

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

ADDRESS (number and street)

720 ST NAZAIRE ROAD

Check if different than previously reported. (ACC)

BROUSSARD

LA

70518

2. FEC IDENTIFICATION NUMBER

C C00491985

CITY

STATE

ZIP CODE

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 Year-End 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

/ / 2012 through / / 2012

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 BENJAMIN L LANDRY

Signature of Treasurer

BENJAMIN L LANDRY

[Electronically Filed]

Date

/ / 2012

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="38538.92"/>	<input type="text" value="38538.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38538.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29700.00"/>	<input type="text" value="29700.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="68238.92"/>	<input type="text" value="68238.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="66844.21"/>	<input type="text" value="66844.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1394.71"/>	<input type="text" value="1394.71"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25200.00	25200.00
(ii) Unitemized	2000.00	2000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	27200.00	27200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	29700.00	29700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	29700.00	29700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	29700.00	29700.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	65244.21	65244.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	65244.21	65244.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	1600.00	1600.00
(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)).....	1600.00	1600.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	66844.21	66844.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66844.21	66844.21

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	29700.00	29700.00
34. Total Contribution Refunds (from Line 28(d))	1600.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28100.00	28100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	65244.21	65244.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	65244.21	65244.21

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. BURT ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 612 TECHVIEW DRIVE

City BERWICK State LA Zip Code 70342

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

Name of Employer DGRS, LLC Occupation MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 07 / 2012
Transaction ID : SA11AI.4256

Amount of Each Receipt this Period 400.00

B. AQUA-TECH SERVICES, LLC
Full Name (Last, First, Middle Initial)

Mailing Address 127 LAFFERTY DR

City BROUSSARD State LA Zip Code 70581

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 01 / 13 / 2012
Transaction ID : SA11AI.4228

Amount of Each Receipt this Period 1600.00

REATTRIBUTE: PAIGE MELANCON

C. AQUA-TECH SERVICES, LLC
Full Name (Last, First, Middle Initial)

Mailing Address 127 LAFFERTY DR

City BROUSSARD State LA Zip Code 70581

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt 01 / 13 / 2012
Transaction ID : SA11AI.4360

Amount of Each Receipt this Period -1600.00

Reattribute: PAIGE MELANCON

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 OF 20
<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial) A. RODNEY BIENVENU		Date of Receipt
Mailing Address 200 RAILROAD AVE		<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
GREENWICH	CT	06830
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4249
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1600.00"/>
Name of Employer	Occupation	
SAGEMAKER	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DEAN BLANCHARD		Date of Receipt
Mailing Address P. O. BOX 931		<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
BREAUX BRIDGE	LA	70517
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4251
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="400.00"/>
Name of Employer	Occupation	
THE MAIDS	OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CHAFFE MCCALL, LLP		Date of Receipt
Mailing Address 2300 ENERGY CENTRE		<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
NEW ORLEANS	LA	70163
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4352
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="-1600.00"/>
Name of Employer	Occupation	Reattribute: JOSEPH MARINO
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="-1600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 8 OF 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. JAMES FONTENOT
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 TRAILWOOD LANE
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MIDSOUTH BANK Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4234
 Amount of Each Receipt this Period
 800.00

B. SR ANDREW L GUINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 960 COUNTY RD 2230
 City DOUGLASSVILLE State TX Zip Code 75560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4254
 Amount of Each Receipt this Period
 1600.00

C. SCOTT KERSTETTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 GUEMSEY LANE
 City YOUNGSSVILLE State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAGUNA OIL TOOL Occupation CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012
Transaction ID : SA11AI.4365
 Amount of Each Receipt this Period
 1600.00
 Reattribute:

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 9 OF 20
	<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. GEORGE KNOST
Full Name (Last, First, Middle Initial)

Mailing Address 1048 FLORIDA BLVD

City State Zip Code
BATON ROUGE LA 70802

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

Name of Employer Occupation
ARKEL INTERNATIONAL VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2012

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period
1600.00

B. LAGUNA OIL TOOLS, LLC
Full Name (Last, First, Middle Initial)

Mailing Address 103 GUEMSEY LANE

City State Zip Code
YOUNGSVILLE LA 70592

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2012

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period
1600.00

C. LAGUNA OIL TOOLS, LLC
Full Name (Last, First, Middle Initial)

Mailing Address 103 GUEMSEY LANE

City State Zip Code
YOUNGSVILLE LA 70592

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2012

Transaction ID : SA11AI.4364

Amount of Each Receipt this Period
-1600.00

Reattribute: SCOTT KESTETTER

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 10 OF 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. JOSEPH MARINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 POYDRAS ST
 STE 2300
 City NEW ORLEANS State LA Zip Code 70163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHAFFEE MCCALL Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2012
Transaction ID : SA11AI.4353
 Amount of Each Receipt this Period
 1600.00
 Reattribute:

B. MEGHAN MARINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1332 G ST., NE
 City WASHINGTON State DC Zip Code 20002-4426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEGISLATIVE ASSISTANT Occupation US HOUSE OF REPRESENTATIVES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4224
 Amount of Each Receipt this Period
 400.00

C. CRAIG MELANCON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1053 TAYLOR RD
 City ST. MARTINVILLE State LA Zip Code 70582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MELANCON FARMS Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4242
 Amount of Each Receipt this Period
 3200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
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 11 OF 20
	<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. PAIGE MELANCON
Full Name (Last, First, Middle Initial)

Mailing Address 127 LAFFERTY DR.

City BROUSSARD	State LA	Zip Code 70518
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FEC ID number of contributing federal political committee. **C**

Name of Employer AQUA TECH	Occupation COE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4361

Amount of Each Receipt this Period
 1600.00

Reattribute:

B. MATTHEW MONCLA
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 53105

City LAFAYETTE	State LA	Zip Code 70505
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FEC ID number of contributing federal political committee. **C**

Name of Employer MONCLA ASSOCIATES	Occupation OFFICER
---------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
 1600.00

C. POOR BOYS RIVERSIDE INN, INC.
Full Name (Last, First, Middle Initial)

Mailing Address 240 TUBING RD

City BROUSSARD	State LA	Zip Code 70518
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2012
Transaction ID : SA11AI.4247

Amount of Each Receipt this Period
 1600.00

SUBTOTAL of Receipts This Page (optional).....▶	4800.00
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 OF 20
<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)
A. ROYAL ENGINEERS & CONSULTANTS

Mailing Address 601 ELYSIAN FIELD AVE

City NEW ORLEANS	State LA	Zip Code 70117
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	13	/	2012

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period
3200.00

REATTRIBUTE: RANDY SMITH

Full Name (Last, First, Middle Initial)
B. ROYAL ENGINEERS & CONSULTANTS

Mailing Address 601 ELYSIAN FIELD AVE

City NEW ORLEANS	State LA	Zip Code 70117
---------------------	-------------	-------------------

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	13	/	2012

Transaction ID : SA11AI.4356

Amount of Each Receipt this Period
-3200.00

Reattribute: RANDY SMITH

Full Name (Last, First, Middle Initial)
C. BARRY R SALSBURY

Mailing Address P. O. BOX 1111

City SLIDELL	State LA	Zip Code 70459
-----------------	-------------	-------------------

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

Name of Employer HARVEST OIL & GAS	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	13	/	2012

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period
1600.00

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 13 OF 20
<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial) A. RUSS A. SETTOON		Date of Receipt
Mailing Address 4449 HIGHWAY 70 S		<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code PIERRE PART LA 70339-4471		Transaction ID : SA11AI.4244
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1600.00"/>
Name of Employer SETTOON MARINCE, INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1600.00"/>	

Full Name (Last, First, Middle Initial) B. RUSS A. SETTOON		Date of Receipt
Mailing Address 4449 HIGHWAY 70 S		<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code PIERRE PART LA 70339-4471		Transaction ID : SA11AI.4246
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1600.00"/>
Name of Employer SETTOON MARINCE, INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3200.00"/>	

Full Name (Last, First, Middle Initial) C. RANDY SMITH		Date of Receipt
Mailing Address 601 ELYSIAN FIELDS AVE		<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code NEW ORLEANS LA 70117		Transaction ID : SA11AI.4357
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="3200.00"/>
Name of Employer ROYAL ENGINEERS	Occupation OWNER	Reattribute:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3200.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 14 OF 20
(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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. WILBUR STILES
Full Name (Last, First, Middle Initial)
Mailing Address 3108 W. OLD SPANISH TRAIL
City NEW IBERIA State LA Zip Code 70560
FEC ID number of contributing federal political committee. **C**
Name of Employer HOUSE OF REPRESENTATIVES Occupation DISTRICT DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2012
Transaction ID : SA11AI.4236
Amount of Each Receipt this Period
800.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	25200.00

**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 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

A. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE CONSTITUTION AVE NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C** C00009282
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11C.4312
 Amount of Each Receipt this Period
 0.00

B. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE CONSTITUTION AVE NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C** C00009282
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2012
Transaction ID : SA11C.4314
 Amount of Each Receipt this Period
 2500.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

**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)

<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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)

A. CHOPS

Mailing Address ALBERTSONS PRKWAY

City BROUSSARD State LA Zip Code 70518

Purpose of Disbursement
DRINKS FOR EVENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2012

Transaction ID : SB21B.4326

Amount of Each Disbursement this Period

578.60

Full Name (Last, First, Middle Initial)

B. COLE CONSULTING, LLC

Mailing Address 1044 ANGELWOOD CIRCLE

City BREAUX BRIDGE State LA Zip Code 70517

Purpose of Disbursement
CONSULTING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2012

Transaction ID : SB21B.4318

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. COLE CONSULTING, LLC

Mailing Address 1044 ANGELWOOD CIRCLE

City BREAUX BRIDGE State LA Zip Code 70517

Purpose of Disbursement
REIMBURSE FOR SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2012

Transaction ID : SB21B.4321

Amount of Each Disbursement this Period

681.39

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

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

3759.99

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)

A. COLE CONSULTING, LLC

Mailing Address 1044 ANGELWOOD CIRCLE

City BREAUX BRIDGE State LA Zip Code 70517

Purpose of Disbursement
REIMBURSE FOR SUPPIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2012

Transaction ID : SB21B.4323

Amount of Each Disbursement this Period

135.79

Full Name (Last, First, Middle Initial)

B. COLE CONSULTING, LLC

Mailing Address 1044 ANGELWOOD CIRCLE

City BREAUX BRIDGE State LA Zip Code 70517

Purpose of Disbursement
CONSULTANT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2012

Transaction ID : SB21B.4329

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. GALLOWAY, JOHNSTON, THOMPkins, BURR & SMITH

Mailing Address AMBASSDOR CAFFERTY PARKWAY

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement
AIR FARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2012

Transaction ID : SB21B.4330

Amount of Each Disbursement this Period

617.70

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

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

3253.49

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)

A. JEFFREY M LANDRY

Mailing Address 101 AUBOR LANE

City NEW IBERIA State LA Zip Code 70563

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: LA District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		03		2012

Transaction ID : SB21B.4316

Amount of Each Disbursement this Period

716.75

Full Name (Last, First, Middle Initial)

B. JEFFREY M LANDRY

Mailing Address 101 AUBOR LANE

City NEW IBERIA State LA Zip Code 70563

Purpose of Disbursement
ROOMS AT HILTON

Candidate Name

Office Sought: House
 Senate
 President
State: LA District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2012

Transaction ID : SB21B.4324

Amount of Each Disbursement this Period

7950.00

Full Name (Last, First, Middle Initial)

C. JEFFREY M LANDRY

Mailing Address 101 AUBOR LANE

City NEW IBERIA State LA Zip Code 70563

Purpose of Disbursement
REIMBURSE FOR HOTELS

Candidate Name

Office Sought: House
 Senate
 President
State: LA District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2012

Transaction ID : SB21B.4328

Amount of Each Disbursement this Period

10297.10

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

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

18963.85

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)

A. MARTIN'S WINE & SPIRITS

Mailing Address 1919 FLORIDA AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
LIQUOR FOR EVENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2012

Transaction ID : **SB21B.4327**

Amount of Each Disbursement this Period

218.93

Full Name (Last, First, Middle Initial)

B. MYSTICK KREWE OF LOUISIANAIN, INC.

Mailing Address P. O. BOX 80518

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement
PAYMENT FOR EVENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2012

Transaction ID : **SB21B.4319**

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

C. MYSTICK KREWE OF LOUISIANAIN, INC.

Mailing Address P. O. BOX 80518

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement
PAYMENT FOR EVENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2012

Transaction ID : **SB21B.4345**

Amount of Each Disbursement this Period

37200.00

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

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

39218.93

65196.26

**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 checked="" 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)
CAJUN POLITICAL ACTION COMMITTEE (CAJUNPAC)

Full Name (Last, First, Middle Initial)

A. BENJAMIN L LANDRY

Mailing Address 720 ST. NAZAIRE

City State Zip Code
BROUSSARD LA 70518

Purpose of Disbursement
unable to attend event

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A.4262

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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