORLEANS

State

LA

Zip Code

70119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period

500.00

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

5700.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**ROBERT G HARVEY SR.****A.**

Mailing Address 600 N. CARROLLTON AVE

City

NEW ORLEANS

State

LA

Zip Code

70119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.4647

Amount of Each Receipt this Period

2000.00

In-kind - COCKTAIL PARTY AT IMPASTATO'S  
RESTAURANT

Full Name (Last, First, Middle Initial)

**ROBERT G HARVEY III****B.**

Mailing Address 1903 MARENGO STREET

City

NEW ORLEANS

State

LA

Zip Code

70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOUISIANA MEDICAL MANAGEMENT

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4296

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**ROBERT G HARVEY JR****C.**

Mailing Address 22 RIVER CYPRESS LN.

City

MADISONVILLE

State

LA

Zip Code

70447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOUISIANA MEDICAL MANAGEMENT

Occupation

OWNER

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4305

Amount of Each Receipt this Period

1000.00

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

3250.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER:  
 (check only one)

PAGE 27 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>SHERMAN LEE HICKS</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	06		23		2014
M M M	/	D D D	/	Y Y Y Y Y										
06		23		2014										
Mailing Address 5701 LARCH ST			<b>Transaction ID : SA11AI.4401</b>											
City	State	Zip Code												
LAKE CHARLES	LA	70605												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">1500.00</td> </tr> </table>		1500.00									
1500.00														
Name of Employer RETIRED POLICE OFFICER		Occupation RETIRED												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">1500.00</td> </tr> </table>			1500.00									
1500.00														

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>LEO B HONEYCUTT III</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	06		26		2014
M M M	/	D D D	/	Y Y Y Y Y										
06		26		2014										
Mailing Address 2812 VALCOUR AIME AVE			<b>Transaction ID : SA11AI.4411</b>											
City	State	Zip Code												
BATON ROUGE	LA	70820												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">2500.00</td> </tr> </table>		2500.00									
2500.00														
Name of Employer SELF-EMPLOYED		Occupation AUTHOR												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">2500.00</td> </tr> </table>			2500.00									
2500.00														

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOSEPH IMPASTATO</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	05		21		2014
M M M	/	D D D	/	Y Y Y Y Y										
05		21		2014										
Mailing Address 3400 16TH ST			<b>Transaction ID : SA11AI.4309</b>											
City	State	Zip Code												
METAIRIE	LA	70002												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>		300.00									
300.00														
Name of Employer IMPASTATO'S RESTAURANT		Occupation SELF-EMPLOYED												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>			300.00									
300.00														

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">4300.00</td> </tr> </table>		4300.00				
4300.00									
<b>TOTAL</b> This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

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

PAGE 28 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**DARLEEN M JACOBS LEVY ESQ.****A.**

Mailing Address 823 ST. LOUIS ST.

City

NEW ORLEANS

State

LA

Zip Code

70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JACOBS, SARRAT, LOVELACE &amp; HARRIS

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		08		2014

**Transaction ID : SA11AI.4238**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CECIL JARREAU****B.**

Mailing Address 14955 LA HWY 77

City

ROSEDALE

State

LA

Zip Code

70772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED USAF

Occupation

CREW CHIEF USAF

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		23		2014

**Transaction ID : SA11AI.4274**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CHRIS JEAN****C.**

Mailing Address 100 LOGAN DR.

City

PEARL RIVER

State

LA

Zip Code

70452

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

**Transaction ID : SA11AI.4290**

Amount of Each Receipt this Period

500.00

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

2000.00

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

PAGE 29 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

**A.** Full Name (Last, First, Middle Initial)  
**J. E. JUMONVILLE JR**

Mailing Address **PO BOX 9**

City **VENTRESS** State **LA** Zip Code **70783**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		23		2014

**Transaction ID : SA11AI.4268**

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD PATRICK KELLEY**

Mailing Address **45 CYPRESS RD.**

City **COVINGTON** State **LA** Zip Code **70433**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

**Transaction ID : SA11AI.4331**

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
**L&B TRANSPORT LLC**

Mailing Address **PO BOX 74870**

City **BATON ROUGE** State **LA** Zip Code **70874**

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

Name of Employer Occupation

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		23		2014

**Transaction ID : SA11AI.4610**

Amount of Each Receipt this Period

2000.00

SEE PARTNERSHIP ATTRIBUTION

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

3000.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**JOHN LANCON**

Mailing Address 613 FEDERAL AVE

City

MORGAN CITY

State

LA

Zip Code

70380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.4339

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CARRIE JILL LANE MCGUIRE**

Mailing Address 1551 LAKESHORE DRIVE

City

MANDEVILLE

State

LA

Zip Code

70448

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4333

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LAW OFFICE OF BRUCE C BETZER**

Mailing Address 3129 BORE ST

City

METAIRIE

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4618

Amount of Each Receipt this Period

340.00

SEE PARTNERSHIP ATTRIBUTION

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

1840.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**CLAUDE LEACH JR****A.**

Mailing Address PO BOX 997

City

LAKE CHARLES

State

LA

Zip Code

70602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SWEET LAKE LAND &amp; OIL CO. LLC (PRESIDE

Occupation

BUSINESSMAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

**Transaction ID : SA11AI.4398**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**CLAUDE LEACH JR****B.**

Mailing Address PO BOX 997

City

LAKE CHARLES

State

LA

Zip Code

70602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SWEET LAKE LAND &amp; OIL CO. LLC (PRESIDE

Occupation

BUSINESSMAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

**Transaction ID : SA11AI.4399**

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**MICHAEL W LEBLANC****C.**

Mailing Address 4024 WOODLAKE DR

City

BATON ROUGE

State

LA

Zip Code

70816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

**Transaction ID : SA11AI.4394**

Amount of Each Receipt this Period

2000.00

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

7000.00

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

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 32 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

THERESA M LEBLANC

A.

Mailing Address 211 E GLORIA SWITCH, LOT 29

City

LAFAYETTE

State

LA

Zip Code

70507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

THERESA M LEBLANC

B.

Mailing Address 211 E GLORIA SWITCH, LOT 29

City

LAFAYETTE

State

LA

Zip Code

70507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

PHILLIP A LEMOINE

C.

Mailing Address 110 N LATOUR STREET

City

VILLE PLATTE

State

LA

Zip Code

70586

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		13		2014

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period

300.00

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

5300.00

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



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

 FOR LINE NUMBER:  
 (check only one)

PAGE 33 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

**A.** Full Name (Last, First, Middle Initial)  
**RONALD A LOPIPARO**

Mailing Address 4501 NEWLANDS ST.

City METAIRIE	State LA	Zip Code 70006
------------------	-------------	-------------------

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

Name of Employer LAPARA & ASSOCIATES	Occupation GENERAL CONTRACTOR
---	----------------------------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

**Transaction ID : SA11AI.4317**

Amount of Each Receipt this Period

1000.00
---------

**B.** Full Name (Last, First, Middle Initial)  
**LOUISIANA CRANE & CONSTRUCTION LLC**

Mailing Address 1045 HWY 190

City EUNICE	State LA	Zip Code 70535
----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4644**

Amount of Each Receipt this Period

2600.00
---------

PARTNERSHIP ATTRIBUTION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**LOUISIANA CRANE & CONSTRUCTION LLC**

Mailing Address 1045 HWY 190

City EUNICE	State LA	Zip Code 70535
----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4646**

Amount of Each Receipt this Period

400.00
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PARTNERSHIP ATTRIBUTION REQUESTED

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

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

4000.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>LEE MALLETT</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		10		2014
M M	/	D D	/	Y Y Y Y										
04		10		2014										
Mailing Address <b>PO BOX 1964</b>			<b>Transaction ID : SA11AI.4246</b>											
City <b>IOWA</b>	State <b>LA</b>	Zip Code <b>70647</b>	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00									
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>SELF-EMPLOYED</b>												
Occupation <b>CONTRACTOR</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00							
					1000.00									

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>LEE MALLETT</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		10		2014
M M	/	D D	/	Y Y Y Y										
04		10		2014										
Mailing Address <b>PO BOX 1964</b>			<b>Transaction ID : SA11AI.4247</b>											
City <b>IOWA</b>	State <b>LA</b>	Zip Code <b>70647</b>	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00									
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>SELF-EMPLOYED</b>												
Occupation <b>CONTRACTOR</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>							2000.00							
					2000.00									

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>LEE MALLETT</b>			Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		10		2014
M M	/	D D	/	Y Y Y Y										
04		10		2014										
Mailing Address <b>PO BOX 1964</b>			<b>Transaction ID : SA11AI.4248</b>											
City <b>IOWA</b>	State <b>LA</b>	Zip Code <b>70647</b>	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>							500.00				
					500.00									
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>SELF-EMPLOYED</b>												
Occupation <b>CONTRACTOR</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2500.00</td> </tr> </table>							2500.00							
					2500.00									

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5"></td> <td>2500.00</td> </tr> </table>							2500.00
					2500.00					
<b>TOTAL</b> This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>							

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 74

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JOHN M MAMOULIDES</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 4917 HENICAN PL.			<b>Transaction ID : SA11AI.4407</b>	
City METAIRIE	State LA	Zip Code 70003	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00		
Name of Employer JOHN MAMOULIDES ATTORNEY AT LAW		Occupation LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JOHN M MAMOULIDES</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 4917 HENICAN PL.			<b>Transaction ID : SA11AI.4408</b>	
City METAIRIE	State LA	Zip Code 70003	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00		
Name of Employer JOHN MAMOULIDES ATTORNEY AT LAW		Occupation LAWYER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOHN M MAMOULIDES</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 4917 HENICAN PL.			<b>Transaction ID : SA11AI.4409</b>	
City METAIRIE	State LA	Zip Code 70003	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00		
Name of Employer JOHN MAMOULIDES ATTORNEY AT LAW		Occupation LAWYER		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Election Cycle-to-Date 7500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			7500.00	
<b>TOTAL</b> This Period (last page this line number only).....			7500.00	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 36 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

VINCENT J MARCELLO JR

Mailing Address 1025 BIENVILLE STREET, STE. 5

City

NEW ORLEANS

State

LA

Zip Code

70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MERRITTE E MCDONALD

Mailing Address 11244 PERKINS RD.

City

BATON ROUGE

State

LA

Zip Code

70810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.4292

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DAVID L MCGUIRE

Mailing Address 3015 WHITE OAK LAND

City

MANDEVILLE

State

LA

Zip Code

70448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RESTAURATEUR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4329

Amount of Each Receipt this Period

1000.00

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

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

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 37 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

EDMOND H MCINTYRE III

A.

Mailing Address 3 SANCTUARY LN.

City

METAIRIE

State

LA

Zip Code

70006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MR. ED'S OYSTER BAR &amp; FISH HOUSE

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4298

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MED IMAGE MANAGEMENT AND CONSULTING LLC

B.

Mailing Address 174 GRANT RD

City

OPELOUSAS

State

LA

Zip Code

70570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period

250.00

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

ALVIN MERLIN

C.

Mailing Address 4525 HESSMER AVENUE

City

METAIRIE

State

LA

Zip Code

70002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period

1000.00

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

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

1750.00

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

PAGE 38 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**CHARLES R MILAM**

Mailing Address 805 W BAYOU PKWY

City

LAFAYETTE

State

LA

Zip Code

70503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2014

Transaction ID : SA11AI.4375

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B I MOODY III**

Mailing Address PO BOX 1311

City

CROWLEY

State

LA

Zip Code

70527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.4413

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JAMES MOORE**

Mailing Address PO BOX 741

City

PRAIRIEVILLE

State

LA

Zip Code

70769

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA EXPERT MAINTENANCE SERVICES

Occupation

REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2014

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period

250.00

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

1250.00

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

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 39 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

BRETT MOREAUX

Mailing Address 124 BELLE HELENE ST

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4806

Amount of Each Receipt this Period

250.00

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

MY MY NGUYEN

Mailing Address 3976 KENOSHA AVE.

City

SAN DIEGO

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
MED SPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4379

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

MY MY NGUYEN

Mailing Address 3976 KENOSHA AVE.

City

SAN DIEGO

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
MED SPA

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4380

Amount of Each Receipt this Period

2600.00

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

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

5200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 40 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

MY MY NGUYEN

Mailing Address 3976 KENOSHA AVE.

City

SAN DIEGO

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
MED SPA

Receipt For: 2014



Primary



General



Other (specify)

Other

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period

1800.00

Full Name (Last, First, Middle Initial)

J ROCK PALERMO

Mailing Address 4603 ANGELLE DR.

City

SULPHUR

State

LA

Zip Code

70663

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERON, BICE, PALERMO &amp; WILSON, LLC

Occupation  
ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PCJ ANGELS

Mailing Address 1305 RIDGEFIELD RD

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4642

Amount of Each Receipt this Period

250.00

SEE PARTNERSHIP ATTRIBUTION

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

3050.00

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



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 41 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

PENN PROPERTIES LLC

A.

Mailing Address PO BOX 279

City

SPRINGFIELD

State

LA

Zip Code

70462

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4640

Amount of Each Receipt this Period

1000.00

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

CARLOS POLOTZOLA DBA

B.

Mailing Address 421 ATKIN BAYOU RD

City

MEVILLE

State

LA

Zip Code

71353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POLOTZOLA FARMS

Occupation

SELF

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4351

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

NICKY PREJEAN

C.

Mailing Address 45291 FLOYD BLACKWELL RD

City

ST. AMANT

State

LA

Zip Code

70774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EMP. SOUTHLAND FIRE

Occupation

MANAGER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.4284

Amount of Each Receipt this Period

2000.00

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

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

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 42 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

PREMIUM UNLEADED LLC

Mailing Address 60188 OAKLAWN AVE

City

LACOMBE

State

LA

Zip Code

70445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4632

Amount of Each Receipt this Period

1000.00

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

BRIAN R REINE

Mailing Address 857 BROWNSWITCH RD

City

SLIDELL

State

LA

Zip Code

70458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4286

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PHILIP RIZZUTO

Mailing Address 200 BOURBON STREET

City

NEW ORLEANS

State

LA

Zip Code

70130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

REAL ESTATE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.4315

Amount of Each Receipt this Period

500.00

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

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

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 43 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

JAY ROBERTS

A.

Mailing Address 12275 HWY 90

City

LULING

State

LA

Zip Code

70070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CYPRESS INN OF LULING, LLC

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4616

Amount of Each Receipt this Period

1000.00

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

RODNEY B RYDER

B.

Mailing Address 9143 HIGHWAY 105

City

MELVILLE

State

LA

Zip Code

71353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4359

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

EUGENE M SELLERS

C.

Mailing Address 148 B EASY STREET

City

LAFAYETTE

State

LA

Zip Code

70506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		15		2014

Transaction ID : SA11AI.4373

Amount of Each Receipt this Period

1500.00

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

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

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 74

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**JOAN ELLYN SILBER**

**A.**

Mailing Address 10519 FRONTENAC WOODS LN.

City

SAINT LOUIS

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
DOCTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 12 2014

**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JO ANNE T SMITH**

**B.**

Mailing Address 405 RIGHTOR ST

City

HOUMA

State

LA

Zip Code

70364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
HOUSEWIFE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

**Transaction ID : SA11AI.4449**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MICHAEL J SMITH**

**C.**

Mailing Address PO BOX 869

City

BERWICK

State

LA

Zip Code

70342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTED

Occupation  
REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

**Transaction ID : SA11AI.4421**

Amount of Each Receipt this Period

1000.00

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

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

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 74

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>STEVEN P. ST. MARTIN</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014		
Mailing Address 875 G. STREET APT. #502			<b>Transaction ID : SA11AI.4383</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN DIEGO	CA	92101	2600.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer MICHEAL ST. MARTIN LAW FIRM		Occupation LAWYER	2600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>STEVEN P. ST. MARTIN</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014		
Mailing Address 875 G. STREET APT. #502			<b>Transaction ID : SA11AI.4384</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN DIEGO	CA	92101	2600.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer MICHEAL ST. MARTIN LAW FIRM		Occupation LAWYER	2600.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>STEVEN P. ST. MARTIN</b>			Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014		
Mailing Address 875 G. STREET APT. #502			<b>Transaction ID : SA11AI.4385</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN DIEGO	CA	92101	2300.00		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period		
Name of Employer MICHEAL ST. MARTIN LAW FIRM		Occupation LAWYER	2300.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Election Cycle-to-Date 7500.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			7500.00		
<b>TOTAL</b> This Period (last page this line number only).....					

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

PAGE 46 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**BYRON E TALBOT****A.**

Mailing Address 1110 HWY 1

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4425**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**BYRON E TALBOT****B.**

Mailing Address 1110 HWY 1

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4426**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**RAJA TALLURI MD****C.**

Mailing Address 109 ACADIA LANE

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REQUESTEDOccupation  
REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.4434**

Amount of Each Receipt this Period

2000.00

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

2500.00

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

PAGE 47 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**TAMMANY MOBILE HOME PARK LLC****A.**

Mailing Address PO BOX 578

City

SLIDELL

State

LA

Zip Code

70459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2014

D D / Y Y Y Y

Y Y Y Y

**Transaction ID : SA11AI.4636**

Amount of Each Receipt this Period

500.00

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

**JERRY THOMAS****B.**

Mailing Address PO BOX 675

City

FRANKLINTON

State

LA

Zip Code

70438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FRANKLINTON RURAL HEALTH CLINIC

Occupation

MD

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 28 / 2014

D D / Y Y Y Y

Y Y Y Y

**Transaction ID : SA11AI.4323**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**HERBERT THOMASSON****C.**

Mailing Address 9519 HWY 105

City

MELVILLE

State

LA

Zip Code

71353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THOMASSON FARMS LLC

Occupation

FARMER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y  
06 / 04 / 2014

D D / Y Y Y Y

Y Y Y Y

**Transaction ID : SA11AI.4626**

Amount of Each Receipt this Period

250.00

PARTNERSHIP ATTRIBUTION

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....

1000.00

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

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 48 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

THOMASSON FARMS LLC

Mailing Address 9519 HWY 105

City

MELVILLE

State

LA

Zip Code

71353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4624

Amount of Each Receipt this Period

250.00

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

BARBARA TOUPS

Mailing Address PO BOX 1331

City

THIBODAUX

State

LA

Zip Code

70302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RED GOOSE SALON (SELF-EMPLOYED)

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

LINDA TOUPS

Mailing Address PO BOX 396 258 ALLIE YOUNG RD

City

BASILE

State

LA

Zip Code

70515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period

500.00

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

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

1250.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 49 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

VINCE VANCE

A.

Mailing Address PO BOX 180099

City

DALLAS

State

TX

Zip Code

75218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MUSICIAN/PERFORMER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period

2000.00

In-kind - MUSICIAN'S PERFORMANCE FOR PARTY

Full Name (Last, First, Middle Initial)

TAWASKY L VENTROY

B.

Mailing Address 815 W CONGRESS ST

City

LAFAYETTE

State

LA

Zip Code

70501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN PHONE SYSTEMS LLC

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2014

Transaction ID : SA11AI.4233

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

TAWASKY L VENTROY

C.

Mailing Address 815 W CONGRESS ST

City

LAFAYETTE

State

LA

Zip Code

70501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN PHONE SYSTEMS LLC

Occupation

BUSINESS OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2014

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

2400.00

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

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

7000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 50 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

LOUIS VIELEE

A.

Mailing Address PO BOX 74870

City

BATON ROUGE

State

LA

Zip Code

70874

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TMI ENTERPRISE

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : SA11AI.4612

Amount of Each Receipt this Period

2000.00

PARTNERSHIP ATTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

RONALD J WAGUESPACK JR

B.

Mailing Address 374 WEST MAIN STREET

City

THIBODAUX

State

LA

Zip Code

70301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SUGAR CANE FARMER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4430

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BOBBEE M WEISKOPF

C.

Mailing Address 9 MISSION HILLS DR.

City

SLIDELL

State

LA

Zip Code

70458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period

500.00

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

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

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 51 OF 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF EDWIN W EDWARDS

Full Name (Last, First, Middle Initial)

MARY LEACH WERNER

A.

Mailing Address PO BOX 1018

City

LAKE CHARLES

State

LA

Zip Code

70602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

HOUSEWIFE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4396

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

RICHARD L WILCOX

B.

Mailing Address PO BOX 1178

City

ST. FRANCISVILLE

State

LA

Zip Code

70775

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUDUBON PACKAGE LIQUOR AND AUDUBO

Occupation

STORE OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		09		2014

Transaction ID : SA11AI.4361

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

VAN ZERINGUE

C.

Mailing Address 1245 ST JAMES STREET

City

VACHERIE

State

LA

Zip Code

70090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REQUESTED

Occupation

REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4432

Amount of Each Receipt this Period

250.00

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

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

3250.00

161340.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 74

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)  
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

**A.** Mailing Address 8712 HWY 23

City	State	Zip Code
BELLE CHASSE	LA	70037

FEC ID number of contributing  
federal political committee.

**C** C00221077

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2014

Transaction ID : SA11C.4591

Amount of Each Receipt this Period

2600.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

**C** C00027342

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : SA11C.4587

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**LOCKE LORD BISSELL & LIDDELL LLP PAC**

Mailing Address 600 TRAVIS STREET  
SUITE 2800

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing  
federal political committee.

**C** C00117861

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : SA11C.4589

Amount of Each Receipt this Period

1000.00

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

6100.00

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

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 74

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF EDWIN W EDWARDS**

**A.** Full Name (Last, First, Middle Initial)  
**SMOKE BEND ASSOCIATES LLC FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **2805 HARVARD AVENUE**  
**SUITE 102**

City State Zip Code  
**METAIRIE LA 70006**

FEC ID number of contributing  
federal political committee.

**C** **C00378950**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2600.00**

Date of Receipt

**06 / 30 / 2014**

**Transaction ID : SA11C.4593**

Amount of Each Receipt this Period

**2600.00**

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

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**2600.00**

**8700.00**

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

PAGE 54 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. ACADIAN SIGNS, INC.**

Mailing Address 30060 BARNETT ROAD

City	State	Zip Code
DENHAM SPRINGS	LA	70726

Purpose of Disbursement  
SIGNS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 09 / 2014

Amount of Each Disbursement this Period

3309.25
---------

Transaction ID : SB17.4659

**B. APPLE STORE, MALL OF LOUISIANA**

Mailing Address 6401 BLUEBONNET BLVD.

City	State	Zip Code
BATON ROUGE	LA	70836

Purpose of Disbursement  
COMPUTER

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 02 / 2014

Amount of Each Disbursement this Period

3594.82
---------

Transaction ID : SB17.4653

**C. AT&T**

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement  
PHONE BILL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2014

Amount of Each Disbursement this Period

441.81
--------

Transaction ID : SB17.4698

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

7345.88

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

PAGE 55 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement  
PHONE BILL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

95.00
-------

Transaction ID : SB17.4749

**B. AT&T**

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

103.00
--------

Transaction ID : SB17.4774

**C. AT&T**

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement  
PHONE BILL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

186.24
--------

Transaction ID : SB17.4764

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

384.24

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

PAGE 56 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. CASHIO'S 360 CATERING**

Mailing Address 13521 HWY 44

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2014

City	State	Zip Code
GONZALES	LA	70737

Amount of Each Disbursement this Period

716.97
--------

Purpose of Disbursement  
CATERING

Transaction ID : SB17.4657

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CORT BUSINESS SERVICES**

Mailing Address 5432 WEST CHESTER ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

City	State	Zip Code
WEST CHESTER	OH	45069

Amount of Each Disbursement this Period

651.01
--------

Purpose of Disbursement  
FURNITURE RENT

Transaction ID : SB17.4682

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. CORT BUSINESS SERVICES**

Mailing Address 5432 WEST CHESTER ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

City	State	Zip Code
WEST CHESTER	OH	45069

Amount of Each Disbursement this Period

710.27
--------

Purpose of Disbursement  
FURNITURE RENT

Transaction ID : SB17.4745

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

2078.25



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

PAGE 57 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. CORT BUSINESS SERVICES**

Mailing Address 5432 WEST CHESTER ROAD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement  
FURNITURE RENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

710.27
--------

Transaction ID : SB17.4793

**B. MATTHEW EDWARDS**

Mailing Address 7901 WRENWOOD BLVD STE A

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

180.00
--------

Transaction ID : SB17.4765

**C. ENTERGY**

Mailing Address PO BOX 8103

City	State	Zip Code
BATON ROUGE	LA	70891

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

534.84
--------

Transaction ID : SB17.4726

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

1425.11

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

PAGE 58 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. ENTERGY**

Mailing Address PO BOX 8103

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
BATON ROUGE	LA	70891

Amount of Each Disbursement this Period

145.07
--------

Purpose of Disbursement  
UTILITIESCategory/  
Type**Transaction ID : SB17.4766**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Amount of Each Disbursement this Period

7957.00
---------

Purpose of Disbursement  
SIGNSCategory/  
Type**Transaction ID : SB17.4661**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Amount of Each Disbursement this Period

2527.71
---------

Purpose of Disbursement  
SIGNSCategory/  
Type**Transaction ID : SB17.4672**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

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

10629.78

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

PAGE 59 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement  
SIGNS

Amount of Each Disbursement this Period

567.35
--------

Transaction ID : SB17.4699

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement  
SIGNS

Amount of Each Disbursement this Period

4005.31
---------

Transaction ID : SB17.4688

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement  
STICKERS

Amount of Each Disbursement this Period

319.07
--------

Transaction ID : SB17.4733

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

4891.73

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

PAGE 60 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. FASTSIGNS**

Mailing Address 8350 FLORIDA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
BATON ROUGE	LA	70806

Amount of Each Disbursement this Period

110.64
--------

Purpose of Disbursement  
SIGNS

Transaction ID : SB17.4802

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. CHARLOTTE GUEDRY**

Mailing Address 42189 HWY. 621

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

City	State	Zip Code
GONZALES	LA	70737

Amount of Each Disbursement this Period

420.00
--------

Purpose of Disbursement  
WEBSITE SERVICES

Transaction ID : SB17.4710

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. ROBERT G HARVEY SR.**

Mailing Address 600 N. CARROLLTON AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
NEW ORLEANS	LA	70119

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
In-kind - COCKTAIL PARTY AT IMPASTATO'S RESTAURANT

Transaction ID : SB17.4648

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

2530.64

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

PAGE 61 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. KURTZ & HERBERT**

Mailing Address PO BOX 80301

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

City	State	Zip Code
BATON ROUGE	LA	70898

Amount of Each Disbursement this Period

1747.25
---------

Purpose of Disbursement  
RENTCategory/  
Type**Transaction ID : SB17.4687**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. KURTZ & HERBERT**

Mailing Address PO BOX 80301

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
BATON ROUGE	LA	70898

Amount of Each Disbursement this Period

1747.25
---------

Purpose of Disbursement  
RENTCategory/  
Type**Transaction ID : SB17.4738**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. KURTZ & HERBERT**

Mailing Address PO BOX 80301

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

City	State	Zip Code
BATON ROUGE	LA	70898

Amount of Each Disbursement this Period

1747.25
---------

Purpose of Disbursement  
RENTCategory/  
Type**Transaction ID : SB17.4796**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

5241.75

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

PAGE 62 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. LOUIS DEANGELO'S**

Mailing Address 141 ASPEN SQUARE

City	State	Zip Code
DENHAM SPRINGS	LA	70726

Purpose of Disbursement  
FUNDRAISER

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2014

Amount of Each Disbursement this Period

915.53
--------

Transaction ID : SB17.4655

**B. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

1203.70
---------

Transaction ID : SB17.4693

**C. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

1203.70
---------

Transaction ID : SB17.4711

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

3322.93

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

PAGE 63 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

1203.70
---------

Transaction ID : SB17.4746

**B. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

1185.20
---------

Transaction ID : SB17.4767

**C. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.4773

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

3888.90

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

PAGE 64 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES - REFUND

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

4	3	2	1	0	.	9	8	7	6	5	4	3	2	1	0
						2	1								

Transaction ID : SB17.4798

**B. OFFICE DEPOT #697**

Mailing Address 703 N AIRLINE HWY

City	State	Zip Code
GONZALES	LA	70737

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2014

Amount of Each Disbursement this Period

4	3	2	1	0	.	2	1	0	2	1	0	0	0	0	0
						2	2	0							

Transaction ID : SB17.4801

**C. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

4	3	2	1	0	.	5	6	0	1	0	0	0	0	0	0
						2	0	1							

Transaction ID : SB17.4667

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

419.58



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

PAGE 65 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

Amount of Each Disbursement this Period

263.79
--------

Transaction ID : SB17.4691

**B. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

183.10
--------

Transaction ID : SB17.4692

**C. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

441.41
--------

Transaction ID : SB17.4703

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

888.30

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

PAGE 66 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

38.46
-------

Transaction ID : SB17.4789

**B. OFFICE DEPOT STORE #259**

Mailing Address 3116 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

65.39
-------

Transaction ID : SB17.4792

**C. P&N**

Mailing Address 8550 UNITED PLAZA BLVD SUITE 1001

City	State	Zip Code
BATON ROUGE	LA	70809

Purpose of Disbursement  
ACCOUNTING & COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

4500.00
---------

Transaction ID : SB17.4701

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

4603.85

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

PAGE 67 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. RACHELLE MARKS**

Mailing Address 7901 WRENWOOD BLVD STE A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

City	State	Zip Code
BATON ROUGE	LA	70809

Amount of Each Disbursement this Period

1203.70
---------

Purpose of Disbursement  
PAYROLLCategory/  
Type

Transaction ID : SB17.4671

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. RICKY WARD**

Mailing Address 3741 HWY 1 SOUTH

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

City	State	Zip Code
PORT ALLEN	LA	70767

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
STATE CAMPAIGN CONTRIBUTIONCategory/  
Type

Transaction ID : SB17.4685

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. RUTH'S CHRIS**

Mailing Address 4836 CONSTITUTION AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

City	State	Zip Code
BATON ROUGE	LA	70808

Amount of Each Disbursement this Period

169.79
--------

Purpose of Disbursement  
MEALCategory/  
Type

Transaction ID : SB17.4791

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

1623.49

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

PAGE 68 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. SAL & JUDY'S RESTAURANT**

Mailing Address PO BOX 911

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

City	State	Zip Code
LACOMBE	LA	70445

Amount of Each Disbursement this Period

1150.00
---------

Purpose of Disbursement  
FOOD AND BEVERAGESCategory/  
Type**Transaction ID : SB17.4732**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. SAM'S CLUB**

Mailing Address 10444 N MALL DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2014

City	State	Zip Code
BATON ROUGE	LA	70808

Amount of Each Disbursement this Period

233.34
--------

Purpose of Disbursement  
FOODCategory/  
Type**Transaction ID : SB17.4772**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ST. JOHN THEATRE**

Mailing Address 872 WEST 5TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

City	State	Zip Code
LAPLACE	LA	70068

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
CHARITABLE CONTRIBUTIONCategory/  
Type**Transaction ID : SB17.4795**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

1633.34

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

PAGE 69 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. TAPCO**

Mailing Address PO BOX 286

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2014

City	State	Zip Code
BURLINGTON	NC	27216

Amount of Each Disbursement this Period

903.00
--------

Purpose of Disbursement  
LIABILITY INSURANCE

Candidate Name

Category/  
Type**Transaction ID : SB17.4708**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. THE SPIRIT STICK LLC**

Mailing Address 119 E SANDERS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

City	State	Zip Code
GONZALES	LA	70737

Amount of Each Disbursement this Period

4158.00
---------

Purpose of Disbursement  
CAMPAIGN SHIRTS

Candidate Name

Category/  
Type**Transaction ID : SB17.4715**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. THE SPIRIT STICK LLC**

Mailing Address 119 E SANDERS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

City	State	Zip Code
GONZALES	LA	70737

Amount of Each Disbursement this Period

1692.84
---------

Purpose of Disbursement  
CAMPAIGN SHIRTS

Candidate Name

Category/  
Type**Transaction ID : SB17.4768**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

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

6753.84

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

PAGE 70 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. UPRINTING**

Mailing Address 8000 HASKELL AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

City	State	Zip Code
VAN NUYS	CA	91406

Amount of Each Disbursement this Period

257.78
--------

Purpose of Disbursement  
STICKERSCategory/  
Type

Transaction ID : SB17.4713

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. UPRINTING**

Mailing Address 8000 HASKELL AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

City	State	Zip Code
VAN NUYS	CA	91406

Amount of Each Disbursement this Period

257.78
--------

Purpose of Disbursement  
STICKERSCategory/  
Type

Transaction ID : SB17.4736

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

City	State	Zip Code
BATON ROUGE	LA	70808

Amount of Each Disbursement this Period

147.00
--------

Purpose of Disbursement  
POSTAGECategory/  
Type

Transaction ID : SB17.4694

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

662.56

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

PAGE 71 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
SHIPPING/DELIVERY SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

7.71
------

Transaction ID : SB17.4704

**B. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
SHIPPING/DELIVERY SERVICE, POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

100.80
--------

Transaction ID : SB17.4718

**C. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
SHIPPING/DELIVERY SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

7.69
------

Transaction ID : SB17.4760

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

116.20

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

PAGE 72 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
SHIPPING/DELIVERY SERVICE, POSTAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

2111.11
---------

Transaction ID : SB17.4797

**B. USPS, SOUTHEAST STATION**

Mailing Address 4535 BENNINGTON AVE

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
SHIPPING/DELIVERY SERVICE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

9.68
------

Transaction ID : SB17.4799

**C. VINCE VANCE**

Mailing Address PO BOX 180099

City	State	Zip Code
DALLAS	TX	75218

Purpose of Disbursement  
In-kind - MUSICIAN'S PERFORMANCE FOR PARTY

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.4651

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

2111.11



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

PAGE 73 OF 74

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 3132 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
BEVERAGES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

32.94
-------

Transaction ID : SB17.4761

**B. WALMART**

Mailing Address 3132 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

5.79
------

Transaction ID : SB17.4762

**C. WALMART**

Mailing Address 3132 COLLEGE DR

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement  
BEVERAGES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

18.21
-------

Transaction ID : SB17.4790

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

56.94
60608.42

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 74 OF 74

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**FRIENDS OF EDWIN W EDWARDS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**TRINA EDWARDS**

Nature of Debt (Purpose):

CAMPAIGN EXPENSES PAID BY TRINA  
EDWARDS TO BE REIMBURSED IN LATER  
REPORTING PERIOD

Mailing Address 7901 WRENWOOD BLVD

City State

Zip Code

BATON ROUGE

LA

70809

Outstanding Balance Beginning This Period

3121.42

Transaction ID : SD10.4172

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3121.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

3121.42

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

3121.42

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3121.42