

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Republican Party of Louisiana

ADDRESS (number and street) 530 Lakeland Drive  
Suite 215  
 Check if different than previously reported. (ACC)  
Baton Rouge LA 70802

2. **FEC IDENTIFICATION NUMBER** C00187450  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 09 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Mr. Dan Kyle  
Signature of Treasurer Electronically Filed by Mr. Dan Kyle Date 10 19 2010

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

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

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

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

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

 To: 

M M	D D	Y Y Y Y
0 9	3 0	2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 0</td></tr></table>	Y Y Y Y	2 0 1 0		110806.29
Y Y Y Y				
2 0 1 0				
(b) Cash on Hand at Beginning of Reporting Period .....	89178.44			
(c) Total Receipts (from Line 19) .....	140685.29	350626.00		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	229863.73	461432.29		
7. Total Disbursements (from Line 31) .....	42341.07	273909.63		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	187522.66	187522.66		
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) .....	51920.21			

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	96870.00	177373.80
(ii) Unitemized .....	1615.17	32672.57
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	98485.17	210046.37
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	16050.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	98485.17	226096.37
12. Transfers From Affiliated/Other Party Committees .....	12600.00	17600.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	5942.71
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	5757.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	29600.12	95229.42
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	29600.12	95229.42
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	140685.29	350626.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	111085.17	255396.58

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	7868.39	25314.17
(ii) Non-Federal Share.....	29600.12	95229.42
(b) Other Federal Operating Expenditures.....	1319.00	102172.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	38787.51	222716.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	3553.56	50693.37
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	3553.56	50693.37
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	42341.07	273909.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12740.95	178680.21

**DETAILED SUMMARY PAGE**  
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	98485.17	226096.37
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	98485.17	226096.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9187.39	127486.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	5942.71
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9187.39	121544.13

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 62  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

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

Mailing Address 2002 Louisiana Ave

City State Zip Code  
Lake Charles LA 70601-7576

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

Name of Employer Occupation  
Beverage Sales Inc Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A7463E755E9A94F9ABDF

Amount of Each Receipt this Period  
650.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Bruce Adams, Sr.

Mailing Address PO Box 2447

City State Zip Code  
Morgan City LA 70381-2447

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

Name of Employer Occupation  
OGRS, LLC Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** AC07BD8D05D87473F8EB

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Elton Beebe

Mailing Address PO Box 6015

City State Zip Code  
Ridgeland MS 39158-6015

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

Name of Employer Occupation  
Magnolia Mgmt Corp Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A37D2958D7412439EB64

Amount of Each Receipt this Period  
1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2850.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Barry Blumberg		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 2132 Rue Beauregard		<b>Transaction ID:</b> A4C47BB425D6144AC9DE
	City Baton Rouge	State LA	Zip Code 70809-1290
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 900.00
	Name of Employer Blumberg and Associates	Occupation Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ward W.J. Breaux		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 888		<b>Transaction ID:</b> ACC6EB597D5B642239AE
	City Loreauville	State LA	Zip Code 70552-0888
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
	Name of Employer Breux Brothers Enterprises	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ward W.J. Breaux		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 888		<b>Transaction ID:</b> ACD9ED1416CEF42D49DE
	City Loreauville	State LA	Zip Code 70552-0888
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
	Name of Employer Breux Brothers Enterprises	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 62  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edgar Bright

Mailing Address 2340 Camp St

City State Zip Code  
New Orleans LA 70130-5608

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
09 / 09 / 2010

**Transaction ID:** A63E25C28FA134317A19

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. N R. Broussard, Sr.

Mailing Address 25817 La Hwy 333

City State Zip Code  
Abbeville LA 70510-0507

FEC ID number of contributing federal political committee. C

Name of Employer Retired      Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
09 / 09 / 2010

**Transaction ID:** A97ED24C537CC4D14A8B

Amount of Each Receipt this Period  
1600.00

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

Mailing Address 908 Croton Drive

City State Zip Code  
Alexandria VA 22308-2001

FEC ID number of contributing federal political committee. C

Name of Employer The Livingston Group      Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  
09 / 09 / 2010

**Transaction ID:** AED0C63EB84BA49E7BC7

Amount of Each Receipt this Period  
1600.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Arthur Choate	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 1390 S Dixie Hwy Suite 2221	<b>Transaction ID:</b> A7E55477369AE4A9CB20
	City State Zip Code Coral Gables FL 33146-2946	Amount of Each Receipt this Period 3500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph Clements, Jr.	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 5422 S. Pointer Ct	<b>Transaction ID:</b> AF324EA059E864BFA8DC
	City State Zip Code Baton Rouge LA 70808-5231	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Self Employed Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Tedd A Davison	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 202 Brookside Rd	<b>Transaction ID:</b> A18BF0A0B592B4C59A0C
	City State Zip Code Choudrant LA 71227-4853	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Genesis Energy Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 10 / 62  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Mr. Dan L Donald, Jr.  
Mailing Address PO Box 675  
City State Zip Code  
Jennings LA 70546-0675  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Jeff Davis Bank & Trust Banker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00  
Date of Receipt 09 / 09 / 2010  
Transaction ID: AC891E93D6E8C47E3BF6  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. H. M. Favrot  
Mailing Address 3925 N. Service Rd W.  
City State Zip Code  
Metairie LA 70002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Favrot & Shane Aia Architect  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 09 / 09 / 2010  
Transaction ID: AF1DD850C7B5041E1912  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Michael Futrell  
Mailing Address 10875 Belle Cour Way  
City State Zip Code  
Shreveport LA 71106-7771  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self Physican  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00  
Date of Receipt 09 / 09 / 2010  
Transaction ID: AE7B48C3F00874988A81  
Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3400.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 62  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)  
Grady C Golden

Mailing Address PO Box 295

City State Zip Code  
Shreveport LA 71162-0295

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

Name of Employer Occupation  
Builder's Supply Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A33FD4F8F37234788A42

Amount of Each Receipt this Period  
400.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Al A Gonsoulin

Mailing Address 10 Muirfield Way

City State Zip Code  
Sugar Land TX 77479-3966

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

Name of Employer Occupation  
Phi Inc Chairman CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A4713C0E89AA34E6DA7A

Amount of Each Receipt this Period  
3200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gregory J Hamer, Sr.

Mailing Address 805 Pine St

City State Zip Code  
Morgan City LA 70380-1826

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

Name of Employer Occupation  
B & G Food Ent., Inc Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A2634FBF98A0F4438AF5

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial) lv Jeansonne		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 7266 Tom Dr. Suite 200		<b>Transaction ID:</b> AB1E41F27AD1244A3A2C
City Baton Rouge	State Zip Code LA 70806-2307	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Self	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) W. Elton Kennedy		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address PO Box 259		<b>Transaction ID:</b> A43D83D49B077485B8B8
City Mer Rouge	State Zip Code LA 71261-0259	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1400.00
Name of Employer Kennedy Rice	Occupation investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

**C.**

Full Name (Last, First, Middle Initial) Robert L Livingston		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
Mailing Address 499 South Capitol St., SW Suite 600		<b>Transaction ID:</b> AD56DF4FE0095437C8EA
City Washington	State Zip Code DC 20003-4037	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer The Livingston Group	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Mary P Lupo	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 145 Robert E Lee Blvd Suite 302	<b>Transaction ID:</b> A4CBFC882DAD9465B842
	City State Zip Code New Orleans LA 70124-2593	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Lupo	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 78 Tern Street	<b>Transaction ID:</b> ADB42CEB3FE484065837
	City State Zip Code New Orleans LA 70124-4413	Amount of Each Receipt this Period 1400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Lupo Enterprises Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00

<b>C.</b>	Full Name (Last, First, Middle Initial) James Madden	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 960 Beechwood Dr	<b>Transaction ID:</b> ABCDF4873CDCA438BA82
	City State Zip Code Lake Charles LA 70611-6818	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Madden Contracting Co Inc Occupation Contractor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Lee Mallett		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 1967		<b>Transaction ID:</b> A0733BAAB40B34B8995B
	City Iowa	State LA	Zip Code 70647-1967
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Mallett, Inc	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. William K McConnell		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 809		<b>Transaction ID:</b> A88E02235AA7E4674887
	City Rayville	State LA	Zip Code 71269-0809
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Lasalle Management	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. R E 'Bob' Miller		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 3616		<b>Transaction ID:</b> AF7DC65CA44F44EDCAFB
	City Morgan City	State LA	Zip Code 70381-3616
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer Major Equipment Petrol	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John O'Neal

Mailing Address PO Box 536

City State Zip Code  
Choudrant LA 71227-0536

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

Name of Employer Retired Occupation Oil & Gas

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** A3FB26769242D4768B2D

Amount of Each Receipt this Period  
2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Patterson Barge Rental

Mailing Address PO Box 2545

City State Zip Code  
Morgan City LA 70381

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** AFEDCF21F988045EA8BA

Amount of Each Receipt this Period  
700.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen P Petagna

Mailing Address 1322 First St.

City State Zip Code  
New Orleans LA 70130-5711

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

Name of Employer Safety Technologies Occupation COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** AD7C0408AA9D24D519AC

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter M. John & David M. John		Date of Receipt MM / DD / YYYY 09 / 09 / 2010		
	Mailing Address PO Box 1566		<b>Transaction ID:</b> A747855C2499C4D86864		
	City Crowley	State LA	Zip Code 70527	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 700.00		
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Monte Richardson		Date of Receipt MM / DD / YYYY 09 / 09 / 2010		
	Mailing Address 36 Lambeth Dr		<b>Transaction ID:</b> A9BD426D0A97F4A78AA8		
	City Asheville	State NC	Zip Code 28803-3431	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 2500.00		
Name of Employer Retired		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Sammy Russo		Date of Receipt MM / DD / YYYY 09 / 09 / 2010		
	Mailing Address P o Box 80294		<b>Transaction ID:</b> A95640C51A6C949A2B54		
	City Lafayette	State LA	Zip Code 70598-0294	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 1000.00		
Name of Employer Stabil Drilling		Occupation CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Smith	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 17930 Augusta Pointe	<b>Transaction ID:</b> AEE0587EFE8274E4FB93
	City State Zip Code Baton Rouge LA 70810-5969	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Pointer Smith Contracting Corp Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 2266	<b>Transaction ID:</b> ABA2FBCC05BAF40BF916
	City State Zip Code Houma LA 70361-2266	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: T Baker Smith Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Frank M. Stinson	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 52008	<b>Transaction ID:</b> A6415CB00AAFB4530A31
	City State Zip Code Shreveport LA 71135-2008	Amount of Each Receipt this Period 800.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Roundree Automotive Group Llc Occupation: CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Wade Svendsen		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 1919 Woodland Dr.		<b>Transaction ID:</b> A7E5D1403A6784F20832
	City Baton Rouge	State LA	Zip Code 70808-1936
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
	Name of Employer Self	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lewis E Topper		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 3605 Camp Mineola rd		<b>Transaction ID:</b> A1AB88CD2A9FD43F0911
	City Mattituck	State NY	Zip Code 11952-2150
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Fast Food Systems	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Milford Wampold		Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address PO Box 14172		<b>Transaction ID:</b> AB4FA046A7C1B43909CC
	City Baton Rouge	State LA	Zip Code 70898-4172
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
	Name of Employer Hibernia Bank	Occupation Mortgage Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 62
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Karl A Beier	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 2605 N Concord Rd	<b>Transaction ID:</b> AE7B125E4F47E440DA2D
	City State Zip Code Belle Chasse LA 70037-3104	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Beier Radio Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Walter Blessey, Jr.	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 1515 River Oaks Road East	<b>Transaction ID:</b> A16D4593D7B2941B3AC4
	City State Zip Code New Orleans LA 70123-2167	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Blessey Marine Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Jill Canizaro	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 1 Rue Biarritz	<b>Transaction ID:</b> A772983DC76C343D3948
	City State Zip Code New Orleans LA 70112	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 20 / 62</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<p><b>A.</b> Full Name (Last, First, Middle Initial) James A Chance</p> <p>Mailing Address 730 E Kaliste Saloom Rd</p> <p>City State Zip Code <u>Lafayette</u> LA 70508-2547</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer C+C Technologies, Inc.</p> <p>Occupation Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1800.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> A4C8060992313442C846</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">1800.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Mark Dodson</p> <p>Mailing Address 1605 Emberly Oaks Dr</p> <p>City State Zip Code <u>Alexandria</u> LA 71301-2785</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Mid-State Orthopaedics</p> <p>Occupation Physician</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">425.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> A2FF81AB5A8E441F19C9</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">425.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												

<p><b>C.</b> Full Name (Last, First, Middle Initial) Gary L Laborde</p> <p>Mailing Address 839 State St.</p> <p>City State Zip Code <u>New Orleans</u> LA 70118-5841</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Tulane University</p> <p>Occupation Attorney</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2900.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p><b>Transaction ID:</b> A0E36E89FEF3644CF983</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">2900.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	1	0												

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<span style="border: 1px solid black; padding: 2px;">5125.00</span>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 62
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jack Lawton, Jr.  
Mailing Address 1409 Kirkman St  
City Lake Charles State LA Zip Code 70601-5344  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Jack Lawton, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: A34EEE8CFABBC415A939  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Lawton  
Mailing Address 3206 Choupique Rd  
City Sulphur State LA Zip Code 70665-8421  
FEC ID number of contributing federal political committee. **C**  
Name of Employer William B. Lawton Co. Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1900.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: AF899AD8DACF5445A913  
Amount of Each Receipt this Period 1900.00

**C.** Full Name (Last, First, Middle Initial)  
Garry L Lewis  
Mailing Address 3458 Drusilla Ln Suite g  
City Baton Rouge State LA Zip Code 70809-1882  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1900.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: AE2C4264A27574C44A4C  
Amount of Each Receipt this Period 1900.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5300.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 62  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roy Martin

Mailing Address 2020 Horseshoe Dr

City State Zip Code  
Alexandria LA 71301-2727

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** A3CC1725A06424522B9A

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ray P Oden

Mailing Address 702 Thora Blvd

City State Zip Code  
Shreveport LA 71106-1824

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 8395.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** A6045A45BABB84D888E3

Amount of Each Receipt this Period  
3395.00

**C.** Full Name (Last, First, Middle Initial)  
Allan T Parr, Jr.

Mailing Address 7015 Hwy 190 East Service Rd #101

City State Zip Code  
Covington LA 70433

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

Name of Employer Premier Pain Center Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** A2EA390AB20F54B58BE3

Amount of Each Receipt this Period  
2800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6695.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 62  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)  
Robert A Savoie

Mailing Address 120 Audubon Blvd

City State Zip Code  
New Orleans LA 70118-5541

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

Name of Employer Geocent, LLC Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** A5A4E092379C54519A9C

Amount of Each Receipt this Period  
800.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. William Henry Shane

Mailing Address 3925 N. I 10 Service Rd W. , Suite

City State Zip Code  
Metairie LA 70002-6831

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

Name of Employer Self Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** A439C30448FB74868B1D

Amount of Each Receipt this Period  
1600.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Foster Walker, III

Mailing Address 100 Iris Dr

City State Zip Code  
Boyce LA 71409-8642

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

Name of Employer Walker Automotive Occupation Auto Dealer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** AC8509A92666A47E3949

Amount of Each Receipt this Period  
900.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3300.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 62  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Patrick Waring  
Mailing Address 223 Focist St  
City Metairie State LA Zip Code 70005-3431  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: A937F50A1B2F94E1CADA  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wade Webster  
Mailing Address 4614 Carondelet St  
City New Orleans State LA Zip Code 70115-4822  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fowler Rodriguez Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: A11E4790DBF084E75B41  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Donald Zadeck  
Mailing Address 504 Texas St Suite 300  
City Shreveport State LA Zip Code 71101-3526  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Zadeck Energy Group, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2200.00  
Date of Receipt 09 / 16 / 2010  
Transaction ID: A8CFAA273B9AD4D5F876  
Amount of Each Receipt this Period 2200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6200.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 62
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)  
Sammy R. Zito

Mailing Address 732 Rural St

City State Zip Code  
New Orleans LA 70123-3660

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

Name of Employer Occupation  
Zito Companies Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** AE4A7DE7C36B244EBA6E

Amount of Each Receipt this Period  
1200.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Keith Desonier, Jr.

Mailing Address 917 Contraband Ln

City State Zip Code  
Lake Charles LA 70605-1434

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

Name of Employer Occupation  
Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2010

**Transaction ID:** A578C2F915D834B25AC1

Amount of Each Receipt this Period  
400.00

Generic Foundation Donation

**C.**

Full Name (Last, First, Middle Initial)  
Mr. William Mills

Mailing Address PO Box 52592

City State Zip Code  
Lafayette LA 70505-2592

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

Name of Employer Occupation  
Wpm Exploration Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2010

**Transaction ID:** A055BD977A6654436AA2

Amount of Each Receipt this Period  
5000.00

Generic Donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6600.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 62  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Alice Munger  
Mailing Address 2729 Constance St  
City New Orleans State LA Zip Code 70130-5517  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00  
Date of Receipt 09 / 21 / 2010  
Transaction ID: A9785F99EDB6C4363AF0  
Amount of Each Receipt this Period 100.00  
Generic Monthly Trust

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ruth Ulrich  
Mailing Address 406 Forsythe Avenue  
City Monroe State LA Zip Code 71201-4008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Out Of The Box Designs Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1003.49  
Date of Receipt 09 / 21 / 2010  
Transaction ID: A5559913FE2C840B8A03  
Amount of Each Receipt this Period 100.00  
Generic Monthly Trust

**C.** Full Name (Last, First, Middle Initial)  
Andre L Clemons  
Mailing Address 107 1/2 Commission Blvd  
City Lafayette State LA Zip Code 70508-3514  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pres/ GEO Occupation Linear Controls  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 09 / 24 / 2010  
Transaction ID: AC27E06A8ED4D495A855  
Amount of Each Receipt this Period 2500.00  
Generic Donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2700.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 62  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)  
Gretchen Vincent

Mailing Address 214 Brahmwell Court

City State Zip Code  
Lafayette LA 70508-1827

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2010

**Transaction ID:** A3E359E92959249778F0

Amount of Each Receipt this Period  
2500.00

Victory Donation

**B.**

Full Name (Last, First, Middle Initial)  
Edward Patterson

Mailing Address PO Box 2545

City State Zip Code  
Morgan City LA 70381-2545

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

Name of Employer Occupation  
Patterson Barge Rental Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2010

**Transaction ID:** A3E4B541A218644EBBA3

Amount of Each Receipt this Period  
700.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Peter M John

Mailing Address PO Box 1566

City State Zip Code  
Crowley LA 70527-1566

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

Name of Employer Occupation  
Peter M. John & David M. John Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2010

**Transaction ID:** A7A4155A981D74A7FAD7

Amount of Each Receipt this Period  
700.00

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	96870.00

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

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

FOR LINE NUMBER: PAGE 28 / 62  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address 310 First Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 11300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 1 4 / 2 0 1 0

**Transaction ID:** A0CC24E3BC2AC4DA5882

Amount of Each Receipt this Period  
6300.00

Victory Transfer

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

Mailing Address 310 First Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 17600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 1 0

**Transaction ID:** A5688C0D6A32346B8A15

Amount of Each Receipt this Period  
6300.00

Victory Funds

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12600.00**

**TOTAL** This Period (last page this line number only) ..... ► **12600.00**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 62

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b>	Full Name (Last, First, Middle Initial) Olsen & Shulov  Mailing Address 1609 Shoal Creek Blvd #203  City Austin State TX Zip Code 78701-1022  Purpose of Disbursement Direct Mail Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB3662AD49B774FA9A44 Date of Disbursement 09 / 09 / 2010  Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Office Depot Credit Plan  Mailing Address P. O. Box 9020  City Des Moines State IA Zip Code 50368-9020  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0892E4B51B324C49B3E Date of Disbursement 09 / 13 / 2010  Amount of Each Disbursement this Period 44.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Crayon Campus  Mailing Address 9715 Lawndale Dr  City Baton Rouge State LA Zip Code 70818  Purpose of Disbursement Employee Benefit Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B366AAD2051C04D6084E Date of Disbursement 09 / 24 / 2010  Amount of Each Disbursement this Period 275.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1319.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1319.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 62

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Iberia Bank Visa <hr/> Mailing Address PO Box 30495 <hr/> City Tampa State FL Zip Code 33630-3495 <hr/> Purpose of Disbursement Finance Charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B129408C511CB43FCB7B Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 66.74
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Iberia Bank Visa <hr/> Mailing Address PO Box 30495 <hr/> City Tampa State FL Zip Code 33630-3495 <hr/> Purpose of Disbursement Finance Charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0C586CC5A3D945DFAAC Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 100.19
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Mail Chimp <hr/> Mailing Address 512 Means St Ste 404 <hr/> City Atlanta State GA Zip Code 30318-5788 <hr/> Purpose of Disbursement Email Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BFDDBC6BF84C24EB6BB2 Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 483.00
	Category/ Type
	Category/ Type

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

**649.93**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Baton Rouge Business Report <hr/> Mailing Address PO Box 98509 <hr/> City Baton Rouge State LA Zip Code 70884-9509 Purpose of Disbursement Outreach Party Bldg Expo Booth Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF8863395D6EC4F7B80C Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 597.50 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement Delegation Receipt Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0BB3D727202240C8B54 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1056.13 Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer Madsen <hr/> Mailing Address 20355 Charles Ory Dr <hr/> City Plaquemine State LA Zip Code 70764-5314 Purpose of Disbursement Victory Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B847F269933DA4F71873 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00 Category/Type

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

2903.63

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

3553.56

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 32 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Acme Oyster House	Nature of Debt (Purpose): Meals
Mailing Address 3000 Veterans Blvd	
City Metairie State LA ZIP Code 70002	

Outstanding Balance Beginning This Period 161.52	<b>Transaction ID: D08FAE847AFE74807855</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 161.52

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Albertson's	Nature of Debt (Purpose): supplies- snacks
Mailing Address 9990 Bluebonnet Rd	
City Baton Rouge State LA ZIP Code 70820	

Outstanding Balance Beginning This Period 46.95	<b>Transaction ID: D36772175EE414B3DB35</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 46.95

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International	Nature of Debt (Purpose): Software Hosting
Mailing Address 205 Pennsylvania Ave SE	
City Washington State DC ZIP Code 20003	

Outstanding Balance Beginning This Period 7200.00	<b>Transaction ID: D0331390CF1564350925</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7200.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>7408.47</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> At&t	Nature of Debt (Purpose): Cellphone
Mailing Address PO Box 945800	
City Maitland State FL ZIP Code 32794-5800	

Outstanding Balance Beginning This Period	Transaction ID: D95D955D698B44B66A56	
184.74		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	184.74

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Best Buy	Nature of Debt (Purpose): Supplies
Mailing Address Mall of Louisiana	
City Baton Rouge State LA ZIP Code 70809	

Outstanding Balance Beginning This Period	Transaction ID: D798E94D7001F42FB926	
217.99		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	217.99

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Budget Rent A Car	Nature of Debt (Purpose): Travel
Mailing Address	
City Hanover State MD ZIP Code	

Outstanding Balance Beginning This Period	Transaction ID: D68F7E43FADD6485A936	
191.78		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	191.78

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	594.51
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cafe Marigny	Nature of Debt (Purpose): Meals
Mailing Address 640 Frenchmen St	
City State ZIP Code New Orleans LA 70116	

Outstanding Balance Beginning This Period 82.24	<b>Transaction ID:</b> DEBFB2ECFAFE94AF791F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 82.24

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Grocery	Nature of Debt (Purpose): Meals
Mailing Address 701 Spanish Town Road	
City State ZIP Code Baton Rouge LA	

Outstanding Balance Beginning This Period 32.84	<b>Transaction ID:</b> D8B97455FCE0E4ADFA70	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32.84

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Chevron Gas Station	Nature of Debt (Purpose): auto gasoline
Mailing Address 510 Saint Ferdinand St	
City State ZIP Code Baton Rouge LA 70802	

Outstanding Balance Beginning This Period 122.00	<b>Transaction ID:</b> D9295EFAE5DC04E0B892	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 122.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	237.08
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Circle K			Nature of Debt (Purpose): auto gasoline
Mailing Address 9110 Airline Hwy			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period <input type="text" value="40.62"/>		<b>Transaction ID: D13033851ECE245B5BB5</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="40.62"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Continental Airlines			Nature of Debt (Purpose): Travel
Mailing Address 900 Grand Plaza Drive			
City Houston	State TX	ZIP Code 77067	

Outstanding Balance Beginning This Period <input type="text" value="38.00"/>		<b>Transaction ID: D275D506D213B4F459AF</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="38.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Courtyard By Marriot Navyard			Nature of Debt (Purpose): Travel
Mailing Address 140 L Street SE			
City Washington	State DC	ZIP Code 20003-3335	

Outstanding Balance Beginning This Period <input type="text" value="303.27"/>		<b>Transaction ID: D294298D038FC482DA79</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="303.27"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="381.89"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Crescent City Brewhouse	Nature of Debt (Purpose): Meals
Mailing Address 527 Decatur Street	
City State ZIP Code New Orleans LA 70130	

Outstanding Balance Beginning This Period 88.00	<b>Transaction ID:</b> D2201137A48C647659C6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 88.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Crown Trophy	Nature of Debt (Purpose): supplies- nameplates
Mailing Address 4215 S Sherwood Forest Blvd	
City State ZIP Code Baton Rouge LA 70816-4323	

Outstanding Balance Beginning This Period 26.16	<b>Transaction ID:</b> D0F32C58585484FCE95D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.16

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Domino's Pizza	Nature of Debt (Purpose): Meals
Mailing Address 7865 Jefferson Hwy	
City State ZIP Code Baton Rouge LA 70809	

Outstanding Balance Beginning This Period 188.51	<b>Transaction ID:</b> DF6AF01634F7549559D9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 188.51

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	302.67
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Drago's Restaurant			Nature of Debt (Purpose): meals
Mailing Address 3232 N Arnoult Rd			
City Metairie	State LA	ZIP Code 70002	

Outstanding Balance Beginning This Period <input type="text" value="153.85"/>		<b>Transaction ID:</b> D8D19D3B52A1C447581F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="153.85"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> East Buffet			Nature of Debt (Purpose): Meals
Mailing Address 2750 Severn Avenue			
City Metairie	State LA	ZIP Code 70002	

Outstanding Balance Beginning This Period <input type="text" value="141.74"/>		<b>Transaction ID:</b> D1DE2A07F255A4BFB8E2	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="141.74"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Exxon			Nature of Debt (Purpose): auto gasoline
Mailing Address 4527 Perkins Rd			
City Baton Rouge	State LA	ZIP Code 70808-3036	

Outstanding Balance Beginning This Period <input type="text" value="331.94"/>		<b>Transaction ID:</b> D30732137DAFC41FC8AB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="331.94"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="627.53"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Fury's			Nature of Debt (Purpose): Meals
Mailing Address 724 Martin Behrmann			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period		Transaction ID: D68AA863E9A3A4290BF1	
90.39			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	90.39	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Halekulani Hotel			Nature of Debt (Purpose): Travel
Mailing Address 2199 Kalia Road			
City Honolulu	State HI	ZIP Code 96815	

Outstanding Balance Beginning This Period		Transaction ID: D9252A2905D4D4B2C902	
254.66			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	254.66	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Hilton Hotels			Nature of Debt (Purpose): Auto Parking
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period		Transaction ID: D6BF10546BA394C58BBA	
24.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	24.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	369.05
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Meals
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="26.29"/>		<b>Transaction ID:</b> DD6BCE701C1EF4B3D972	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="26.29"/>	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Auto Parking
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="104.00"/>		<b>Transaction ID:</b> DAE50EAA1917A482FA98	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="104.00"/>	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels			Nature of Debt (Purpose): Generic Travel
Mailing Address 7930 Jones Branch Dr Ste 1100			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="1300.82"/>		<b>Transaction ID:</b> DC816E81D2E9C41B59AC	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1300.82"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1431.11"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 40 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Hotels	Nature of Debt (Purpose): Travel
Mailing Address 7930 Jones Branch Dr Ste 1100	
City State ZIP Code McLean VA 22102	

Outstanding Balance Beginning This Period <input type="text" value="73.75"/>	<b>Transaction ID:</b> D8B5D528FB7BE43FEABB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="73.75"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson News	Nature of Debt (Purpose): Travel
Mailing Address New Orleans Airport	
City State ZIP Code Kenner LA 70065	

Outstanding Balance Beginning This Period <input type="text" value="6.63"/>	<b>Transaction ID:</b> DB9148B76A2E642AA843	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6.63"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Iberia Bank Visa	Nature of Debt (Purpose): Jan- Jun finance fees
Mailing Address PO Box 30495	
City State ZIP Code Tampa FL 33630-3495	

Outstanding Balance Beginning This Period <input type="text" value="430.73"/>	<b>Transaction ID:</b> DA18CC9AE747E4AA5B6E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="430.73"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="511.11"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Italian Pie			Nature of Debt (Purpose): Meals
Mailing Address 11748 Coursey Blvd			
City Baton Rouge	State LA	ZIP Code 70816-4401	

Outstanding Balance Beginning This Period		Transaction ID: D8E5D92C0B0D24FA2B79	
147.91			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	147.91	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Jamestown Associates			Nature of Debt (Purpose): FEA Volunteer Mass Mail
Mailing Address 5 Mapleton Rd, Suite 300			
City Princeton	State NJ	ZIP Code 08540	

Outstanding Balance Beginning This Period		Transaction ID: D639C2E9CBC5841199BF	
3800.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3800.00	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor La Political Review			Nature of Debt (Purpose): Subscription
Mailing Address PO Box 6			
City Baton Rouge	State LA	ZIP Code 70821	

Outstanding Balance Beginning This Period		Transaction ID: D28826217F9EF4DB1ADA	
145.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	145.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	4092.91
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Marriott Hotel			Nature of Debt (Purpose): Travel
Mailing Address 10400 Fernwood Rd			
City Bethesda	State MD	ZIP Code 20817	

Outstanding Balance Beginning This Period		Transaction ID: D5BBD8CE00EB348E1902	
111.87			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	111.87	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mulate's Restaurant			Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 201 Julia St			
City New Orleans	State LA	ZIP Code 70130	

Outstanding Balance Beginning This Period		Transaction ID: DBC7CFB1D57B74374BC7	
113.25			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	113.25	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mystic Krewe of LA			Nature of Debt (Purpose): Casting fees
Mailing Address PO Box 65122			
City Baton Rouge	State LA	ZIP Code 70896	

Outstanding Balance Beginning This Period		Transaction ID: DA740B2E7EF954F809BB	
715.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	715.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	940.12
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> New South Parking Systems			Nature of Debt (Purpose): Travel
Mailing Address Louis Armstrong Airport			
City Kenner	State LA	ZIP Code 70065	

Outstanding Balance Beginning This Period <input type="text" value="54.00"/>		Transaction ID: DBD6CE29CCE1247CDBA5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="54.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> NewsMax Magazine			Nature of Debt (Purpose): Subscription
Mailing Address PO Box 20989			
City West Palm Beach	State FL	ZIP Code 33416	

Outstanding Balance Beginning This Period <input type="text" value="54.00"/>		Transaction ID: DEE5CA476E5DC46E1BAA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="54.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Office Depot			Nature of Debt (Purpose): Generic Postage
Mailing Address Veteran's Blvd			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period <input type="text" value="228.80"/>		Transaction ID: D5D6C8BF97D0140849B9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="228.80"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="336.80"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Olsen & Shulov

Nature of Debt (Purpose):  
Generic Direct Mail Printing

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code  
Austin TX 78701-1022

Outstanding Balance Beginning This Period	<b>Transaction ID: DFFA2A98A133441C79D0</b>	
13614.54		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	13614.54

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Olsen & Shulov

Nature of Debt (Purpose):  
Generic Direct Mail Postage

Mailing Address 1609 Shoal Creek Blvd #203

City State ZIP Code  
Austin TX 78701-1022

Outstanding Balance Beginning This Period	<b>Transaction ID: D151679745D854CD0B88</b>	
3883.42		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1000.00	2883.42

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Papa John's Pizza

Nature of Debt (Purpose):  
Meals & Entertainment

Mailing Address 1580 Nicholson Dr

City State ZIP Code  
Baton Rouge LA 70802

Outstanding Balance Beginning This Period	<b>Transaction ID: DE466ECFCC25045CC92A</b>	
186.67		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	186.67

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>16684.63</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Paypal	Nature of Debt (Purpose): bank fees
Mailing Address	
City State ZIP Code CA	

Outstanding Balance Beginning This Period 1.95	Transaction ID: D64EF5167332D471CBA1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.95

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Premiere Marketing	Nature of Debt (Purpose): Supplies-books
Mailing Address 109 International Dr	
City State ZIP Code Franklin TN 37067	

Outstanding Balance Beginning This Period 50.00	Transaction ID: DCA5F8BFAEC424DBB90D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Premium Parking	Nature of Debt (Purpose): Auto parking
Mailing Address 900 St Charles Ave	
City State ZIP Code New Orleans LA 70130	

Outstanding Balance Beginning This Period 13.00	Transaction ID: D6E000AC5F42445ED99C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	64.95
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> R&O's Pizza			Nature of Debt (Purpose): Meals
Mailing Address 216 Metairie Hammond Hwy			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period		Transaction ID: DE95158326F1A4359AB9	
352.93			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	352.93	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Racetrac			Nature of Debt (Purpose): auto gasoline
Mailing Address 3425 S Sherwood Forest Blvd			
City Baton Rouge	State LA	ZIP Code 70816	

Outstanding Balance Beginning This Period		Transaction ID: D59F893BCB86748DC83D	
39.79			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	39.79	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Republican National Committee			Nature of Debt (Purpose): fees
Mailing Address 310 First Street, SE			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period		Transaction ID: D9832197165124FD598E	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	592.72
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 47 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Ruth's Chris Steakhouse	Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 4836 Constitution Ave	
City Baton Rouge State LA ZIP Code 70808	

Outstanding Balance Beginning This Period 360.79	Transaction ID: D030E05F0BF6E42BDAB4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 360.79

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Semolina	Nature of Debt (Purpose): meals
Mailing Address 4506 Jamestown Ave	
City Baton Rouge State LA ZIP Code	

Outstanding Balance Beginning This Period 70.87	Transaction ID: DA4E6B722076C494EA69	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 70.87

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Shell Oil Corporation	Nature of Debt (Purpose): Auto Gasolione
Mailing Address One Shell Square	
City Houston State TX ZIP Code 77002	

Outstanding Balance Beginning This Period 217.07	Transaction ID: D9A9742BF0CBB47C5B70	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 217.07

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	648.73
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Shoney's Metairie			Nature of Debt (Purpose): meals
Mailing Address 759 Veteran's Memorial Blvd			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period		Transaction ID: DFBACE0FE2BAB47EC861	
44.39			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	44.39	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Sylvester Management			Nature of Debt (Purpose): Training
Mailing Address PO Box 986			
City Irmo	State SC	ZIP Code 29063	

Outstanding Balance Beginning This Period		Transaction ID: D90905C0E35064F03983	
1100.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1100.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Texaco			Nature of Debt (Purpose): auto gasoline
Mailing Address Jefferson Hwy			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period		Transaction ID: DF162E44ED1B64CD0B0C	
31.18			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	31.18	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	1175.57
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 49 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Crescent Spoon	Nature of Debt (Purpose): meals
Mailing Address 3120 Cleary Ave	
City Metairie State LA ZIP Code 70002	

Outstanding Balance Beginning This Period 26.73	<b>Transaction ID:</b> DF38238E76A73408195A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.73

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Ups Store	Nature of Debt (Purpose): Generic Postage
Mailing Address 2851 Johnston St	
City Lafayette State LA ZIP Code 70503	

Outstanding Balance Beginning This Period 63.78	<b>Transaction ID:</b> DE500892612A8488981B	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 63.78

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor TJ Ribs	Nature of Debt (Purpose): Meals & Entertainment
Mailing Address Acadian Thruway	
City Baton Rouge State LA ZIP Code 70808	

Outstanding Balance Beginning This Period 105.84	<b>Transaction ID:</b> D04D76C27753B46B98BF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 105.84

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	196.35
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> US Post Office			Nature of Debt (Purpose): Postage
Mailing Address Bluebonnet Blvd			
City Baton Rouge	State LA	ZIP Code 70809	

Outstanding Balance Beginning This Period		Transaction ID: D612CC811E0BD4422B74	
112.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	112.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Villere's Florist			Nature of Debt (Purpose): Benevolence
Mailing Address 750 Martin Behrman			
City Metairie	State LA	ZIP Code 70005	

Outstanding Balance Beginning This Period		Transaction ID: D2A478061B5754085968	
134.19			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	134.19	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Walk On's Bistreaux			Nature of Debt (Purpose): Meals & Entertainment
Mailing Address 3838 Burbank			
City Baton Rouge	State LA	ZIP Code 70808	

Outstanding Balance Beginning This Period		Transaction ID: D86530EAD1A454CAB92A	
83.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	83.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	329.19
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Wendy's Hamburgers			Nature of Debt (Purpose): meals
Mailing Address Sherwood Forest Blvd			
City Baton Rouge	State LA	ZIP Code 70816	

Outstanding Balance Beginning This Period		Transaction ID: D90FB67465A6E4FB4B29	
54.33			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	54.33	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Will Vanderbrook Cpa			Nature of Debt (Purpose): Accounting Services
Mailing Address 2900 Clearview Pkwy Suite 206			
City Metairie	State LA	ZIP Code 70006-6532	

Outstanding Balance Beginning This Period		Transaction ID: D059CF35BF30349B082E	
14615.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	14615.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Windrush Grill			Nature of Debt (Purpose): Travel
Mailing Address 1023 Provence PL			
City Shreveport	State LA	ZIP Code 71106	

Outstanding Balance Beginning This Period		Transaction ID: DBB65513DD1E348408C2	
135.66			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	135.66	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	14804.99
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 52 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Winn Dixie Store	Nature of Debt (Purpose): Meals snacks
Mailing Address Coursey Blvd	
City Baton Rouge State LA ZIP Code 70816	

Outstanding Balance Beginning This Period 95.75	<b>Transaction ID: DD0F5C31C33264CB1933</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 95.75

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Wyndham Hotels	Nature of Debt (Purpose): Travel
Mailing Address 1910 8th Ave NE	
City Aberdeen State SD ZIP Code 57401	

Outstanding Balance Beginning This Period 94.08	<b>Transaction ID: DD55A875E37834238880</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 94.08

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>189.83</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	<b>51920.21</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>51920.21</b>

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- X  Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative  Generic Voter Drive  Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

NAME OF ACCOUNT RPL-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 30 / 2010	TOTAL AMOUNT TRANSFERRED 29600.12
--------------------------------	--	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	29600.12	Transaction ID: H791E94F8BC5E478F996
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	29600.12
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	29600.12

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> Cybersource			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1295 Charleston Road			Allocated Activity or Event Year-To-Date 83165.03		
City Mountainview	State CA	Zip Code 94043	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Credit Card Fees			Transaction ID: HB535F6B50B4045D29EF		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.89		71.06		89.95

<b>B. Full Name (Last, First, Middle Initial)</b> Pat Bergeron			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6344 Peggy St			Allocated Activity or Event Year-To-Date 90165.03		
City Baton Rouge	State LA	Zip Code 70808-4253	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Professional Servs			Transaction ID: HA772CDFC435E45C1BAF		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Direct Mailing Services, Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12562 N Lakeshore Dr			Allocated Activity or Event Year-To-Date 90165.03		
City Walker	State LA	Zip Code 70785	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Professional Servs			Transaction ID: H3F371CA27EBB48E18FD		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		4740.00		6000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1488.89		5601.06		7089.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Liquid Ventures

Mailing Address  
12232 Industriplex Blvd Ste 1

City State Zip Code  
Baton Rouge LA 70809-7105

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Admin

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

110503.88

Date 09 / 09 / 2010

Transaction ID: HE7AE10890359413E805

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3570.00		13430.00		17000.00

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

Mailing Address  
10400 Fernwood Rd

City State Zip Code  
Bethesda MD 20817

Purpose of Disbursement:  
Travel

Category/  
Type

Activity or Event Identifier:  
Admin

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

110503.88

Date 09 / 09 / 2010

Transaction ID: HE66C54AF71EA43E4B73

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.66		623.19		788.85

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

Mailing Address  
2900 Clearview Pkwy Suite 206

City State Zip Code  
Metairie LA 70006-6532

Purpose of Disbursement:  
Accounting Services

Category/  
Type

Activity or Event Identifier:  
Admin

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

110503.88

Date 09 / 09 / 2010

Transaction ID: H710881F3501540599DA

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.50		2014.50		2550.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4271.16		16067.69		20338.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> Marriott Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10400 Fernwood Rd			Allocated Activity or Event Year-To-Date 111540.64		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Bethesda	MD	20817	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Travel			Transaction ID: HAAB0F32AA1E44DD681D		
Activity or Event Identifier: Admin			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.09		421.65		533.74

<b>B. Full Name (Last, First, Middle Initial)</b> Delta Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 20706			Allocated Activity or Event Year-To-Date 111540.64		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Atlanta	GA	30320	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Travel			Transaction ID: H885AE5931A9247209AB		
Activity or Event Identifier: Admin			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.36		347.44		439.80

<b>C. Full Name (Last, First, Middle Initial)</b> Maker's Mark Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13333Walnut St			Allocated Activity or Event Year-To-Date 111540.64		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Kansas City	MO		Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Travel Meals			Transaction ID: HOA318F2960824CFBA0E		
Activity or Event Identifier: Admin			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.28		49.94		63.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.73		819.03		1036.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> Aaron Baer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11155 Southfork Dr Apt 3023			Allocated Activity or Event Year-To-Date 114455.31		
City Baton Rouge	State LA	Zip Code 70816	Date MM / DD / YYYY 09 / 14 / 2010		
Purpose of Disbursement: Salary			Transaction ID: HE952B2066ECC4575987		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.59		1367.80		1731.39

<b>B. Full Name (Last, First, Middle Initial)</b> Karen Connolly			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6880 Christopher Ave			Allocated Activity or Event Year-To-Date 114455.31		
City Greenwell Springs	State LA	Zip Code 70739-4253	Date MM / DD / YYYY 09 / 14 / 2010		
Purpose of Disbursement: Salary			Transaction ID: H43CF52BB9CB34E75BE6		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.49		934.79		1183.28

<b>C. Full Name (Last, First, Middle Initial)</b> Iberia Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3700 Essen Ln			Allocated Activity or Event Year-To-Date 115696.02		
City Baton Rouge	State LA	Zip Code 70809-2134	Date MM / DD / YYYY 09 / 22 / 2010		
Purpose of Disbursement: Bank Fees			Transaction ID: HEF57943975B2455B829		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.17		162.42		205.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
655.25		2465.01		3120.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> Internal Revenue Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1210			Allocated Activity or Event Year-To-Date 115696.02		
City Charlotte	State NC	Zip Code 28201-1210	Date M M / D D / Y Y Y Y 09 / 22 / 2010		
Purpose of Disbursement: Payroll Taxes			Transaction ID: HA5DADBC0DAEE46E885C		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.38		817.74		1035.12

<b>B. Full Name (Last, First, Middle Initial)</b> CIT Technology Fin Serv Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21146 Network Place			Allocated Activity or Event Year-To-Date 117300.92		
City Chicago	State IL	Zip Code 60673	Date M M / D D / Y Y Y Y 09 / 24 / 2010		
Purpose of Disbursement: Copier Rental			Transaction ID: HF445C01BD53242008FC		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.61		412.36		521.97

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2167			Allocated Activity or Event Year-To-Date 117300.92		
City Folsom	State CA	Zip Code 95763	Date M M / D D / Y Y Y Y 09 / 24 / 2010		
Purpose of Disbursement: Cell Phones			Transaction ID: HC17374A00F5E472185C		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.67		96.59		122.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
352.66		1326.69		1679.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> US Post Office			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Bluebonnet Blvd			Allocated Activity or Event Year-To-Date 117300.92		
City Baton Rouge	State LA	Zip Code 70809	Date MM / DD / YYYY 09 / 24 / 2010		
Purpose of Disbursement: Postage			Transaction ID: H416B109BCB8D4C4DAF0		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.55		122.45		155.00

<b>B. Full Name (Last, First, Middle Initial)</b> At&t			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 945800			Allocated Activity or Event Year-To-Date 117300.92		
City Maitland	State FL	Zip Code 32794-5800	Date MM / DD / YYYY 09 / 24 / 2010		
Purpose of Disbursement: Phone Expense			Transaction ID: H521F61DE76364C739AB		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.57		412.17		521.74

<b>C. Full Name (Last, First, Middle Initial)</b> Direct Tv			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 60036			Allocated Activity or Event Year-To-Date 117300.92		
City Los Angeles	State CA	Zip Code 90060-0036	Date MM / DD / YYYY 09 / 24 / 2010		
Purpose of Disbursement: TV			Transaction ID: H69ACA526AF1A43B7BD2		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.64		66.35		83.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.76		600.97		760.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Full Name (Last, First, Middle Initial)</b> At&t			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 945800			Allocated Activity or Event Year-To-Date 117300.92		
City Maitland	State FL	Zip Code 32794-5800	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Cellphone Expense			Transaction ID: H108B1E696887454B939		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.73		134.43		170.16

<b>B. Full Name (Last, First, Middle Initial)</b> Kentwood Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11465 Reiger Rd			Allocated Activity or Event Year-To-Date 117300.92		
City Baton Rouge	State LA	Zip Code 70809	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Water Service			Transaction ID: H2084870DE02C4B71921		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.25		23.53		29.78

<b>C. Full Name (Last, First, Middle Initial)</b> Aaron Baer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11155 Southfork Dr Apt 3023			Allocated Activity or Event Year-To-Date 120543.59		
City Baton Rouge	State LA	Zip Code 70816	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H72C6156E5A2C4317862		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.59		1367.80		1731.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
405.57		1525.76		1931.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Karen Connolly

Mailing Address  
6880 Christopher Ave

City	State	Zip Code
Greenwell Springs	LA	70739-4253

Purpose of Disbursement:  
Salary

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120543.59

Activity or Event Identifier:  
Admin

Date 09 / 30 / 2010

Transaction ID: H7E3A2A077B664A9E967

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.49		934.79		1183.28

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

Mailing Address  
P.O. Box 1210

City	State	Zip Code
Charlotte	NC	28201-1210

Purpose of Disbursement:  
Payroll taxes

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120543.59

Activity or Event Identifier:  
Admin

Date 09 / 30 / 2010

Transaction ID: H70E6E11319654793B4F

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.88		259.12		328.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.37		1193.91		1511.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
7868.39		29600.12		37468.51